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BEYOND ACCOMMODATION ACCESS PROBLEMS AND RESPONSIBILITIES

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Philosophy and Women's, Gender, and Sexuality Studies

by

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ABSTRACT

Since its bipartisan adoption in 1990, the Americans with Disabilities Act (ADA) has been widely recognized as a momentous turning point in U. S. disability history. Modeled after previous civil rights legislation, the ADA expressly prohibits discrimination based on disability and guarantees equal opportunities for disabled people. To comply with non-discrimination requirements, public and private entities are legally required to provide reasonable accommodations to disabled people unless doing so would generate undue hardship. Using higher education settings as a case study, I show that the system for accommodations exacerbates the inequalities it has been tasked to resolve. Instead of transforming the background conditions that produce systemic inaccessibility for disabled people, institutions treat disabled people's needs as exceptional and seek to accommodate disability within the status quo. Within the current landscape, nondisabled people and institutions must only give thought to accessibility when they are legally required to, and many only do so retroactively, after disabled people have identified failures of compliance. In contrast, and as the necessary counterpart to this predicament, disabled people are required to consider access and guarantee its actualization everywhere they go. The individualization of the responsibility for access results in significant costs and burdens for disabled people. Achieving meaningful access at a societal level (rather than merely access-as-compliance) requires that we move beyond a narrow focus on accommodations and transform existing practices of responsibility around access.

Table of Contents

Introdu	ction	1
I.	The State of Access Now	1
II.	Access Beyond Accommodation	8
III.	Defining Access, Defining Disability	12
IV.	Overview of Chapters	21
Chapter	1: Access and The Promise of Inclusion	24
I.	Introduction	24
II.	The Rhetorical Background of Institutions	26
III.	The Promise of Inclusion	37
IV.	Conclusion: Inclusion Gaps	52
Chapter	2: Access Problems in Higher Education	54
I.	Introduction	54
II.	What About Disabled Faculty?	56
III.	Individual Problems and Individual Solutions	59
IV.	The Lived Experience of Space	65
V.	Crip Time and The Academic Clock	72
VI.	The Medicalization of Disability	80
VII.	Forced Disclosures and Institutional Climates of Distrust	86
VIII.	Conclusion: The Inaccessible Path to Academic Accommodations	91
Chapter	3: Access as Disabled People's Responsibility	94
I.	Introduction	94
II.	Making Invisible Costs and Burdens Apparent	97
III.	Bodily Burdens of Awareness and Costs to Belonging	102
IV.	Temporal Burdens and The Costs of Asynchrony	110
V.	Relational Burdens and Emotional Costs	121
VI.	Conclusion: Too Much Effort, Not Enough Spoons	133
Chapter	4: Avoiding Taking Responsibility for Access	136

I.	Introduction	136
II.	Privileged Irresponsibility and Strategic Avoidance	139
III.	Diffusing the Responsibility for Access	145
IV.	Diverting the Responsibility for Access	154
V.	Delaying Taking Responsibility for Access	162
VI.	Conclusion: Radical Change Is What We Need	169
Conclu	sion	171
I.	Crafting New Stories and Practices	171
II.	Sharing Responsibility for Access: Some Guiding Coordinates	175
Bibliog	raphy	183

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Introduction

I. The State of Access Now

Since its bipartisan adoption in 1990, the Americans with Disabilities Act (ADA) has been widely recognized as a momentous turning point in U. S. disability history. Its adoption was the result of tireless grassroots advocacy efforts by disabled people and their allies. Modeled after previous civil rights legislation, the ADA expressly prohibits discrimination based on disability and guarantees equal opportunities for disabled people. The law is divided into five titles covering distinct areas of public life, including employment, education, transportation, and access to governmental programs and services. A person is protected by the ADA if she possesses or is perceived by others as possessing an impairment that substantially limits her life activities. To comply with non-discrimination requirements, public and private entities are legally required to provide reasonable accommodations to disabled people unless doing so would generate undue hardship. The law defines reasonable accommodations as individual adjustments or modifications aimed at removing barriers to participation for disabled people. By treating accessibility as a federal requirement, the law seeks to redress the forms of social exclusion historically experienced by disabled people.

In July of 2020, the ADA celebrated its 30th anniversary amid a global pandemic that has disproportionately killed disabled people and is described by many as one of the greatest mass disabling events in recent history. Several news media outlets covered this landmark celebration and retraced the history of the law's adoption. Politicians also joined in the celebration. Then-president Donald Trump released a statement sharing his administration's commitment to "support the full participation and inclusion of the more than 61 million Americans currently living with disabilities by continuing to work to expand their access to everyday life" (Administration of Donald J. Trump 2020). At the same time as disability

activists across the nation denounced systemic bias and discrimination against disabled people in state triage protocols, the Trump administration emphasized its efforts to address the COVID-19 pandemic and guarantee disabled people access to the care they need. A year later, on the 31st anniversary of the law's adoption, President Joe Biden praised the ADA for its role in advancing equality for millions of disabled Americans. As a gesture of active commemoration, his administration adopted Executive Order 14035 on Diversity, Equity, Inclusion, and Accessibility. This order announces accessibility as a federal priority and frames the provision of reasonable accommodations to qualified disabled individuals as the key to creating a "stronger and more effective workforce" (The White House 2021).

Disabled people's perspectives on the ADA's ongoing legacy often do not mirror this political praise and fanfare. While many agree we should celebrate the achievements of the disability rights movement, disabled people's everyday experiences are a reminder of just how many barriers to accessibility persist across all spheres of society. Indeed, in the more than thirty years since the law's adoption, there is much that has not improved. In educational settings, high school graduation rates for disabled students are almost twenty points lower than those for nondisabled students (Welding 2023). Disabled students have lower college graduation rates than nondisabled students and earn less once they enter the job market (Butrymowicz and Mader 2017). In fact, the ADA has done little to redress the forms of economic disenfranchisement disabled people experience. Rates of unemployment among disabled people remain significantly higher than those for nondisabled people across all age groups and levels of educational attainment (Bureau of Labor Statistics 2023). Nondisabled workers are three times more likely to be employed than disabled workers and disabled workers are more likely to occupy precarious part-time positions because they cannot find full-time work (Ives-Rublee, Khattar, and Roberts 2022). The adoption of the ADA has not

substantially altered employers' perceptions of disabled workers. A 2011 study of employer attitudes toward disability asked human resource professionals and supervisors why they believed employers were reluctant to hire and retain disabled workers (Kaye, Jans, and Jones 2011). 90% of respondents cited concerns with the costs of providing reasonable accommodations as a reason why employers do not hire disabled workers and nearly 40% of them suggested that employers view disabled workers as "problem employees" (529). Due to discriminatory hiring practices, many disabled people are systematically denied employment opportunities.

In this context, rather unsurprisingly, many disabled people have extremely low incomes. Disabled adults live in poverty at twice the rate of nondisabled adults. The numbers are even more dire for disabled women and disabled people of color (Altiraifi 2019; Goodman et al. 2017). In the United States, disabled people from low-income households may be eligible for Supplemental Security Income (SSI), a social program providing monthly payments to disabled recipients. Yet the SSI program's strict income restrictions and asset limits severely hinder disabled people's ability to meet even their most basic needs. Rebecca Vellas, a senior fellow at The Century Foundation, explains that "[in] no state in the United States is the SSI benefit enough to afford a one-bedroom apartment at full-market rent, even if you spend 100 percent of your benefits on rent. [...] [Disabled people] are not allowed outside income without it counting against your benefits, so we as a government just decided we're going to have people live at this sub-poverty level" (King 2023). Moreover, to remain eligible for SSI payments, disabled people cannot possess more than \$2,000 dollars in assets, or \$3,000 for couples. This makes it challenging for disabled people to do things like build emergency funds (for example, for car breakdowns, home repairs, or health bills) or even pay the security deposits required to

secure an appartment. As Lara Heard puts it, the SSI asset caps keep disabled people "poor by design" (Heard 2023).

Fueled by disabled people's political activism, waves of deinstitutionalization throughout the 20th century moved disabled people out of state institutions like psychiatric hospitals and residential homes and into community living. Unfortunately, this major process of social reorganization did not lead to a corresponding investment in community-based resources for disabled people. Instead of accessible care, services, and housing, disabled people released from institutions faced social abandonment and abject poverty. Disabled people have been particularly affected by exponential increases in housing costs in recent decades and face some of the highest rates of housing insecurity in the U.S., especially if they are Black or Hispanic. Not only are disabled people at heightened risk for housing insecurity, but many also struggle to find accessible housing adapted to their needs (Burns et al. 2021; Konish 2023). The Center for American Progress reports that less than one percent of all housing across the U.S. is accessible for wheelchair users (Lake, Novack, and Ives-Rublee 2021). Both the housing affordability crisis and the housing accessibility crisis have worsened because of the COVID-19 pandemic. The unavailability and unaffordability of accessible housing forces many disabled people into living situations that exacerbate their disability-related symptoms and generate physical and mental suffering. Faced with extreme shortages in accessible housing, some disabled people "find themselves with no choice but to accept institutionalization, even if they'd rather live independently" (King 2023). Others are forced into homelessness. According to recent estimates, disabled people represent nearly 40% of the homeless population (Stone and Wertans 2023). As lawsuits filed by disability rights groups have recently exposed, several homeless shelters across the nation violate ADA requirements and are inaccessible for disabled people (Kim 2019; McDonald 2023). Everywhere they turn, disabled people face inaccessibility.

While they represent only one quarter of the general population, disabled people make up close to half of the federal prison population (Bixby, Bevan, and Boen 2022). Black disabled people and disabled people of color are disproportionately represented in carceral settings. Disabled people who are incarcerated are frequently denied accommodations they depend on for safety, mobility, and basic communication. People with physical disabilities are being forced into solitary confinement due to a lack of accessible cells (Bixby, Bevan, and Boen 2022), while Deaf incarcerated people are denied sign language interpretation during their trial and imprisonment (Ben-Moshe 2020). In addition to being warehoused in jails and prisons at alarming rates, disabled people populate understaffed and underfunded congregate care facilities. Deaths in long-term care facilities accounted for roughly one third of all COVID-19 related deaths during the pandemic (Brown et al. 2021; Loubert 2021; Yourish et al. 2020). The tragically high rates of infection and deaths of disabled people in congregate settings like prisons, jails, nursing homes, group homes, homeless shelters, and halfway houses are a byproduct of institutional neglect. Disabled people's treatment during the pandemic reflects the systemic devaluation of disabled people's lives, especially if they also happen to be Black, brown, Indigenous, poor, incarcerated, undocumented, fat, queer, or trans.

More than thirty years after the law's adoption, failures of compliance with ADA requirements remain the norm across the country. Higher education institutions have faced a heightened level of scrutiny surrounding issues of digital accessibility in recent years. In May 2023, the Department of Justice and the U.S. Department of Education issued a letter to higher education institutions reaffirming the importance of respecting web accessibility guidelines. Colleges and universities have been aware of these regulations for decades, yet much of the web content produced by these institutions does not meet legal accessibility standards. Web AIM's recent accessibility audit of the home pages of the top one million websites reports an average

of fifty errors per web page and found accessibility errors on over 96% of home pages (WebAIM 2023). Transportation systems do not fare much better. To give only one example, the New York City subway system, one of the nation's largest, is still widely inaccessible, with only 27 percent of its 427 stations deemed accessible under the ADA (Patel 2019). The service elevators of many of these purportedly accessible stations service only some metro lines and stations (Emens 2021). Given that most stations have only one elevator and that elevators break down frequently, disabled riders can hardly rely on the subway system for accessible transportation. Failures of accessibility are also common in educational settings. A national survey by the U.S. Government Accountability Office found that two thirds of public school districts across the nation have physically inaccessible facilities (United States Government Accountability Office 2011).

These widespread violations of accessibility standards are made worse by the fact that the ADA does not have an enforcement agency and instead promotes self-regulation by public and private entities. This lack of oversight encourages businesses and institutions to adopt a "wait and see" approach to the enforcement of accessibility requirements that would be better described as a "wait-until-a-complaint-is-filed-by-a-disabled-person" approach. Indeed, the law imposes on disabled people the burden of identifying barriers to accessibility and filing legal complaints. By virtue of its structure, the ADA relies on disabled people to enforce compliance. In recent decades, some disabled plaintiffs have taken it upon themselves to file large numbers of suits challenging inaccessibility in public accommodations under Title III of the ADA. These lawsuits are incredibly onerous and time-consuming for disabled plaintiffs. In all states except the state of California, plaintiffs who sue for violations under this title cannot receive monetary damages. Despite this fact, serial plaintiffs have been accused of abusing ADA litigation and are often viewed by courts with suspicion. Courts have the authority to label these plaintiffs as

"vexatious litigants" and to impose strict restrictions on their right to file future accessibility lawsuits (Sahouria 2020). Elizabeth F. Emens explains that by "looking skeptically on serial litigants, courts [ignore] the vital role they play in enforcing [accessibility statutes] and bearing the admin costs on behalf of others and the civil rights law" (Emens 2021, 2373). Paradoxically, the law relies on disabled people to enforce compliance but treats them with hostility if they do so systematically. Systematic failures of enforcement force disabled people to choose between the burdens of litigation and the weight of inaccessibility.

Much hope has been placed in the ADA's ability to overturn decades of exclusion and guarantee full and equal access for disabled people. In truth, however, the ADA promises—and often fails to deliver, as I will argue—only a bare minimum of access in society. Although it is praised as a symbol of opportunity, the law just as often masks discrimination and perpetuates inequality. Access is seen as an uncontested good and a long-achieved reality, yet disabled people continue facing barriers to access in all spheres of society. This reality has led scholars of disability to describe the state of accessibility today as having a "contradictory character" (Hanna Egard, Hansson, and Wästerfors 2021, 1). Tanya Titchkosky, in her phenomenological study of access in higher education, argues that "Twhile" access and inclusion often seem like unquestioned values, it is also true that some people have to fight for access while others are shocked or even irritated by this fight" (Titchkosky 2011, ix). Hannah Egard, Kristofer Hansson, and David Wästerfors formulate a similar idea: "One the one hand, people with disabilities are welcomed and included, with ambitious promises in a range of policies and declarations. On the other hand they are bypassed and excluded from everyday practices" (Hanna Egard, Hansson, and Wästerfors 2021, 1). Promises of equality and inclusion are "combined with a remarkable slowness and reluctance to meet the rights, needs, and wishes" (2021, 1) of disabled people. Over thirty years after the adoption of the ADA, disabled people

still struggle to have their most basic accessibility needs met. The contradiction between ambitious promises of inclusion and everyday practices of exclusion captures the state of access now.

II. Access Beyond Accommodation

In recent years, disability scholars and activists have worked to unsettle dominant understandings of access in society. The emerging field of critical access studies refuses to "take access for granted as a de facto or common sense good" (Hamraie 2019) and raises essential questions about how access is defined, who it is for, how it is implemented, and where disabled people's needs, experiences, and knowledge fit into (or fall out of) the picture (Brilmyer 2022; Dokumaci 2023; Dokumaci 2018; Hamraie 2017; 2013; Hamraie and Fritsch 2019; Titchkosky 2011). This field's recent theoretical interventions are indebted to and emerge alongside developments on the terrain of disability activism in recent decades. In the early 2000s, a group of queer, trans, and gender non-conforming disabled people of color in the San Francisco Bay Area began discussing a new framework for disability politics. Disability justice, the intersectional movement and framework born out of these conversations, moves away from rights-based approaches to access and frames access as a tool for collective liberation and an act of love. A disability justice framework makes clear that creating access requires a radical transformation of our societies. Design scholars and practitioners are also exploring access outside the confines of accessibility standards. A growing contingent of designers are developing inclusive design practices and staging artistic interventions that center disability knowledge and cultures (Gissen 2023; Hendren 2020; Williamson 2020; Williamson and Guffey 2020). Design for and by disabled people reframes access from an assimilation device into a celebration of disabled ways of being. Each in their own way, these interventions "disrupt established ways of imagining access" (Dokumacı 2023, 75) and creatively reimagine what access can look like.

While discussions of access have taken a variety of scholarly fields and public debates by storm, and although every aspect of our lives is tied to (in)accessibility, the notion of access—at least in its common acceptance as a proxy for inclusivity—remains conspicuously absent from the philosophical literature. Aside from a few welcome exceptions in recent years (Levit Ades 2023; Ienni 2023; Valentine 2020), access has yet to be widely recognized as a topic worthy of examination by philosophers. This oversight is attributable to several factors, including, without a doubt, philosophers's reluctance to consider disability seriously and for its own sake, or even to consider it at all. Though things are slowly changing, the field of philosophy has long categorized work by and about disabled people's lives as non-philosophical. When it is discussed by philosophers, disability is often employed as a rhetorical device: a tool used to indicate a radical departure from normalcy. For instance, Georgina Kleege's (2018) survey of early modern philosophy shows how the figure of the 'hypothetical blind man' has been employed by philosophers to reaffirm the primacy of visual cultures and knowledge. The work of Licia Carlson offers several examples of the way philosophers have used people with intellectual disabilities as a mere "appendage serving to bolster the case for another group of individuals" (Carlson 2010, 59). Transformed into a device, disability is used for its rhetorical value without consideration of the fact that disabled people exist in the flesh and live full, complex, and ordinary lives.

Access has also been ignored by philosophers because it is treated as a legal and policy issue rather than a philosophical question. Many philosophers view accessibility as something they must only consider in the classroom, when they teach disabled students who require academic accommodations. Accessibility is not acknowledged as a principle that could shape the

field and practice of philosophy at large, let alone being recognized as an object of philosophical study. This oversight is regrettable, given that philosophers have much to learn from and contribute to recent efforts to expose unquestioned assumptions at the heart of dominant approaches to access in society. Questions of access are deeply intertwined with many questions that have long preoccupied philosophers. Understanding what it means to live well, what we owe each other, and how we can create social arrangements that promote genuine equality necessarily requires that we consider the role of access in our lives and societies.

My project's central contribution is its framing of access as a key philosophical concept and question for our times. Beyond Accommodation: Access Problems and Responsibilities identifies several problems with dominant approaches to access in society. When many people think of access and of what it involves, accommodations are what come to mind. In the current post-ADA era in the United States, access has been largely reduced to the minimal provision of legally mandated accommodations. Using higher education settings as a case study, I show that the system for accommodations exacerbates the inequalities it has been tasked to resolve. Disability is treated by postsecondary institutions as an individual problem in need of individual solutions. Instead of transforming the background conditions that produce systemic inaccessibility for disabled people, institutions treat disabled people's needs as exceptional and work to accommodate disability within the status quo. Disabled people may very well be included in academic spaces, but their inclusion is conditional on their ability to approximate norms of ability. Once they have been 'included,' disabled people must assume the heavy burden of disclosing their disability, requesting academic accommodations, producing extensive medical documentation, and advocating for their needs by submitting themselves to external scrutiny at every step while facing stigma and mistrust. These hoops and hurdles make the

very path to obtaining academic accommodations inaccessible for many disabled people, who are thereby compelled to forego their right to accommodations.

Beyond Accommodation: Access Problems and Responsibilities also investigates how the current distribution of access responsibilities in our societies fails disabled people because it forces them to carry the weight of access alone. Because disability is seen as an individual problem, the responsibility for access is treated as an individual responsibility. Nondisabled people and institutions must only give thought to accessibility when they are legally required to, and many only do so retroactively, after disabled people have identified failures of compliance. In contrast, and as the necessary counterpart to this predicament, disabled people are required to consider access and guarantee its actualization everywhere they go and in everything they do. The individualization of the responsibility for access results in significant costs and burdens for disabled people. Disabled people must dedicate resources of time, attention, money, and energy to ensuring their own access, at times by advocating for themselves in the face of ableist hostility, at others by sacrificing their needs to preserve relationships or by avoiding activities that take too heavy a toll on their bodies and minds. The additional efforts disabled people must deploy to ensure their own participation in the world function as an implicit reminder that they are viewed as optional participants rather than essential contributors. A central reason why disabled people are over-burdened with this responsibility is because many other actors, from individuals to institutions, are skilled at avoiding taking responsibility for access. Identifying and understanding the most common strategies these actors employ to avoid taking responsibility for access is important for changing the current landscape of access responsibilities. Achieving meaningful access at a societal level requires that we move beyond a narrow focus on accommodations and transform existing practices of responsibility around access.

III. Defining Access, Defining Disability

Recent years have seen the emergence of exciting new conceptual vocabularies that disrupt established ways of discussing access. Access intimacy (Mingus 2017b; 2017a), access friction (Hamraie and Fritsch 2019), access fatigue (Konrad 2021), access magic (Chung and Gotkin 2023; Prentice 2021), access doula (Garde 2022), access washing (Milbern 2019), access opacity (Ienni 2023), and access aesthetics (Bunch, Chan, and Lee 2022) are only a few of the critical concepts emerging from contemporary scholarship and activism around access. Scholars and activists have also generated concepts describing forms of accessibility that are structurally and politically distinct from conventional approaches to access in society. Mia Mingus offers the notion of liberatory access to describe access that "gets us closer to the world we want and ache for, rather than simply reinforcing the status quo" (Mingus 2017a). Liberatory access is access practiced "in liberatory ways" (2017) with the aim of "resisting against the world we don't want and actively [building] the world we do want" (2017). This form of access is connected to the disability justice principle of collective access, which Leah Lakshmi Piepzna Samarasinha describes as access that is "create do collectively, instead of individually" (Piepzna-Samarasinha 2020). Experiments in collective access involve differently positioned disabled people in crossdisability community coming together to make access happen and meet each other's needs in intersectional ways. Radical access, in the work of disability scholar A.J. Withers, entails access that "ensure s not only the presence of those who have been left out, but also their comfort, participation and leadership" (Withers 2020, 118). The notion of radical access is also at the heart of the Radical Access Mapping Project, which asks that we shift toward "prioritiz ing" disabled access" from the start "as a non-negotiable" (radicalaccessible communities 2012). Radical accessibility involves making genuine accessibility the "bottom line" (2012), rather than treating access as something optional or discretionary.

I first encountered the notion of meaningful access in the work of Aimi Hamraie (2016), who employs it to describe a form of access that is sorely missing from feminist academic spaces. Hamraie argues that although feminist philosophers are increasingly taking up insights from critical disability scholarship, the exclusionary spatial, cultural, and attitudinal norms at play in feminist academic spaces contradict values central to this work. Instead of merely extracting theoretical value from disability scholarship, they encourage feminist philosophers to bridge gaps between theory and practice by working "toward meaningful access" (261). In agreement with other disability theorists, Hamraie argues that "accommodationist" (Tremain 2013) approaches to accessibility fall short on several counts and fail to meet the needs of disabled people. Liberatory, collective, radical, and meaningful access have in common the recognition that creating access requires collective efforts and involves combatting interlocking systems of oppression just as much as it calls for changes to the built environment.

Throughout this work, I will be using the notion of meaningful access to mark a distinction between the kind of access I am advocating for and something we might call access-as-compliance (or access-as-accommodations). My use of this notion is rooted in a critique of compliance-based approaches that conflate access with individual accommodations. While access-as-compliance maintains the status quo, meaningful access aims to profoundly transform how we relate to each other and to the world we share. I do not think that providing a positive definition of meaningful access is necessary for advancing the claims I make in this project. Much of the work I present focuses on exposing the critical limitations of dominant approaches to access in society and their harmful effects on the lives of disabled people. There is much to be learned about meaningful access by examining what it is not. Moreover, definitions are often more static than the things they describe, and this could not be truer of any definition than meaningful access. Accommodationist approaches assume that access is something that can be

achieved—for instance, by installing a ramp outside a building or adding alt text to an image on a website—and then crossed off a list and forgotten about. In contrast, the creation of meaningful access is an iterative process that requires constant dialogue and experimentation. It often involves errors, setbacks, and unexpected disruptions. A fixed definition of meaningful access may be more restrictive than it is beneficial to the task of rethinking our approach to access. Rather than serving to determine what counts as meaningful access once and for all, a definition of meaningful access should serve as a starting point and orienting coordinate for future discussions of access within philosophy. With these caveats in mind, I offer the following definition of this notion: meaningful access is access used as a tool for creating a world in which persons with different bodies, minds, and capacities obtain the support they need to participate in spheres of human activity, exercise their autonomy relationally, and flourish with dignity.

This definition mentions participation for the obvious reason that inaccessibility directly impedes disabled people's participation in all spheres of society. Participation implies that disabled people can take part in the daily activities that make up their lives and cultivate relationships with others in this process. Disability activists have criticized conceptions of participation that define it in terms of functional individual performances congruent with ablebodied and able-minded standards, arguing that disabled people's ways of participating in the world often depart from and disrupt ableist norms of radical individuality and self-sufficiency. Meaningful access values disability-centered, interdependent forms of worldly participation that are enriching and satisfying for those who engage in them. I also emphasize the significance of relational autonomy in recognition of the fact that disabled people's autonomy over their lives and bodies is constantly being challenged. Many disabled people are subjected to patronizing, infantilizing, and degrading treatment from caregivers, family members, friends, medical professionals, access providers, and complete strangers who tell them what they

(should) need and want. Rather than presume that nondisabled people always know best and should oversee access, meaningful access values disabled people's knowledge of their bodies, minds, and needs and centers their concerns, interests, and preferences around access. By foregrounding autonomy, I am not suggesting that meaningful access is a means of achieving independence from others and self-sufficiency. Feminist relational theorists have developed accounts of autonomy that reject its traditionally individualistic focus (Mackenzie and Stoljar 2000; Koggel 2020; Sherwin 2012; Baylis, Kenny, and Sherwin 2008). Far from requiring noninterference, our autonomy is supported (and thus can also be constrained) by interdependent relationships with other beings in the context of "broader social, economic, and political relationships" (Koggel, Harbin, and Llewellyn 2022, 4). We exercise our autonomy relationally not by foregoing these relationships, but rather in the context of them. Feminist accounts of autonomy as relational also emphasize how oppressive institutions, structures, and norms shape our ability to exercise our autonomy and the options made available to us. A relational approach to autonomy around questions of access would involve "identify ing and remov[ing] the effects of barriers to autonomy that are created by oppression" (Sherwin 2012, 26). The creation of meaningful access involves actively working to dismantle the interlocking systems of oppression that produce these barriers for some people.

Finally, my definition of meaningful access underlines the importance of receiving the support we need to flourish with dignity. In the usage I propose, the notion of flourishing captures the highly subjective and variable ways we experience our lives as worth living. Flourishing is not one-size-fits-all. Between 2019 and 2022, the Hastings Center, an independent bioethics research institute based in New York, organized a series of events titled "The Art of Flourishing: Conversations on Disability." This event series, which brought together disabled scholars, artists, writers, and activists to think about the meaning of

flourishing in relation to disability, influenced the way I think about this notion. In his introduction to the series, Erik Parens explains that "people can flourish in all sorts of mind-bodies" (2020). Disabled people should not be forced to change or cure their bodies and minds to access flourishing. In claiming that "our flourishing is never simply our own" (2020), Parens also frames flourishing as a relational, rather than individual, accomplishment. Our ability to flourish (and to do anything, really) depends on the many formal and informal networks of care and relationships that sustain us.

Disabled writer and educator Anand Prahlad, a Black autistic man with synesthesia, echoes this realization in his talk during the series by including all living beings in the project of flourishing. He explains: "My 'I' has always included those around me, but also the natural world. For example, birds, trees, I am the cardinal that sings outside my window in the morning. And the cardinal is me. It's one of the reasons why I can't imagine flourishing as an individual thing. How can I flourish if all the bees aren't? How can I flourish if my brothers and sisters are in pain or are dying?" (Prahlad 2021). Prahlad further explains that his disabilities are a product of the ongoing trauma of living in a white supremacist society in which he constantly fears "losing [his] fragile grip on [his] ability to socially function" (2021) and being segregated through homelessness or forced institutionalization. Describing his life as defined by survival, Prahlad asks:

[How] often do we truly flourish? [...] I've had moments in which I flourish, certainly, but as I weigh those against the days and months and years of mental and emotional distress and debilitating physical pain, I am more saddened than uplifted. It is not enough for us to think in terms of just surviving or stealing pieces of dignity here and there. I believe that dignity, care, and the right to flourish should be guaranteed for everyone, not for occasional moments or as goals we have to wage endless battles for. (2021, emphasis added).

The question "How often do disabled people truly flourish?" stayed with me long after his talk ended. The contrast Prahlad points to between mere survival and stolen pieces of dignity, on the one hand, and genuine flourishing on the other, is at the heart of much of what we are doing wrong around access as a society. Strategies for surviving in oppressive societies keep disabled people alive and will continue to do so. But just like no one should have to "wage endless battles" (2021) for shreds of dignity, no one should have to fight for basic access. Meaningful access aims to create a world in which disabled people do more than survive and can truly flourish. In the process of imagining this world, we must continue asking ourselves: What forms of access help ensure disabled flourishing? How can we create a world in which disabled people have access not just to the necessities of life, but also to possibilities for joy, connection, pleasure, and abundance? These questions orient my research on access in this project and my approach to disability liberation.

Finally, readers may have noticed that the definition of meaningful access I have provided does not explicitly mention disability. Disabled people's knowledge, experiences, and activism are central to my work on access, as I think they should be. We should be wary of discussions of access that do not recognize their debt to disability activism. However, my view is that a person does not have to be disabled to experience systemic inaccessibility in an ableist society and to benefit from living in a more accessible world. This view is inspired by disability educator Thalila Lewis' working definition of ableism, which was developed in community with disabled Black people and disabled people of color. Lewis defines ableism as follows:

A system of assigning value to people's bodies and minds based on societally constructed ideas of normalcy, productivity, desirability, intelligence, excellence, and fitness. These constructed ideas are deeply rooted in eugenics, anti-Blackness, misogyny, colonialism, imperialism, and capitalism. This systemic oppression leads to people and society determining people's value based on their culture, age, language, appearance, religion, birth or living place, "health/wellness", and/or

their ability to satisfactorily re/produce, "excel" and "behave." You do not have to be disabled to experience ableism (Lewis 2022).

By defining ableism rooted in and overlapping with other forms of oppression, domination, and discrimination, Lewis makes clear that ableism does not exist in a vacuum. It ascribes value to human bodies and minds based on socially constructed ideas about who can be normal, desirable, productive, intelligent, excellent, and fit. These ideas are a product of systems like colonialism, capitalism, imperialism, racial eugenics, cissexism, and misogyny. Throughout the course of history, the bodies and minds of different groups of people have been devalued because they did not adhere to socially constructed ideas about what bodies and minds should be able to do, how they should behave, and what they should look like. They have been treated as though they are naturally inferior, incapable, worthless, pitiable, abject, and even subhuman. Disabled people experience ableism, but ableism also impacts the lives of many people who are not disabled or do not identify as such. The violence inflicted on Black people by police is justified through the ableist construction of Black bodies as 'naturally' more aggressive and dangerous than those of white people. The construction of Black people as 'inherently disabled' has long been employed to justify their exploitation under capitalism, their removal from public spaces, and their forced institutionalization (Erevelles 2016; 2014). Ableist logics are embedded in the eugenic project of residential schools for Indigenous children and the history of forced sterilization of Black and Indigenous women. Fat people experience ableism when they cannot find clothes that fit them, when they are denied medical care, and when they are shamed for their bodies by doctors and by society. Only by expanding our understanding of ableism beyond the category of disability can we begin to realize how deeply and pervasively ableism structures our lives and societies.

Building on Lewis' claim that people do not have to be disabled to experience ableism, I argue that people do not need to be disabled to benefit from meaningful access. Ableism makes the world inaccessible and inhospitable for many people. It constrains the ways of being available to us and degrades the lives of those who are seen as deviating from idealized standards of normalcy. In ableist, racist, classist, sexist, transphobic, and fatphobic societies, many people are treated as though their accessibility needs are shameful or burdensome. They are treated as unwelcome 'outsiders' and reminded in implicit and explicit ways that they do not belong. My definition of meaningful access does not explicitly mention disability because people do not need to be disabled (or identify as such) to benefit from living in a world in which their bodies, minds, and capacities do not determine their worth or their ability to flourish.

As we fight collectively for greater access, we must never stop asking ourselves what it means to be offered a seat at the table and whose tables we are fighting to access. Inclusion into the status quo for some should not be the end goal of disabled politics. An intersectional understanding of access recognizes how the liberation of disabled people is bound up in the liberation of all people. For this reason, I am not interested in a politics of access that prioritizes access to everything, always, and for all people. There may be good reasons why some avenues of access are foreclosed for some people. The language of access should not be used to justify settler-colonial agendas of appropriation (Cowing 2020) or habits of white expansiveness (Cowing 2020). Recognizing the personal and political importance of access need not entail embracing a fantasy of unbridled control of the world. In the words of Mingus, "We don't simply want to join the ranks of the privileged; we want to dismantle those ranks and the systems that maintain them" (Mingus 2011). In recent years, access has become a profitable catchphrase for businesses, institutions, and even nation-states. The rhetoric of access is being used to promote projects that directly contradict the aims of disability justice. The late

disability justice activist and organizer Stacey Milbern warned us of this when she coined the notion of access washing to designate the process of "leveraging 'accessibility' as a justification to harm communities of color and poor & working class communities" (Milbern 2019).

Examples of access washing include framing anti-homeless policies as measures to increase accessibility for disabled people, masking voter suppression by citing accessibility laws as a reason to shut down polling places, and using accessibility as a selling point for gentrification projects that displace low-income disabled people from their neighborhoods. Milbern writes: "If accessibility is made at people's expense, we have to question and challenge that as access.

Access for whom? [...] Access washing is really a question of complicity — whether we will allow disability access to be wielded as one of the master's tools" (2019). Without an intersectional framework for thinking of access, access can easily be employed as a tool for maintaining and even reinforcing the ranks of the privileged.

My framing of disability in this project is oriented by the same set of concerns. Under the medical model of disability, a disability is defined as an impairment or limitation that indicates an abnormal (or pathological) deviation from normalcy. Disabled people have long rejected this way of defining disability, but it continues to govern dominant understandings of disability in society. In this context, some people are perceived as disabled who do not identify as such (for example, many people who use the capitalized term Deaf to describe themselves do not recognize deafness as a disability), while other people are denied disability status by society despite identifying as disabled (for example, some people with medically unexplained illnesses identify as disabled but cannot obtain disability supports because their disability is 'unproven'). Several nuanced sociopolitical models of disability have been developed by disability scholars in response to the medical model (for overviews, see for example Lajoie 2023; Reynolds 2022). These models show that disability is not what philosophers call a natural kind. Rather, it is a

social category of identity shaped by history, location, culture, and shifting relations of power and domination.

Members of marginalized communities may hesitate to identify as disabled because they must already negotiate high levels of stigma in their everyday lives due to other forms of marginalization. Analyzing disability through a Black feminist theoretical lens, Moya Bailey and Izetta Autumn Mobley argue that "Black people cannot afford to be disabled when they are required to be phantasmically abled in a white supremacist society" (Bailey and Mobley 2019, 22). Claiming disability is simply not available to everyone in the same way. Defining disability intersectionally involves recognizing various forms of dis/identification with disability, challenging the rigid binary between disability and nondisability, and encouraging political coalitions between marginalized people across the spectrum of (dis)ability. With these concerns in mind, throughout this dissertation, I use the term "disability" as shorthand to capture the lived experiences of people with a wide range of non-normative bodies and minds. This includes disabled, D/deaf, Blind, DeafBlind, Mad, Autistic, neuroqueer, neurodiverse, crip, sick, and chronically ill people who may have complex and ambivalent relationships to disability.

IV. Overview of Chapters

This dissertation is divided in two parts. The first part of this project consider how access is discussed and implemented in the field of higher education. Chapter 1, "Access and the Promise of Inclusion," examines the relationship between access and institutional promises of inclusion. Notions of social reconfiguration like "access" and "inclusion" have gained significant traction in the field of higher education in recent decades. I show that these notions can lose their critical edge and function as empty vessels merely reproducing the status quo when they become part of the "rhetorical background" of institutions. This rhetorical background is

employed to justify or conceal the actions (and inaction) of institutions, especially where these directly conflict with an institution's stated commitments. Purportedly "inclusive" academic spaces remain governed by ableist norms and practices. The mere inclusion of disabled people in these spaces does not imply that (hyper-)ability stops being the unmarked center around which the entire field of higher education is organized. This claim is further evidenced in Chapter 2, "Access Problems in Higher Education," which offers a critique of accommodationist approaches to access in higher education. Accommodationist approaches (1) single out the needs of disabled people as "special" or "exceptional" while leaving the ableist status quo intact; (2) misconstrue the lived experience of space; (3) treat accessibility needs as frozen in time and temporally predictable (4); rely on overbroad medical documentation requests that medicalize disability and cast medical professionals as gatekeepers of disability rights; and, finally, (5) depend on forced disclosures that intrude on disabled students' privacy and render them vulnerable. The system for accommodations ultimately exacerbates many of the inequalities it is tasked to resolve.

The second part of this dissertation considers who bears the responsibility for access in society. I follow the "trail" (Walker 2008) of access responsibilities in two opposite directions. Chapter 3, "The Costs and Burdens of Navigating Access," uncovers what happens when disabled people find themselves individually responsible for ensuring their own access. This responsibility imposes burdens on disabled people that range from microscopic forms of bodily assessment and calibration to the management of spatial and temporal disruptions; careful planning around their interactions with the world and with other people; and calculations, sacrifices, and compromises in their relationships with other people and with institutions. Assuming the responsibility for access alone extracts resources of time, attention, money, and energy from disabled people, as well as taking a toll on their health, relationships, and well-

being. In Chapter 4, "Avoiding Responsibility for Access," I analyze the opposite side of this coin and argue that disabled people are left carrying the weight of access alone due to myriad failures of responsibility. Privileged agents are routinely excused from taking any amount of responsibility for access beyond the scope of what the law requires. Common strategies to avoid taking responsibility for access include (1) diffusing access responsibilities, (2) diverting the responsibility for access, or (3) delaying taking responsibility for access. Together, these chapters in this section illustrate the importance of developing new practices of responsibility for access and transforming the narratives we employ to make sense of them. I conclude this dissertation by considering how we might develop new narratives and practices of responsibility around access. Turning to recent feminist work on responsibility for injustice, I outline some guiding coordinates that can help us develop a shared model of responsibility for access.

Chapter 1: Access and The Promise of Inclusion

I. Introduction

Contemporary ideologies and practices of inclusion have transformed the landscape of U.S. higher education in the past fifty years. While the relationship between the notions of inclusion, equity, and diversity has been explored in a robust and continuously expanding body of scholarship, the notion of accessibility has only been added to this list more recently and is slowly acquiring the status of educational buzzword. The mission statements of colleges and universities across the country increasingly invoke accessibility alongside the usual triad of diversity, equity, and inclusion when spelling out their commitment to organizational transformation. In the context of higher education, accessibility is framed as a cornerstone of disability inclusion. Without adequate access, disabled people cannot be included in academic life. While promising at first glance, this framing of access and inclusion leave many important questions unanswered, starting with: What does inclusion promise? Is inclusion conditional? Who is currently served by how access and inclusion are discussed in institutional settings? Lastly, what are the effects of institutional discourses of inclusion on the experiences of disabled people in higher education?

This chapter takes as its starting point the claim that the very ordinariness of the terms "access" and "inclusion" signals the need for a more careful appraisal of them than currently exists in most institutional settings. We have reached a historical moment when institutional commitments to reduce accessibility barriers and promote disability inclusion in higher education are so common as to become unremarkable. As scholar of disability Tanya Titchkosky observes, "access and inclusion buzz around many university environments as unquestioned values" (Titchkosky 2011, ix). Instead of performing the critical work of illuminating entrenched conditions of injustice, these notions have become a part of the

everyday humdrum of academic life. They are invoked in institutional statements, recruitment materials, reports, emails, policies, and press releases. As a function of repeated use, they have receded to the background of our awareness, and their meaning is more elusive than ever. To counter this trend, I consider how these notions are employed in institutional settings and what goals are served by their circulation. In doing so, I show how notions of social reconfiguration can be employed to detract from the possibility of meaningful change.

I begin by introducing the notion of a rhetorical background to describe how some forms of institutional discourse can function as a background that provides context for the actions and non-actions of institutions, especially where these directly conflict with an institution's stated commitments. Borrowing insights from phenomenology, I show that background elements are far from being unimportant. They play a constitutive role in how we make sense of and perceive the world around us. In this case, the rhetorical background of institutions ensures that educational institutions are perceived as embodying values of inclusion, accessibility, and diversity. This background serves both a normative function, since it generates the impression of a cohesive institutional community in which a person can belong well by meeting behavioral expectations, and a placating function, because it serves to appears or silence internal and external critiques of the institution. The second portion of this chapter encourages what might be called an ethos of suspicion toward the promise of inclusion, arguing that discourses and practices of inclusion (1) often do not disrupt underlying oppressive structures; (2) can falsely motivate the impression of change and lead us to underestimate both the force of institutional habits and the institution's ability to strategically adapt its mechanisms of exclusion; and (3) are necessarily conditional, selective, and partial, such that they generate problematic distinctions between deserving and undeserving (or "good" and "bad") disabled people.

II. The Rhetorical Background of Institutions

In the contemporary university, layers of familiarity conceal the senses of "access" and "inclusion." Insofar as they are covered over with familiarity, these notions remain largely unexamined and have acquired the status of ordinary words. When notions of social reconfiguration like "access" and "inclusion" circulate without any resistance and do not come up against institutional walls, we should examine more closely the work they are in fact doing. Notions that are "detached from histories of struggle over inequality" (Ahmed 2012, 80) might circulate more easily in institutional settings by virtue of this detachment. They can lose their critical edge and become empty vessels that merely reproduce the status quo or even undermine the goals they ostensibly promote. The circulation of these terms can serve to signal a commitment to change in the abstract without meaningful change occurring. If talk of access and inclusion is seemingly everywhere, does this mean disabled people no longer have to fight for access in contemporary educational institutions? How must we reconcile public commitments to inclusion with the reality of institutional ableism on campuses? In other words, why and where are things going wrong?

Institutional mission statements offer a relevant case study for examining the relationship between discourse and practice. In 2016, The Pennsylvania State University adopted an official "Statement on Diversity, Equity, and Inclusive Excellence". Perhaps most notably for my purposes, this statement makes no mention of accessibility. Instead, the university also hosts on its website a brief, separate statement on accessibility associated with its administrative policy on the accessibility of electronic and information technology. Though it focuses mainly on digital accessibility, this second statement is prefaced by the claim that Penn State is committed to ensuring that disabled people can fully participate in the university's programs, benefits, and services. According to Vice Provost for Educational Equity

Marcus Whitehurst, one important advantage of the "Statement on Diversity, Equity, and Inclusive Excellence" is its ability to provide units within the university with a clear sense of guidance as they devise their own unit-specific diversity plans and statements. This university-wide statement removes the expectation that individual units will need to "create from scratch [their] own, separate definition of what diversity planning means" (Waldhier 2016). It offers an account of diversity planning that all units can endorse and fall back on.

The common "we" that rallies behind this statement expresses its commitment to diversity, equity, and inclusion in areas such as recruitment, retention, representation, and review. Whitehurst explains: "When anyone asks, 'Where does Penn State stand when it comes to diversity?', we can point to our diversity statement, and say, 'This is where we stand, these are the actions that we want to take as an institution, as a community" (Waldhier 2016). Although the statement does not define the elusive notion of "inclusive excellence," leaving it open for interpretation, it positions it as a "core strength and essential element" (2016) of the university's mission as a public institution. By releasing this statement, the university commits to excelling at inclusion.

My goal is not to single out The Pennsylvania State University. Both in its form and content, this statement resembles those issued by several other public learning institutions across North America in recent years. I am interested in how a statement of this kind can come to from the backdrop against which institutional decisions are made and courses of action are adopted. My use of the notion of rhetorical background describes just this: the way a form of discourse—in this case, an institutional statement—can become, through its repetition and circulation, the framework for interpreting an institution's actions and inaction, decisions, and practices. Instead of the institution being behind the statement (i.e., a group of institutional representatives got together and wrote a statement saying the university is opposed to racism),

the statement acquires a life of its own and comes to be perceived as being behind the institution (i.e., the institution is anti-racist because the statement is anti-racist). Racist, sexist, transphobic, or ableist incidents are framed as isolated aberrations in relation to this background.

In making this claim, I borrow from phenomenology the insight that a contrast between foreground and background structures our experience of the world. The background elements that make up our world can be difficult to notice given that their role is precisely to recede from view to make other things apparent. An example of this is offered by the organization of visual perception. Adopting insights from Gestalt psychology, Maurice Merleau-Ponty (2012) argues that perception displays a figure-ground structure. That is, the perception of an object as meaningful is made possible by a contrast between figure and ground. The perceived object detaches (or differentiates) itself from this ground which in turn provides the frame for its emergence but is not itself perceived. Similarly, in everyday life the rhetorical background of institutions is not itself apparent, but it structures expectations, behaviors, attitudes, and interactions within the institution. In this sense, it is always at least implicitly present, and it can be explicitly brought into view. When someone asks where an institution stands when it comes to diversity, equity, access, or inclusion, the institution can point to a statement that was there all along. Instead of being assumed by people and institutions, the responsibility for access and inclusion is assumed by symbolic statements.

The work of sociologists Frank Dobbin and Alexandra Kalev (2016; 2022) shows that diversity training, the most widely adopted diversity initiative in professional environments, also tends to be one of the least effective. Dobbin and Kalev explain that most "executives favor a classic command-and-control approach to diversity because it boils expected behaviors down to dos and don'ts that are easy to understand and defend" (2016). Yet this approach does not

reliably motivate a change in attitudes and practices. It can even produce adverse effects. Mandatory training can "activate bias rather than stamp it out" (2016). In some studies, diversity training has been shown to increase racial animosity against members of minority groups within an organization (Anand and Winters 2008). Dobbin and Kalev's study of data from more than 800 U.S. firms and interviews with managers and executives reveal that many interventions that are not "designed with diversity in mind" (2016) in the first place (for example, mentoring programs for new employees or self-managed work teams, and workplaces that encourage contact among different groups people) greatly improve the hiring, retention, and promotion of racial minorities. The initiatives that most reliably advance racial justice in professional environments also happen to be the ones that are least commonly implemented.

If more promising solutions exist, why are organizations still overwhelmingly privileging ineffective tools? Several factors are undoubtedly at play, but it seems clear that the effectiveness of these programs is not the main reason why they are adopted (or not). In the current legal landscape, diversity (much like inclusion and accessibility) is first and foremost a liability issue. It is a way of pre-empting lawsuits and protecting reputations, a strategy of "institutional public image management" (Alcalde and Henne-Ochoa 2022). What matters most is *not* that commitments to diversity, inclusion, and accessibility are put in practice. As sociologist James M. Thomas remarks, "what matters is that organizations can point to these programs as reflecting positively on their organizational image" (Thomas 2020, 10). Institutions of higher education, in the case which concerns us, can release statements ad infinitum without producing evidence of "meaningful change in how power, resources, opportunities, and decision-making are distributed" (2020, 10). When they are asked what they are doing to create real change, they can point to programs and policies. Pointing to a statement and pointing to evidence of institutional change are not one and the same. In fact,

pointing to a statement can be a way of pointing away from concrete evidence suggesting that things have not substantially changed for members of minority groups within an institution.

Statements can be used as evidence of progress, instead of progress serving as evidence of progress.

The rhetorical background of institutions serves at least three interrelated functions. First, it serves to indicate (but, quite importantly, not necessarily realize) legal compliance. Lauren B. Edelman's (2016) study of the limited success of antidiscrimination policies since the adoption of the Civil Rights Act shows that symbolic structures within organizations are treated by courts as "indicators of civil rights compliance" (15) independently of their effects on the lives of minority groups. A symbolic structure is a structure within an organization "that is infused with value irrespective of its effectiveness" (Edelman 2016, 10). Edelman argues that while some symbolic structures have substantive effects, the majority are much less effective than is typically presumed. In fact, symbolic structures "often coexist with discriminatory practices and cultures" (11). These structures "connote attention to law or legal principles, whether or not they contribute to the substantive achievement of legal ideals" (5). The symbolic force of these structures should not be underestimated. Edelman's notion of "judicial deference" (25) describes how courts defer to symbolic structures (for example, to the existence of non-discriminatory policies and programs) rather than to hard evidence of systemic discrimination when evaluating an organization's compliance with non-discrimination requirements.

To illustrate this point, Edelman offers the example of a class action lawsuit for sex discrimination against Walmart that made its way to the Supreme Court in 2011. The plaintiffs presented overwhelming statistical evidence and expert testimony showing discriminatory treatment of female employees by the company. Despite this, the Court ruled that the plaintiffs were unable to establish discrimination because, as the majority opinion authored by Justice

Antonin Scalia stated, the company's "policy forbids sex discrimination" (25). The company's formal non-discrimination policy protected Walmart against liability for de facto discrimination. Edelman concludes that "judicial deference to symbolic structures" (25) allows organizations to avoid liability for the persistence of substantial discrimination and inequality. The desire to avoid potential litigation is a top priority, as evidenced by the proliferation of consulting firms helping organizations ensure regulatory compliance. Inclusion rhetoric, diversity training, accessibility statements, and antidiscrimination policies may "represent little more than cosmetic compliance" (14), but even symbolic compliance is a powerful tool for influencing judicial decision-making.

While Edelman's focuses on the impact of symbolic structures on judges and lawyers, her analysis has broader implications for how members of organizations view their own organization and their role in them. The adoption of symbolic measures does not only convince courts of law of institutional good faith. Their adoption makes us feel like "we" are doing the right thing and moving in the right direction. I want to suggest that the rhetorical background of institutions serves to generate a cohesive institutional identity. The "we" that endorses how access, inclusion, and diversity are discussed within an institution is a "we" united by the fact that it values access, inclusion, and diversity. To belong in the institution is to belong to this "we." As I mentioned, the rhetorical background of institutions typically recedes from our conscious awareness in everyday life. Nevertheless, the existence of this background serves to draw lines between who belongs and who does not belong in the institution in a normative sense.

Rahel Jaeggi (2009) notes that a defining feature of institutions is the fact that they involve "mutual behavioral expectations" (2009) entrenched by normative pressures. In other words, people are expected and expect others to act in certain ways in institutions. The nature

of these expectations varies across institutions. They may be firmer in a court of law than in a college classroom, but they are present in both. Jaeggi further argues that "[institutions] include criteria for what it means to belong to them, and they also have certain criteria for what it means to satisfy these requirements well" (Jaeggi 2009). Institutional actors often learn about these criteria by failing to meet them well and by being compared (or comparing themselves) to others who meet them more successfully. Institutional criteria for belonging can be explicitly laid out or codified, but many are not. Many are implicitly conveyed through the rhetorical background of institutions. In this context, what it means to belong or fit in the institution is to endorse certain ways of discussing access, diversity, and inclusion but not others.

Applicants for faculty positions in higher education are increasingly asked to produce statements addressing their perspective on diversity and inclusion. The expectations for these statements are often vague, leading to a lot of guesswork for applicants. Confused, many turn to online resources for advice on how to write this kind of statement. The type of advice they find online illustrates my point about how an institution's rhetorical background is encoded with information about belonging in the institution's "we." Consider the following advice offered on the website of the University of Pennsylvania's Career Services center. The center suggests that applicants writing a diversity statement for an academic position should start by consulting the diversity goals and initiatives of the schools they are applying to. They write: "It is helpful to use some of the language you see in these pages to describe your own perspectives on diversity, since sharing common themes can make your statement more relevant to the search committee" (Career Services Center 2019). Several other resources of this kind encourage applicants to consult an institution's diversity and inclusion statement for insights on how to write a strong statement. Applicants must walk a fine line between parroting core elements of the university's statement regarding diversity and inclusion while signaling their

commitment to aligning themselves with these values. In doing so, they should not stray too far from the language employed by the university, because "sharing common themes" will bolster their statement's relevance. For instance, a candidate might carefully relay her desire to participate in DEI initiatives on campus but refrain from recording her opposition to the militarization of campus police or the administration's history of union-busting efforts. She may also avoid expressions like "racial inequality," "white supremacy," or "institutional ableism" and replace them with less sharp-edged ones that will allow her to fit in more smoothly. Elusive standards of fit routinely function as "cloaked [methods] for discrimination" (Nguyễn and Ward 2019, 30) that perpetuate the hiring of white, male, and cisgender applicants. Minority applicants must tailor their presentation, behavior, and speech to be perceived as 'fitting in.' Some candidates are perceived as "a more obvious fit" while others are considered "just not a good fit" based on their ability to integrate the institution's "we."

The third function of an institution's rhetorical background is one of appeasement. The rhetoric of inclusion works to appease both institutional critics and worried publics. I borrow the notion of appeasement from Dafina-Lazarus Stewart, who describes the "politics of appeasement" (2017) adopted by historically white institutions (HWI) in the face of campus activism by students of color in the second half of the 20th century. These student activists formulated radical demands aimed at institutional transformation. They advocated the abolition of racist educational policies, not "acknowledgement and celebration of diversity" (2017). Faced with this crisis, university leaders sought solutions that would "quiet complaints" (2017) from students of color while also reassuring university "trustees and nervous donors [...] who wanted their colleges and universities out of unflattering public spotlight" (2017). The measures adopted by universities ultimately emptied student demands of their subversive potential. A similar phenomenon can be observed in institutions across the U.S. today. Student

activists of color are asking for initiatives focused on the hiring, retention, and advancement of faculty and staff of color in senior roles, increases in scholarships for low-income students of color, and resources for dealing with racial violence and trauma on campuses. In response to these demands for social and racial justice, schools are hiring diversity officers and investing in diversity programming that fail to transform the core mode of functioning of academic institutions. By adopting these measures, institutions "seek to quiet the protesters, trustees and donors at the same time, all the while creating little systemic or transformative change on the campus" (2017). These institutions aim to "appeas[e] their constituents and [avoid] recognizable institutional change" (2017). The rhetoric of institutional re-tailoring deployed by universities aims to assuage concerns arising from both sides.

Adopting certain forms of discourse is an effective way of signaling a commitment to change while preserving "old" institutional habits. Words can appear to be doing transformative work while in fact actively working to keep things exactly the way they are.

Sara Ahmed describes words that deliberately fail to bring into effect what they promise as non-performatives. Ahmed employs the notion of performativity in the sense given to this term by J.L. Austin. For Austin, performative utterances have the power of transforming the social reality they describe. In formulating this kind of statement, a person is "doing something rather than merely saying something" (Austin 1961). Examples of performative utterances include saying "I do" in a marriage ceremony, placing a bet by saying "I bet twenty dollars my team will win," or firing an employee by telling them "You're fired." Performative utterances are not truth-evaluable, which means we cannot say of them that they are true or false. Instead, they can either be "happy" or "unhappy". They are "happy" when they do what they were meant to do, and "unhappy" when there is something wrong with them. In contrast, Ahmed's non-performatives are "happy" when they do not do what they say they do. Ahmed explains that

commitments are often viewed as performatives, as if the mere formulation of a commitment commits a person or institution to doing something: "a commitment 'commits" (Ahmed 2016, 1). If I tell you I am committed to being more punctual, you will expect me to be more punctual in the future. Or, to raise the stakes a bit, if I tell you I am committed to pay equality, you will expect me to pay you the same amount as others in your position irrespective of your race or gender. In practice, however, commitments do not always commit people or institutions to something. I can make a commitment and not do anything else. The very fact that I am making a commitment might allow me to avoid doing something about this commitment (for example, working on being punctual or paying you fairly) because everyone is distracted by the fact that I made a commitment. The commitment commits to something in my place. Ahmed argues that many institutional commitments to diversity and inclusion function as non-performatives in this way. They do not "commit institutions to a course of action" (Ahmed 2016a, 1). Institutions can "make [these] commitments without being behind them" (Ahmed 2012, 119). To get behind such commitments, institutions would need to override other commitments they are often not willing to disavow. These other commitments might be more implicit and problematic; they are often kept away from the public's eye and do not make their way into official mission statements. Getting behind commitments to diversity and inclusion would also require that institutions address the histories of racist ableism, sexism, classism, and colonial plunder that lay the foundation for the field of higher education today. This would threaten the university as we know it and as it knows itself. As Ahmed writes, commitments to diversity and inclusion are "makeable because they [are] not doable" (2016, 1). They are makeable precisely because they do not require that institutions get behind them.

Non-performative institutional commitments should not elicit too much discomfort.

They should instead aim to produce "good" and "light" feelings. To achieve this goal,

institutional commitments must avoid notions that are perceived as abrasive or confrontational. Joyce Bell's and Douglas Hartmann's (2007) study of popular conceptions of diversity in American culture reveals that while the actual meaning and function of this term remain elusive, "diversity" is overwhelmingly perceived as a positive term. Most of the interviewed participants describe diversity in generic and "generally upbeat" (899) terms. Some praised the importance of "includ [ing] everyone" and "embrac [ing] our differences" (899), while others claimed diversity "makes life more fun" and "adds beauty to life" (899). When asked to elaborate on these responses, however, many struggled to offer more than "generic platitudes" (900) establishing diversity as a "positive value" (903). Several respondents avoided addressing race directly in their discussion of diversity and downplayed its importance by "lumping it together with a host of social differences" (905) such as differences in ideas, opinions, educational trajectories, and even parenting styles. "Diversity talk," Bell and Hartmann argue, can become a form of "small talk that avoids the 'elephant in the room" (905). In this case, "[racial] inequalities, not to mention racism itself, are [the] big structural elephants" (905) avoided by respondents. The participants engage in forms of "linguistic separation" (2007, 906) that allow them to praise the benefits of diversity while avoiding "more uncomfortable conversations about inequality, power, and privilege" (906). After having spoken comfortably and with conviction about the virtues of diversity, many respondents "became frustrated and uncommunicative" (906) when asked to speak about the relationship between diversity and inequality. For Bell and Hartmann, their responses illustrate the fact that diversity has become a form of "happy talk" (911) that is divorced from efforts to dismantle social inequality.

The ubiquitous circulation of certain notions in the field of higher education largely depends on their ability to function as 'happy talk'. Words like "access," "diversity," and "inclusion" serve an appearing function, while other words, like "sexism," "racism," or "ableism,"

sound dull, angry, and noisy. The people who use dull, angry, and noisy words are viewed with suspicion. Scholars have shown how the people who expose racism, sexism, or ableism in purportedly inclusive environments are promptly accused of being angry, paranoid, or pathologically stuck in an oppressive past that has long been overcome (Ahmed 2012; 2016b; Doharty 2020). By naming these problems, they are themselves labeled as problems by institutions. Those who are not appeared by the language of "diversity," "access," and "inclusion are labeled as bitter, peevish, entitled, or frustrated. Inspired by Ahmed's notion of the feminist killjoy, scholars of disability have offered the notion of the crip killjoy to describe how disabled people can refuse compulsory demands for happiness that reinforce their oppression (Apelmo and Nordgren 2021; Johnson and McRuer 2014; Mollow 2013). Questioning the assumption that "we" all value accessibility and inclusion is enough to make someone a crip killjoy. As crip killjoys, we know that the field of higher education is neither inclusive nor accessible for disabled people. Disabled people continue facing accessibility barriers in higher education despite the proliferation of institutional commitments to inclusion. Why should we accept to turn access and inclusion into empty vessels reproducing the status quo? We know better than to ignore the elephant of academic ableism in the room. This next section examines what is promised by inclusion and what effects this has on disabled people's experiences of higher education.

III. The Promise of Inclusion

If metrics of diversity appraise the integration of members of underrepresented groups in institutions from which they were previously excluded, then inclusion names the process through which institutions become more diverse. The image of a closed door comes to mind. Those who previously stood outside this door are invited to cross its threshold and make their

way inside. Making the university accessible opens new doors for disabled people. In addition to describing a process, inclusion functions as a promise in two senses. First, inclusion is what institutions promise to deliver: "we will be more inclusive!" The pledge by institutions to uphold this value is perceived as a reflection of their good moral character. Second, inclusion itself is full of promise. It contains the promise of auspicious beginnings and evokes a brighter and better future. Who is this future for? Is inclusion the gateway to a long overdue transformation of the material and symbolic architecture of higher education? In what follows, I offer three reasons for remaining guarded about embracing inclusion as the end goal of accessibility. First, discourses and practices of inclusion intervene within existing oppressive structures rather than disrupt them. Inclusion fails to disrupt the status quo with respect to the exclusionary homogeneity of the university. Second, these discourses and practices can falsely motivate the impression of change and let institutions off the hook too easily. Third, practices of inclusion are partial, selective, and conditional in ways that reproduce ableist, sexist, racist, and classist hierarchies of deservingness.

Institutions of higher education are built on legacies of exclusion that have constructed certain groups of people as "the inverse or opposite of higher education" (Dolmage 2017, 3). This does not automatically change because disabled people are suddenly allowed to enter the room. The inclusion of disabled people in institutions of higher education does not disrupt the assumed superiority of ability and the association of disability with inferiority. To be invited in the room when the room itself does not change might produce the superficial impression that things are different, but this impression eventually reveals itself to be an illusion. Or, if the room does indeed change, it will still be experienced like it was never intended for disabled people in the first place if it was nondisabled people, rather than disabled people themselves, who determined what needed changing. I agree with Stewart when zie argues that we must pay

close attention to the gap between "who's in the room and the nature of how the room operates and feels to those within it" (Stewart 2016). Or, in the words of disability justice activist Mia Mingus: "Just because disabled people are in the room doesn't mean there is no ableism [...] or that people won't pretend we're invisible" (Mingus 2011). Just because disabled people are included does not mean that ability stop being the unmarked center around which the entire field of higher education is organized.

Nirmal Puwar (2004) cleverly appropriates the term "space invaders" to describe how the inclusion of members of socially marginalized groups in academic spaces is perceived by insiders as a kind of intrusion. Beneath the shiny veneer of an inclusive rhetoric that is deployed to justify their presence, "space invaders" are regularly made to feel out of place in academia. Space invaders occupy an ambiguous position: they are "both insiders and outsiders" (8). They may very well, in theory and in practice, be included, but they are still figured as "belonging elsewhere" (Puwar 2004, 42). Puwar's analysis focuses on women and racialized minorities entering social spaces dominated by norms of whiteness and masculinity, but her analysis also applies to the case of disability. Disabled people, too, are treated as "trespassers" (8) whose "right to belong" (8) in academic spaces is contested by 'original insiders' in explicit and implicit ways. This might come in the form of offhanded comments or off-the-cuff jokes by professors and other students: "They really let everybody in these days!" or "I guess I'm not allowed to use that word anymore!" Space invaders are also reminded that they do not belong by the constant doubts other people have about their abilities. As Puwar explains, "Tthere is a niggling suspicion that space invaders are not quite proper and can't quite cut it" (59). They must exceed expectations to "combat under-expectations" (59) while being careful not to outshine the 'original insiders' in ways that would offend them. The treatment outsiders receive once they have been included serves to ensure that they remain "anomalies" (59) in the system.

Some people are perceived to legitimately belong in certain spaces, while others must be welcomed into these spaces. The legitimate occupants of these spaces play the role of hosts and "receive as guests those who embody diversity" (Ahmed 2012, 42). The fact that some people are being welcomed and others are doing the welcoming tells us that inclusion is always temporally retroactive. It is premised on a distinction between those who were always imagined to be there and those we must now accommodate.

In this sense, inclusion relies on what Jay Timothy Dolmage (2017) calls a retrofit. A retrofit is a corrective that supplements, improves, or amends existing structures to fix a problem. The addition of a wheelchair-accessible ramps to a university building is a prime example of this type of adaptation. The university slaps a ramp onto the building to fix the problem of inaccessibility. Of course, the reason why the building needs a ramp in the first place is because it was built without consideration for accessibility. Instead of being built into the architecture of higher education from the start, accessibility provisions are added onto inaccessible environments to achieve compliance. We will return to this question in more detail in later chapters. For now, what matters is that a retrofit communicates the idea that "disability is supplemental to society, that it is an afterthought or imposition" (Dolmage 2017, 105). Returning to the image of inclusion as a new door that opens, we might say that the door that opens is never the main door. Instead, "disability as an identity category can come in the side or the back entrance if it is to be included at all" (2017, 106). In similar terms, Fritsch writes that "disability is included as an afterthought; welcome, but only by way of the side entrance" (Fritsch 2013, 141). This type of "backdoor accessibility," as a disabled student interviewed by Wertans and Burch (2022) calls it, makes disabled people feel like their needs are "secondary to that of their non-disabled peers" (2022, 68). When inclusion only occurs through side doors and back entrances, disabled people begin feeling like they are "add-ons" in an educational system

that was never intended for them in the first place. Consider these powerful remarks by R. Tina Catania, a disabled graduate student writing about her experiences in academia:

Classes, programs, and TA responsibilities are not designed with accessibility in mind. Just like the university, which was created by and for rich, white men in a racist-sexist-heteropatriarchal society; women, people of color, people with disabilities, and so on, have been "added in." They try to add us in and stir us into their already ableist "diversity soup." But why can't classes be designed to be accessible from the start? We were never conceived of as belonging; we were never meant to be citizens of the university. (Carter et al. 2017 emphasis added)

The people who are added in to the 'ableist diversity soup' described by Catania were never perceived as belonging in higher education settings in the first place. Diversity, whether in the form of disability, race, gender, size, or sexuality, is stirred into the mix after the fact, as if to add some spice and flavor in the otherwise bland 'soup' of organizations and institutions.

Efforts to artificially diversify the field of higher education by promoting superficial inclusion amount to what Stewart calls a "Kool-Aid" approach to structural and systemic injustices. Zir writes:

For too long we've centered on the goal of achieving a critical mass of racially minoritized constituents as the best reflection of campus progress. Where White, cis-gendered, heterosexual, Christian, temporally able-bodied, and middle- and upper-class people are the water and the minoritized people are the cherry Kool-Aid mix, as it were. We merely have poured the contents of this cherry-flavored pouch into the existing water and stirred and hoped it would be enough to produce sustainable change. And that clearly has not been effective and has not been the case. (Carter et al. 2017 emphasis added)

What do we achieve when mixing in new flavors and colors? To borrow Stewart's terms, "compositional diversity" is not the same as "institutional transformation" (2017). We can add more people in and stir all we want; this alone will never be enough to radically reconfigure existing institutional norms, practices, and systems. The fact that some people are being included in higher education does not in itself constitute evidence of progress. At the risk of stating the obvious, the fact that some people have made it in the room is only evidence of the

fact that they have made it in the room. Their inclusion does not necessarily entail that their perspectives will be given any weight or that a meaningful redistribution of power, resources, and opportunities will follow. The room in question can largely stay the same with the only thing changing being the image it projects in the world.

This brings me to my second worry about inclusion. I find that the current deployment of the rhetoric of inclusion has deeply pernicious effects. In many cases, promises of inclusion are employed as a smokescreen by institutions. Institutions that claim they are committed to inclusion get away with reproducing existing patterns of injustice and inequality precisely because they are perceived as beacons of progress. The fact that promises of inclusion function as a smokescreen distracting from sustainable change makes it challenging for members of socially marginalized groups to receive uptake when describing their experiences. Calling attention to the fact that institutions do not, in fact, uphold their commitments exposes critics to epistemic pushback and invalidation. Disabled people, Black people, people of color, gender nonconforming people, and queer people who challenge the view that institutional ableism, cissexism, and racism have been overcome are told: "Look, you're here!" "Look, look!" (Ahmed 2012, 43). They are treated "as if [they] are holding onto something [...] that [their] arrival shows has already gone" (43). Paradoxically, the fact that the institution claims it is committed to inclusion does not mean that the critiques of minoritized scholars and students will be taken seriously. Again, it only means that the institution claims to be committed to inclusion.

The rhetoric of inclusion can also be strategically employed to erect new walls that are less apparent while falsely generating the impression of change. In the field of institutional management, the notion of organizational inertia refers to how institutions resist change.

Inasmuch as institutions embody stability, predictability, and dependability, inertia is described by some as "a defining trait of institutions" (Munck af Rosenschöld, Rozema, and Laura 2014,

639). Overcoming institutional inertia is challenging because it requires steering an institution away from paths on which it has become dependent. Munck af Rosenschöld et al. describe this as the "stickiness" of institutions (646). I find this view of institutions to be somewhat incomplete. I agree that institutions are "sticky," but it seems more accurate to say that they are both enduring and adaptable. In many cases institutions endure precisely because they adapt to changes in environmental, social, technological, economic, and political conditions. Institutions that fail to adapt to changing conditions often collapse and decay. The ones that endure do so because they develop steering tactics that allow them to continue reproducing their essential structures and commitments while responding to new demands.

Moreover, institutional stability is not always a product of pure inertia. Christopher S. Galik and Leila Chelbi (2021) helpfully distinguish between "active" and "passive" stability to describe different modes of institutional stability. While passive stability refers to the forms of inertia described above, active stability designates "purposeful actions by established interests to maintain existing constructs" (2021, 468). The notion of active stability highlights the work involved in "affirm[ing] and preserv[ing] advantageous arrangements" (468). This means that the institution's closed doors, glass ceilings, and brick walls are not immutable and unchanging structures. Institutions are not "stuck" with them because of forces outside their control or because of the weight of the past. These barriers are constantly moved strategically to ensure that advantageous arrangements are preserved. Rather than being attributable to rote repetition or passive inheritance, the preservation of the past involves work on the part of institutions. A lot of doing goes into keeping things the same while appearing different.

Discourses and practices of inclusion are structurally reliant on more or less apparent forms of exclusion. As a practice of social reconfiguration, inclusion purports to rearrange existing relations of interiority and exteriority between groups and individuals. Those people who were previously excluded (i.e., outside) a group or structure are now included (i.e., inside) in its sway. In doing so, processes of inclusion reinforce the impression that these distinctions are warranted and produce new categories of "outsiders." When a door opens, the distinction between inside and outside is reinforced. Or, put differently, the door opens only for some people and remains closed for others. Regardless of what institutions claim, inclusion is never for everyone. Only those forms of difference that are perceived as profitable because they can be rehabilitated or assimilated into the mainstream are seen as meriting inclusion. This view of inclusion is indebted to scholarship in the field of queer, crip, feminist, Black, and disability studies showing that logics of inclusion are tied to capitalist values of productivity and to oppressive conceptions of normalcy (Dolmage 2018; Erevelles 2016; Ferguson 2004; Mitchell and Snyder 2015; Puar 2017; Smilges 2023). This scholarship challenges the assumption that inclusion begets justice and exposes the collusion between discourses and practices of inclusion and systems of power and oppression.

The incorporation of 'deserving' marginalized people into the nation state can be employed to obscure and abet the exclusion of others who are framed as 'unworthy' and 'undeserving'. For instance, carefully orchestrated narratives of queer inclusion have been employed by nation-states to signal their support of sexual and gender minorities at the same time as these nation-states deployed extreme violence against other non-conforming minorities (Puar 2007; Turnbull-Dugarte and Ortega 2023). In the field of disability studies, the notion of ablenationalism (Mitchell and Snyder 2015) designates the progressive inclusion of small groups of disabled people into the nation state based on their ability to integrate global consumer culture and approximate norms of productivity and independence. This process of inclusion depends on the "normalization of some disabilities" (2015, 119) at the expense of "other non-normative, less easy to accommodate differences" (119). While some disabled people

have integrated the class of the "able disabled" (118), others are implicitly constituted as abject and undesirable. This type of division is evidenced in the North American disability rights movements foregrounding of issues of concern to primarily white, wealthy, heterosexual, and cisgendered disabled people living in the Global North. Rights-based movements have historically ignored the imbrication of ableism with global systems of oppression based on race, ethnicity, nationality, class, caste, gender, and sexuality. This focus has resulted in disability non-discrimination laws that protect the rights of some disabled people but do little, for instance, to address the staggering rates of incarceration of Black and Brown disabled people (Crowe and Drew 2021) or the forms of disenfranchisement experienced by disabled asylum seekers (Loyd, Secor, and Ehrkamp 2023). In a different register, the figure of the "supercrip," a disabled person who achieves exceptional success in the face of adversity, paints a hyperindividualistic portrait of life with a disability that celebrates over-achievement and frames under-achievers as less deserving of inclusion.

Forms of conditional inclusion that produce harmful exclusions also govern academic settings. Inclusion does not automatically unsettle the expectation that everyone in higher education will function the same way and thrive under the same conditions. Once they have been included, disabled people are simply expected to adapt or perish. In recent decades, institutions of higher education have increasingly aligned themselves with a neoliberal ideology. Neoliberalism broadly refers to an ideology and policy model that promotes a culture of individual responsibility and supports both the privatization of public goods and the abandonment of welfare provisions in favor of a free market. In the realm of education, the turn to neoliberalism has coincided with a massive defunding of public education and the rise of tuition fees (Mintz 2021; Newfield 2021). Without oversimplifying the variations in structure across educational institutions, a common thread runs through much of public higher education

in the United States (and in many other places) which transforms students into customers and school administrators into business managers (Mintz 2021; Saunders 2010; Slaughter and Rhoades 2000). The expansion of market logics to the sphere of higher education has imported notions of efficiency and productivity into academic spaces. The ideal neoliberal subject is inventive, independent, self-reliant, and flexible enough to adapt to increasingly precarious workplace conditions. The normative expectations generated by this ideal prompt Dan Goodley to argue that "[the] functioning neoliberal self is an able-bodied and minded one" (Goodley 2014, 28). In this context, "unproductive" disabled people are viewed as burdens on educational systems and as unfit for belonging. Notice how this approach shifts the grounds for exclusion from a person's disability status to purportedly disability-neutral criteria for success. In academic meritocracies, disabled people can be judged as unworthy of inclusion for failing to adhere to neoliberal demands for productivity without their exclusion being perceived as discriminatory.

Although they are framed as objective, the standards of performance review employed by universities are "encoded with ableism" (Waterfield, Beagan, and Weinberg 2017, 329) from the start. Disabled academics are expected to replicate the ideal of an "optimal (non-disabled) academic" (345) through forms of self-governance that ultimately determine their worth to the institution. As a result, disabled people who are not considered "predictably productive under neoliberalism" (Fritsch 2013, 142) face substantial barriers to professional and educational success. Disabled scholars must prove to the university that they are as valuable as their nondisabled colleagues. Many of them fear they will no longer be perceived as qualified or essential if they disclose their disability status. The disabled faculty members interviewed by Waterfield and colleagues (2018) report making studied efforts to provide colleagues and deans with assurances that they are as "hardworking and productive" (Waterfield, Beagan, and

Weinberg 2017, 338) as their nondisabled peers. One interviewee described how she worked for years to build her image as a productive and involved scholar before disclosing her disability. Earning this recognition allowed her to stave off potential concerns about her performance when her disability began affecting her work. Another interviewee reported grading papers from a hospital bed to avoid being perceived as lazy and unfit. Laura L. Ellingson notes that by "over-functioning to provide industrious cover to [their] visible disabilities, [disabled scholars reinforce the ableist assumption that [they] do not belong in the academy until or unless [they] can function without needing accommodations. [...] Their resilience, creativity and exhaustion are taken as proof that there is nothing wrong with the status quo" (Ellingson 2021, 27). The productivity levels of "industrious" disabled scholars can be used as an excuse to deny their less "industrious" disabled peers' accommodation requests. They are used as evidence that disabled people can make do without accommodations if they work hard enough. As the next chapter will explore at length, many disabled students also hesitate to request academic accommodations because they want to show their peers and professors that they can succeed without them. They may be encouraged to think this way by professors or parents who tell them accommodations are "crutches" that limit their full potential, an ableist narrative (and metaphor) that instead limits disabled students' educational success in environments designed for nondisabled students.

The reasons why ableist standards of entry and performance are upheld in higher education are complex. Individual attitudes and beliefs play a key role in sustaining ableist

¹ The shift to remote work during the COVID-19 pandemic has only exacerbated the invisible pressure to perform even while under duress. How many of us have held class online, given talks, or worked overtime while being sick with COVID-19?

norms. Many people (including some disabled people) assume that accommodating disabled people's needs involves relaxing expectations of rigor and quality, without, of course, these values being examined critically. The numerical inclusion of non-traditional participants within academic ranks is "often positioned in contrast to a focus on academic excellence" (Shallish 2015). As a result, the increasing democratization of access to higher education is seen as a direct assault on purportedly objective evaluations of merit. The mentality according to which current generations of students must jump through the same hoops as those jumped through by older generations often motivates a dogged resistance to any changes that would make academic life less hostile, taxing, and mentally and physically distressing.

The problem, however, runs much deeper than individual attitudes and beliefs. Ableism is constitutive of the intellectual norms and standards of academic life, and it is especially central to the ethos of academic philosophy. In many ways, disability is viewed as antithetical to academic philosophy. To begin, the rationality requirement structuring the field of philosophy translates into the implicit expectation that all philosophers will be sane and nondisabled (to say nothing, of course, of the expectation that they will also be white and male). Philosophers must also be savvy, quick-witted, clever, sharp, whip-smart, bright, and brilliant. They must always remain composed, clinical, self-contained, and unemotional. More than once, I have heard philosophers suggest that any philosopher worth 'his' salt should be able to 'think on his feet' and 'run laps around' his interlocutors. For this, a person must be both mentally agile and assertive. The boundaries of philosophical intellectual communities are extremely hermetic with respect to mental and psychological differences. Licia Carlson frames cognitive ableism, "a prejudice or attitude of bias in favor of the interests of individuals who possess certain cognitive abilities [...] against those who are believed not to actually or potentially possess them," (Licia Carlson 2001, 140), as endemic to academic philosophy. To even consider including people with

intellectual disabilities in philosophical conversations remains unconscionable for many philosophers.

Disabled people are not seen as 'real' philosophers, but disabled philosophers writing about disability are also seen as not doing 'real' philosophy because disability is still largely treated as a biological fact that belongs to the realm of science and medicine (Tremain 2013; 2017). Johnathan Flowers (2022) argues that disabled philosophers writing about disability are viewed as producing work that is not philosophical because their proximity to disability violates the requirement that philosophical inquiry be detached from its object. Disability is something about which nondisabled philosophers can write dispassionately, using it as a rhetorical device, but it cannot be studied for its own sake by philosophers who embody it. In other words, non-disabled philosophers can use disabled people as case studies, as "bricks [...] upon which moral arguments are built" (Flowers 2022, 86). However, the idea of letting disabled people themselves write about disability disturbs the ableist foundations of academic institutions. If disabled people are to be let into the building, they cannot write about disability on top of this.

Moreover, if some disabled people must be let into the building, it should at least be the "good" or "right" ones. As I am certain many other disabled scholars have also observed, the conditional inclusion of disabled people in higher education plays out through the lens of an unspoken distinction between "good" and "bad" (or the "right" and "wrong" kinds of) disabled people. For instance, universities and departments happily include disabled graduate students whose disabilities do not interfere with their productivity but hold those whose disabilities negatively affect their academic outcomes individually responsible for their situation, further stigmatizing these disabled students and casting them aside. Graduate students whose disabilities negatively impact their work often suffer quietly and become known as "lost causes"

when it is informally decided that they are no longer worth "saving." Disabled people who are not "productively" disabled and who experience conditions and symptoms that interfere with their capacity to meet departmental benchmarks quickly become expendable. This can result in students struggling to obtain funding, being deprioritized in teaching allocations, being denied recommendation letters, or getting the cold shoulder from faculty advisors. Experiences of non-linear trauma, bereavement, chronic and cyclical health crises, and psychological distress have no place in graduate programs that offer limited funding in exchange for unimpeded productivity, a demand also faced by disabled faculty members. In addition to administrative pressures, disabled scholars are confronted by doubts from their peers regarding their intellectual capacities, especially if their disabilities are related to competencies associated with stamina and rationality. Disabled academic Maryam Khan describes how the "silent accusation—if you can't handle the pressure and job, then leave" (McKenzie and Khan 2023, 4) underlines workplace interactions with administrators and colleagues. Manifestations of disability are considered tolerable only when they do not disrupt idealized standards of performance. Although disabled students are formally encouraged to apply to higher education programs that focus on making academia more "inclusive," they, much like disabled faculty members, often find themselves with little to no institutional support and forced to fend for themselves once they have been included in these programs. In other words, once you have been included, you're on your own. The open doors of inclusion can quickly become a trap when the institution has no intention of providing disabled people with the necessary scaffolds for securing livable working and learning conditions once they have been included.

Conditional inclusion necessarily occurs at the intersection of other vectors of oppression based on race, class, gender, ability, sexuality, size, and nationality. The manifestations of disability that universities are willing to tolerate are contingent on the

identity categories through which disabled people are perceived. For instance, while some forms of emotional and neurological difference are tolerated, others are automatically perceived as threatening or undesirable. Theri A. Pickens writes that "madness cannot be marshaled for gain when yoked to a body already associated with it (regardless of whether that link is constituted in ability, racial, or gendered terms" (Pickens 2017, 253). The bodies and minds of trans, queer, disabled, Black, and Indigenous scholars and scholars of color are already perceived as antithetical to rationality. Their reasoning capacities, self-control, and even moral judgment are constantly being challenged. To survive in higher education, many disabled people feel that they can safely embody only some of their identities or only some of their disabilities. They cannot belong with their whole selves, as multiply marginalized and multiply disabled people. At the same time, other forms of madness are seen as "germane to \(\text{a person's} \) identity as a professor" (243). Pickens argues that "'[nutty] professors' or 'absent-minded professors' become (or remain) socially permissible when they are tenured, straight, white, male, and/or able-bodied" (243). A quick search for images associated with the label "crazy professor" immediately produces thousands of photos and cartoons of white, middle-aged cisgender men, many with tousled graying hair, sporting glasses and white coats. This is what crazy should look like, a reminder that everyone does not "[get] to be mad" (253) in the academy. Once more, inclusion practices rely on practices of exclusion that are complicit with the reproduction of oppressive social hierarchies.

To state it unambiguously, I do not advocate a wholesale rejection of all attempts to foster the inclusion of disabled people in higher education, or in society, for that matter. I do, however, encourage greater suspicion toward discourses and practices of inclusion. It should be clear by now that the fact that an institution claims it values inclusion does not mean that exclusionary practices have no place in it. Disabled people can be included in institutions of

higher education without this leading to a meaningful redistribution of resources and opportunities or to a disruption of ableist practices and norms. Empty promises of greater inclusion can be used to legitimate ableist inaction. Finally, restrictive practices of inclusion will inevitably exacerbate the forms of vulnerability and precarity experienced by those who fail to meet their conditions.

IV. Conclusion: Inclusion Gaps

This chapter has considered how "access" and "inclusion" are discussed in higher education settings. I have shown that although both are treated as unquestionable goods, there are significant gaps between what institutions claim to value and what they do. Like other minoritized participants in academic life, disabled people occupy an ambiguous position in academic spaces. They are 'in,' but only as intruders that are retroactively added into the mix (the Kool-Aid or the soup) after the fact. The ambiguous position they occupy allows them to notice things others who occupy more privileged positions do not readily see, such as the gaps between what institutions say and what they do. Ahmed describes this kind of noticing as "minding the gap" (2020). People who do not embody the norms of the institution notice the gaps because they routinely come up against them. They must mind this gap to survive in academic institutions. These observations about the status of those who are at once included and excluded in institutions are central to early Black feminist scholarship about the epistemic significance of positionality. Writing about the experiences of Black women in academic settings, Patricia Hill Collins (1986) described their status as "outsiders within." Collins argues that Black women's outsider within status generates a unique standpoint shaped by the material and historical conditions of working in hegemonically white and male intellectual spaces. 'Outsiders within' are relegated to the margins of society but also to those of their

departments and institutions. They have made it in the academy but must now mind the gap between institutional promises and institutional actions (or inaction). Once they are in, they are expected to tolerate the overt and covert forms of sexism, racism, classism, and ableism perpetuated in purportedly "inclusive" environments. They are expected to join with others in forming a "we" that values access and inclusion but does not ask too many questions. While this chapter has focused on what institutions say, the next chapter will consider what they do to make higher education more accessible for disabled people. As I will show, the dominant approach to accessibility in higher education relies on the provision of legally mandated accommodations. Accommodations are seen as a universal, individualized solution to the problem posed by disability.

Chapter 2: Access Problems in Higher Education

I. Introduction

The ADA promotes equal access and full participation for disabled people in all areas of society. While Title II of the ADA prohibits disability-based discrimination, Section 504 of the Rehabilitation Act of 1973 states that any educational program or activity receiving federal financial assistance must be made accessible for disabled students. To meet these legal requirements, post-secondary schools must provide qualified disabled students with accommodations that equalize opportunities for participation. They must offer these accommodations unless doing so fundamentally alters educational programs or results in undue financial or administrative hardship. The scope and definition of undue hardship remain under debate in disability rights law, with many critics denouncing this clause's function as a problematic legal loophole (S. K. Collins and Matthews 2012; Grue 2023; Rioux, Crawford, and Anweiler 2001). Accommodations can include but are not limited to accessible reading materials, distraction reduced testing environments, adaptive technologies, note taking assistance, or sign language interpreting services. Failure to provide legally mandated accommodations amounts to discrimination under the law. In academic settings, much like in other spheres of society, accessibility has been reduced to the provision of legally mandated accommodations.

To request academic accommodations, students must engage in an interactive process involving faculty and staff members at their institution's office of disability services. This interactive process can vary slightly from one institution to the next, but it consistently begins with the requirement to produce documentation for one's disability. Documentation requests serve to substantiate a student's disability and can include requests for educational or medical records, reports and assessments by health care providers, diagnostic testing, accommodation

histories, as well as other forms of documentation considered relevant by evaluators. Once students produce the required documentation, they meet with a staff member from disability services who works with them to determine the accommodations they will be provided.

Institutions are not legally required to offer students the best available accommodation and can reject a student's preference in favor of an alternative they deem more cost-efficient. Once a student's accommodations have been approved, an accommodation agreement is drafted.

Students must share this agreement with each new instructor at the beginning of every semester. The overall process from when a student initiates contact with student disability resources on campus to when they finally receive accommodations often takes well over a month.

While promising at first blush, this approach generates several intractable issues. This chapter considers problems generated by "accommodationist" (Tremain 2013) approaches to access in higher education. I argue that these approaches fall short on multiple counts: (1) they single out the needs of disabled people as "special" or "exceptional" while leaving the ableist status quo intact; (2) they misconstrue the lived experience of space; (3) they treat accessibility needs as frozen in time and temporally predictable (4); they rely on overbroad medical documentation requests that medicalize disability and cast medical professionals as gatekeepers of disability rights; and (5) they depend on forced disclosures that render disabled students vulnerable and intrude on their privacy. By bringing into focus the lived experiences of disabled people, I show that the system for accommodations fails to meet their genuine needs and instead exacerbates the inequalities it has been tasked to relieve. In formulating this critique, I am not contesting that rights-based legislation has helped secure important gains for disabled people. My goal is to highlight the problems raised by accommodationist approaches and to

invite a richer, more phenomenologically attuned reflection on how conflating access with the provision of accommodations impacts the lives of disabled people.

Not all practices of access unfolding in higher education settings are accommodationist in nature. My course syllabi as a teacher include a mandatory section on disability services offerings on campus as well as a section on accessibility in the classroom. I position this section on the first page of the syllabus, to ensure it is one of the first things students read when (or if) they read up about the course. This section frames access as a collaborative practice that concerns everyone in the course and offers a range of examples of accessibility needs. I also distribute anonymous accessibility surveys to allow students to make suggestions aimed at increasing accessibility or to share their needs. Many student suggestions have become permanent fixtures in my courses. As instructors, we can adopt several baseline measures that will make our courses more accessible without requiring student disclosures. We can allow students to choose between in-person or virtual office hour meetings, ensure that all course materials are screen-reader accessible, build in time for check-ins throughout the semester, and troubleshoot with students when new accessibility needs emerge. Most crucially, we can offer students opportunities to share their accessibility needs and model this practice by communicating our own needs around access. I focus on accommodationist approaches in this chapter because they constitute the dominant paradigm for thinking about access in higher education. Still, we should not forget that across college and university classrooms, many people (disabled and nondisabled) are crafting pedagogical alternatives to accommodationist approaches that materialize access as a mode of relational self-determination and strengthen collective capacities for creating meaningful access.

II. What About Disabled Faculty?

My discussion of access in this chapter focuses primarily on the experiences of disabled students in North American contexts. Disabled students are at the bottom of the academic hierarchy and face substantial barriers to participation and self-advocacy. The policies surrounding student accommodations also have the benefit of being more clearly identifiable than those for disabled faculty members. But students, of course, are not the only disabled participants in academic life. Disabled faculty members also face multiple barriers to success and participation. While the share of disabled faculty members has slowly increased in recent decades, the most recent data suggests that they are still widely underrepresented in faculty ranks (Grigely 2017). Recently, the pioneering work of scholars like Shelley Tremain (2013; 2019) Margaret Price and the Disabled Faculty Study (2011; 2021; Price et al. 2017), Therí A. Pickens (Pickens 2017; 2020), Teresa Blankmeyer Burke (2017), María Elena Cepeda (2021), and others has foregrounded the systemic forms of inaccessibility faced by disabled faculty and the limited institutional support they receive. Because disabled faculty members are employees rather than paying customers, their requests for accommodations are not subject to the same administrative procedures as those of students. Many institutions have no formal accommodation policies for disabled faculty members, and several others have policies that fail to adequately meet faculty needs (Dundon 2020; Gierdowski 2020; Saltes 2020; D. H. Smith and Andrews 2015). Given the lack of institutional directives surrounding this process, many faculty members struggle to determine who should administrate their requests. At some institutions, faculty requests for accommodations must first be submitted to department chairs or deans, thus forcing disabled faculty members to disclose their disability to someone with no disability expertise who holds considerable influence over decisions regarding promotion and tenure. The pressures of promotion and tenure processes and the rigidity of professional expectations surrounding academic work make disability disclosures in professional settings

especially hazardous for junior and non-tenured faculty. Until academic ableism is systematically addressed at an institutional level, cultures of silence and 'passing' around disability will persist in faculty ranks.

In 2012, the American Association of University Professors released a report titled "Accommodating Faculty Members Who Have Disabilities," calling attention to the importance of developing clear procedures surrounding accommodation requests for faculty members. The report states that disabled faculty members must be able to "accomplish the essential functions" associated with their position "either with or without an accommodation" (American Association of University Professors 2012). As disabled scholars have indicated in their responses to the publication of this report, these often elusive "essential job functions" are defined from the perspective of ability. Dolmage argues that "the creation of a list of essential functions will always, by the very logic at its heart, mark out a predetermined quotient of bodies and minds as less than, extreme, irrational, broken" (Dolmage in S. Kerschbaum et al. 2013). Instead of invoking ableist standards that mark some disabled faculty members as nonessential and non-functional, what would it mean to "Tmake" space for the unexpected and extraordinary insights, interactions, embodiments, and cognitive and communicative styles that disability promises" (2013)? While there has been some slow progress on this front, there is still a long way to go before we collectively recognize the value disabled faculty members bring to academic institutions. Every year, disabled faculty members are pushed out of higher education due to systemic inaccessibility, institutional indifference or outright hostility, and unrealistic demands for scholarly productivity. Although many of the examples I consider in this chapter describe the experiences of disabled students, the insights I develop have implications for how access is implemented at all levels of higher education. Despite important differences between the experiences of disabled students and those of disabled faculty members,

the failure of accommodationist frameworks to transform access into a vector for collective change functions as a baseline across them.

III. Individual Problems and Individual Solutions

The title of this chapter is a nod to Tanya Titchkosky and Rod Michalko's claim that our societies view disability as "a problem in need of a solution" (Titchkosky and Michalko 2012, 67). The "disability-as-a-problem frame" (2012, 67) is widely and uncritically embraced in modern societies. At an ontological level, disability is perceived as a problem because it disrupts the 'normal' or 'natural' order of things. Disability illustrates the problem of the body or mind gone wrong, hence our obsession with curing, rehabilitating, or eliminating disability. By framing disability in this way, we also individualize it. Disability is a distinctly individual problem. It is viewed as a deficit with (or within) someone's body or mind, rather than as something socially and culturally constructed. Accommodationist approaches frame disability as an individual limitation that generates problems of fit. This individualized view of access—and, by extension, of disability—runs counter to decades of activism and scholarship by disabled people suggesting that the most significant barriers they face in their everyday lives are generated by environments that exclude them rather than by their so-called "broken" bodies and minds.

In university settings, disability is a technical problem for which the university must find a "technical solution" (2012, 75). The fact that institutions claim they are committed to disability inclusion does not mean that they expect disabled people to come through the door. When disabled people show up, they show up as a problem. They become bold and conspicuous question marks on an otherwise blank page, stringing together a series of questions: "What are they doing here anyway?" (Titchkosky 2011, 78). Why did they come? What do they want?

What do we do with them now? How do we include them? The solution we have devised to the problem of disability is to accommodate it into existing structures. The benefit of accommodations is that they do not disrupt institutional lifeways. As Titchkosky writes: "the socio-political situation within which disability appears (e.g., education) is left virtually untouched" (Titchkosky 2022, 120). In educational settings, access is perceived as an individual issue that "follows some individual people with disabilities" (Titchkosky 2011, 40) around. Accommodations solve the problem of disability with individual solutions.

Disabled people's accommodations follow them around everywhere they go. They follow them in classrooms, offices, and virtual meetings, but also in their interactions with other people. In many cases, a disabled student's first interaction with a new instructor involves sharing their accommodation letter with them, not knowing how it will be received. Many students are apprehensive about this initial contact and worry about the lasting impact it might have on a professor's perception of them (Denhart 2008; Hong 2015; Zhou 2023). Whispers in hallways about having to "put up" with disabled students' accommodations generate an image of accommodations as large, unwieldy signs that disabled people carry around everywhere they go, waving them over their heads in provocation. How distracting those big signs can be for those who are just trying to get by and do things "normally"! How obnoxious of disabled people to ask for "special treatment"! The accommodations requested by disabled people in university settings are often treated as if they are getting in the way of others (i.e., nondisabled people) who are not followed around by access in the same way. Some complain in hushed tones about being 'buried' in accommodation letters or about things getting 'out of control.' Disabled students' accommodations are sometimes treated as though they make spaces inaccessible for others (i.e., for nondisabled students). A disabled student using a laptop to take notes in a classroom with a strict laptop ban policy may be accused of distracting other (again,

nondisabled) students whose optimal learning experience is compromised by "accessible" classroom distractions.² When accommodations get in the way of nondisabled people, they are no longer considered reasonable. Because access follows disabled people around, it also disappears with them. One can almost imagine the collective sigh of relief that is let out when disabled people exit the room.

After becoming disabled following a traumatic brain injury, Kate Lindemann started paying closer attention for the first time to what gets called an accommodation. The measures that allowed her to participate in university life following her injury were called accommodations, but the ones employed daily by her nondisabled colleagues were not. For instance, the reminder program installed on her computer was treated as an accommodation. The answering machines allowing her colleagues to field phone calls while working were not. The footstool added to her office chair was an accommodation. Luxurious chairs with footstools in the university president's office were not. Many other examples can be added to this list. Recordings of lectures are considered accommodations if they are legally mandated. They were not considered accommodations during the COVID-19 pandemic, when many courses moved to an online asynchronous format. The spell-checking functions and predictive typing software on our phones are not accommodations. These technologies only become accommodations in the hands of some students. Lindemann asks: "Could it be that "accommodation" is simply a legal term to get institutions and organizations to respond to the needs of persons newly accepted as workers in such institutions or organizations? Or is "accommodation" simply a subtle way to indicate to those with certain needs that they are "other," not one of "us"?" (Lindemann 2003,

² This example was suggested to me by C Dalrymple-Fraser, whose discussion with Shelley Tremain includes further insights about the effects of laptop ban policies on disabled students (Dalrymple-Fraser 2018).

503). By singling out the needs of disabled people as "exceptional," accommodations have an 'othering' function and effect.

Accommodations that automatically 'out' disabled students to their peers and physically separate them from nondisabled students (for instance, requests that students who need to use laptops sit in the front row of class) make disabled students feel negatively "spotlighted" (Saltaga 2017, 56) in educational settings. As one student puts it, accommodations are a way of telling everyone else "hey look this person is different" (57). The big unwieldy sign carried by disabled students indicates to others that they are not 'one of us.' The system for accommodations neither challenges nor overturns ableist ideologies that uphold the superiority of ability over disability. It promotes the inclusion of disabled people into nondisabled spaces without prevailing norms and practices in these spaces being challenged in any meaningful way. Instead of challenging the conditions for learning in higher education, the goal of accommodations is to bring disability back into the fold of ability to make it disappear. Disabled people's participation in society is made conditional on their assimilation into normalcy and their successful approximation of states of ability.

Auxiliary measures such as accommodations transform access into a technology for the reproduction of ability and able-bodied worlds. After a talk during which I presented aspects of this work, the philosopher of disability Joel Michael Reynolds asked me if I considered access and ability to be cognates. I have thought a lot about this question since then. My view is that "ability" is both a thickly value-laden concept used to justify an oppressive ideological system (i.e., ableism) and a descriptive term that identifies the constantly shifting, situated, and highly variable ways human beings engage and experience the potentialities of their bodies and minds. When I claim that the system for accommodations in higher education transforms access into a technology for the reproduction of ability, I am thinking of the former concept. The system for

accommodations considers disability from the point of view of non-disability and evaluates how disabled students can be optimally integrated into existing educational environments. This framing of disability is rooted in the cultural belief that human beings are wired for and should aspire to the highest level of independence. This myth tells us that we should fear anything remotely associated with dependency—including our own bodies, processes of aging, and states of illness and disability—because being able to do things on our own is where our value lies as persons. In this context, access and ability do function as cognates: access is a means for generating a relevant set of abilities in relation to specific, pre-determined tasks. The goal is to generate ability and eliminate disability, a framing that suggests that disabled people can (and, indeed, must) transcend their disability to achieve excellence. Instead of challenging the conditions for learning in higher education, the goal of accommodations is to bring disability back into the fold of ability to make it disappear.

Accommodationist approaches also do not account for the possibility that meeting the needs of one disabled person can generate new barriers for others. The assumption is that there will be at most one "exception" in every classroom, one "special" person whose needs can be addressed and neatly compartmentalized. But of course, disabled people's needs, just like those of nondisabled people, do not exist in isolation from the needs of others and from the settings they find themselves in. Our needs are relationally defined by and emerge from our relationships with others. A disabled professor might struggle to meet a disabled students' need to have access to lecture notes before class. The transportation glitches experienced by a professor using a wheelchair might delay the start of class and reduce learning time in ways that exacerbate learning anxieties for some students. Office hours or courses held exclusively on Zoom might help avoid such delays, but they could also negatively impact those students who feel better supported by in-person learning. Instead of viewing these scenarios as instances

of "competing" accessibility needs, disability scholars suggest thinking of them as examples of access frictions. Thinking of needs as being in competition or conflict with each other encourages us to view access as a zero-sum game. Instead, we might think of how frictions inevitably occur when people come together and approach the creation of access as a collaborative process. Access frictions can be frustrating, puzzling, and even distressing, but working with others to resolve these frictions can give way to more relationally fulfilling forms of access.

Joseph Michael Valente, a deaf professor at The Pennsylvania State University, tells the story of being accosted by students in the hallway a few weeks into the course of a graduate seminar on ethnographic methods. Valente explains that this seminar is especially popular with international students who are linguistic minorities at the English-speaking institution. At the time of the encounter in question, Valente was using American Sign Language interpreters in the classroom and proudly immersing himself in signing communities for the first time in his life. And yet his students accosted him one evening after class to register a complaint: the interpreters were "hurting [their] education" (Valente Michael 2014, 20). The students explained to Valente that they were bothered by the requirement to constantly raise their voice, repeat themselves when interpreters misheard them, and allow the interpreters to enter their personal space when signing. Their complaints left Valente "feeling raw and aggrieved" (23). He considered reporting the incident to the university but ultimately decided against it. Instead, he considered the power dynamics shaping his relationship with these students. As a signing deaf person, Valente was a minority in this class. According to a rights-based perspective, "This need to understand and be understood took precedence over the concerns of [his] students" (30). Yet these students were also linguistic minorities "[struggling] with the norms of an American graduate class in which they were expected to be active, speaking

participants, a role that was new to many of them" (30). Insecurities about satisfying intellectual conversational norms in a second (or even third) language, embarrassment at being asked to repeat themselves in an academic context where this requirement is sometimes loaded with racial prejudice, and discomfort with the violations of personal space imposed by proximity with interpreters all likely played a role in shaping their experiences with Valente's interpreters. Instead of shutting down his students' complaints, Valente elected to adopt a relational approach to accessibility in his classroom. He evaluated how his interactions with students and interpreters affected classroom dynamics and worked with students to develop strategies for navigating the friction between their needs. Valente explains that he now "[pays] attention—and ask[s] students to pay attention—to how [their] ways of working together build or interfere with [their] experiences of the class and what [they] are learning and understanding" (32). In Valente's classroom, access is no longer a concern that enters (and leaves) the room with disability. Instead of a competition between needs, it is a creative opportunity for collaboration. Valente's story encourages us to reimagine access as a relational process that involves multiple registers of difference, exclusion, and marginalization: access as interdependence in practice. The challenges of creating access merely reflect the complexity of human needs and relationships (and needs-in-relationships).

IV. The Lived Experience of Space

The second element of my critique concerns the conception of space at stake in accommodationist approaches to access. Access is often interpreted in spatial terms and associated with the removal of physical barriers faced by people with apparent physical disabilities. Checklists for creating accessible spaces target the design of doorways, entrances, elevators, exits, furniture, and fixtures to ensure they are usable by disabled people. These

efforts to render physical spaces accessible are essential. However, a conception of space as reduced to physicality misses the phenomenology of spatial experience and oversimplifies the spatial dimensions of accessibility. From the perspective of lived experience, space is not simply a physical container for physical elements. Many kinds of barriers affect our experience of space, and their elimination requires more than physical alterations. I challenge the reductive association between physical disabilities and physical barriers, on the one hand, and "non-physical" disabilities and non-physical barriers, on the other, arguing that attempts to map specific types of accommodations onto analytically generated subsets of disabilities misconstrue the phenomenology of space and disability. A distinction between physical and non-physical accessibility barriers is more restrictive than it is beneficial for the task of creating meaningful access.

One of the most celebrated images of disability rights activism in the 20th century remains that of disabled protestors abandoning their mobility devices and crawling up the stone steps of the U.S. Capitol Building to protest delays in the adoption of the Americans with Disabilities Act in 1990. The image of disabled protestors pulling themselves up the "steep steps" (J. Dolmage 2017) of the Capitol Building compellingly exposes inaccessibility as the root cause of disabled people's exclusion from society. The association between physical disability and physical access is also strengthened by the ubiquitous circulation of the International Symbol of Access (ISA), which depicts a wheelchair user and is employed to designate accessible areas in public spaces. Judith Felson Duchan (2006) offers two potential reasons to explain why access is primarily interpreted in spatial terms. To begin, physical barriers to access are more conspicuous (or apparent) than other types of barriers. The contrast between a wheelchair user and an inaccessible flight of stairs is taken to be self-evident.

Meanwhile, "[it] is perhaps more of a stretch for the uninitiated to think of small print, noisy

environments, or complex language" (Duchan 2006) as constituting barriers to access. Second, oral and written histories of the disability rights movement often focus on events such as the 1990 Capitol Crawl and center the experiences and perspectives of (white) physically disabled activists. Within the field of disability studies, proponents of the social model of disability use the example of a physically impaired body to describe how inaccessible spatial arrangements themselves produce disablement. In sum, a strong historical and theoretical tide has contributed to naturalizing the association between physical access and physical disabilities. When physical barriers are removed, pathways are cleared, and destinations can be reached.

I see two interrelated problems with this view of access. First, it is not the case that physical accessibility is only required by people with physical disabilities. People with many types of disabilities experience many types of barriers to accessibility, including organizational, physical, technological, attitudinal, temporal, financial, material, and communicational barriers. The association of specific disabilities with specific accommodations forces disabled people into categories based on what nondisabled people assume they need. On the one hand, people with physical disabilities require more than what is considered physical access (e.g., there may be a ramp outside the building of a department whose members hold ableist views; assistive technologies are inaccessible when they require considerable financial sacrifices; coordinating personal assistance is often time-consuming and calls for temporal flexibility; bus drivers can refuse to board a passenger in a wheelchair). On the other hand, disabled people with nonapparent cognitive, psychiatric, sensory, and environmental disabilities encounter access barriers that are related to features of their physical environment (e.g., a flickering light might be distracting for a professor with ADHD; poor insulation and humidity in the university library can trigger brain fog; the lack of quiet spaces at conferences makes these spaces inaccessible for neurodivergent participants; dissociative episodes can be triggered in

environments that are experienced as unsafe). In Kerschbaum et al.'s (2017) study of the accessibility needs of faculty members with mental disabilities, participants noted that they required both accommodations related to flexible timeframes and accommodations such as quiet spaces, adequate lighting, and the option to work from home. While the distinction between so-called "physical" and "non-physical" barriers may appear relevant from the perspective of accommodationist frameworks, the relevance of this distinction is less evident from the perspective of disabled people's everyday lives. The belief that what makes a space inaccessible can always be discretely located in one or another of its physical features does not measure up to how human beings, in fact, experience space. Consider, for instance, this description by Margaret Price of her experience at an academic conference:

My access problems rarely occurred when I needed to ascend stairs, make my way through narrow aisles, hear speakers, view images projected into screens, choose among narrow food options, or walk from session to session. Rather, I found that my difficulties manifested in puzzling, half-articulated concerns, which I didn't share with anyone else: People are talking to me, but I can't make sense of their words. I can't remember what that person just said. People keep touching me. I'm exhausted. I have to go outside. I have to go home. And there were also experiences not possible to articulate even in those not-very-articulate ways; for example, I can't think of a useful way to render the mingled horror and embarrassment of I am having a panic attack during a meeting at a conference, but it has happened (more than once), and it certainly meant the space was not accessible to me — though exactly where that inaccessibility might have been located is difficult to say. (Price 2017, 161)

The fact that this environment was not accessible to Price cannot be explained by pointing to any of its readily identifiable features (i.e., the narrow aisles, images on screens, food options, or hallways between meeting rooms). And yet Price experienced the conference space as deeply inaccessible. We can speculate that several factors played into Price's experience of this space as inaccessible. Academic conferences often involve travel and the disruptions of routine it brings with it. Conferences take place in indoor spaces, many of which are poorly ventilated, scent-heavy, and unfamiliar to those who navigate them for the first time. To fit as many presenters

in as little time as possible, conference schedules are crowded with talks and offer few breaks that are not also treated as opportunities for informal networking. Conferences spaces are also governed by conversational and argumentative norms (among other norms), expectations of collegiality and professionalism, and a general dismissal of participants' bodily needs (e.g., for using the restroom, hydrating, fueling up on adequate amounts of food, breastfeeding, or resting). In this context, Price's remark that she struggles with identifying where exactly inaccessibility is located is unsurprising. Inaccessibility is not so much located in a discrete feature of the conference environment as it is produced by a convergence of factors that render this space inhospitable to bodies and minds like her own.

Phenomenologists concerned with how human beings experience space tell us that we do not encounter it as a geometric grid composed of discrete elements. Maurice Merleau-Ponty (2012) rejects the idea that space exists as a pre-given container in which things are merely laid out and argues instead that space is inseparable from human embodiment. In some spaces, our bodies achieve an equilibrium with their surroundings that allows us to explore various possibilities for action. We inhabit such spaces as supportive dwellings that enable our sense of spatial agency. In contrast, this equilibrium between our body and the world can be threatened or lost. Spatial environments can just as well offer a ground for the exercise of our freedom and agency as they can throw us off course and make us feel adrift, alienated, and out of place. What matters to our experience of space is how the particularities of our own embodiment relate to the dynamically shifting landscapes we share with other people. For instance, the same space might envelop us almost imperceptibly during a meditation session and feel suffocating when we are quarantined with unpleasant roommates for weeks on end. A second key dimension of this phenomenological account is the claim that space is not an isolated dimension of human experience. Indeed, spatiality encompasses more than the physical expanses in which bodies

move. Rather, our existence is spatialized at its core, and thus our experience of space is intertwined with all other aspects of our life. Lived space should be understood to include all the ways we orient ourselves within "physical" and "non-physical" milieus, be they social, cultural, affective, spiritual, sexual, political, or practical. We sometimes feel alone in rooms filled with strangers, despite the physical proximity of others. Meanwhile, the cultivation of emotional intimacy can bring geographically distant friends closer to each other. We sometimes need room alone to think some ideas over and other times find that a conversation is the ideal space for processing our thoughts. By emphasizing the relationship between bodies and space, rather than considering each term in isolation, a Merleau-Pontyan approach reveals that what matters for our inhabitance of spaces cannot be reduced to an itemized list of discrete features.

For this reason, making spaces accessible extends far beyond the provision of accommodations targeting physical barriers. To offer just one example, we might consider how ableist attitudes impact disabled people's experience of a given space. The term 'attitudinal barriers' is employed to describe a vast ensemble of prejudiced beliefs, perceptions, and attitudes toward and about disabled people that impede their full and equal participation in society. Examples of attitudinal barriers in higher education might include an instructor's condescending attitude toward a student requesting accommodations, experiences of being ignored or disregarded by other students when asking for help, or patronizing colleagues who assume a disabled peer cannot be trusted with basic tasks. Disabled people in academia report facing ableist attitudes in the form of microaggressions, toxic work environments, harassment, marginalization, dismissive attitudes, and passive-aggressive retaliation for having requested accommodations (Lindsay and Fuentes 2022). These attitudes are perpetuated by other students, colleagues, university administrators, department chairs, and co-workers. Ableist

attitudes directly contribute to the production of exclusionary spaces in which disabled people are made to feel like they do not belong. Just as much as physical obstacles that prevent mobility, attitudinal barriers serve to "keep disabled people 'in their place'" (Kitchin 1998, 345) and convey to them that "they are 'out of place'" (345). They render academic spaces unwelcoming and unsafe for disabled people. Spaces can very well comply with accessibility legislation without being safe or welcoming for disabled people. Ableist attitudes generate forms of inaccessibility that fall under the radar of accommodationist approaches focused on physical modifications.

Margaret Price's notion of kairotic space similarly considers space as dynamically modulated by human interaction. In contrast with Merleau-Ponty, however, Price combines this approach with a careful consideration of how dynamics of power shape our experience of space. Drawing on the Greek notion of kairos, often translated as "the opportune moment," Price describes kairotic spaces as informal, "often unnoticed, areas of academe where knowledge is produced and power is exchanged" (Price 2011, 21). Examples of kairotic spaces include classroom discussions, individual meetings with a professor, hallway discussions at an academic conference, job interviews, question-and-answer sessions following talks, and even collegial gatherings in bars, private homes, coffee shops, and restaurants. Kairotic spaces favor impromptu, as opposed to rehearsed, forms of communication and demand a set of social skills that include the ability to interact in real-time with other persons. While some participants feel completely at ease in kairotic spaces, other participants experience barriers to engagement in them that typically go unnoticed. To describe how the same space can be experienced differently by different participants, Price offers the example of a professor meeting a thesis advisee for lunch: "Although the professor might feel very comfortable in such a space, and assume that the event is just a friendly lunch (even a treat for the student), it is likely that the

student will feel at least a bit on display, called upon to behave appropriately and to perform academically (although subtly) as well" (2011, 61-62). If this student also experiences severe anxiety, the interaction will likely generate additional, perhaps even unsurmountable worries (e.g., will they be able to converse in a fluid and spontaneous manner for the duration of the lunch? Will their mentor unexpectedly shift the topic to the student's research or to missed deadlines? Will they be able to process information at a pace that is considered acceptable by their mentor?). In this kairotic space, the barriers to communication faced by the anxious student are compounded by their invisibility for the professor. Such barriers are difficult to locate once and for all and cannot be meaningfully addressed without acknowledging the complex relational dynamics at play in this encounter.

Although removing physical obstacles to participation is essential for increasing accessibility in higher education, this alone is not enough. As this section has argued, spaces are irreducible to a list of their objective features. The barriers they present for disabled people are also not discrete or permanent. As Price writes, "many barriers — as well as forms of access — arise in context, shifting as the circumstances and bodyminds of/in a space shift" (Price 2017, 160). This, in part, is why reducing the provision of access to an itemized checklist is doomed to fail. While checklists can be a useful tool to get things off the ground, they should not be taken to indicate that spaces are made de facto accessible by the fact that we have checked enough boxes. Our lived experience of space is modulated by affect, attitudes, relationships, power dynamics, norms, and language, to name only a few factors. It is also, rather centrally, modulated by our relationship to time.

V. Crip Time and The Academic Clock

Accommodationist approaches are consistent with ableist ontologies that treat abilities as fixed possessions and accessibility needs as permanent and predictable deficiencies. For instance, students must secure their accommodations for an entire semester or academic year all at once. Once a list of accommodations has been determined and an agreement is drafted, these accommodations cannot be modified without reinitiating the interactive process.

Accommodation agreements treat accessibility needs as frozen in time and accessibility as a 'one-time fix.' Disabled students must try to envision how their bodies and minds will respond to different situations well in advance of finding themselves in these situations. They must request everything they will need when they meet with disability services. Asking for revisions to one's accommodation agreement can lead to students being perceived as too demanding, unprepared, or disorganized. These revisions also introduce additional delays in the provision of much-needed accommodations. This approach to the provision of accommodations implicitly relies on the view that disability is a fixed feature of bodies or minds that generates a set of consistent limitations and foreseeable needs.

In practice, however, our bodies and minds are not entirely predictable. They follow their own rhythms and often surprise us. Both our needs and abilities are vulnerable to changes in ourselves and our environment. While some are more permanent, others change as we move through different settings, activities, relationships, phases of our lives, and even times of day. Human beings have difficulty breathing at high altitude and experience shortness of breath while acclimating themselves to reduced levels of oxygen. Our ability to breathe is affected by the altitude at which we find ourselves. Our fingers can swell after intense forms of exercise, when spending time in hot weather, or during menstruation cycles and pregnancy. This can temporarily affect our grip strength and generate pain. Many people experience mental fatigue after long hours of working or during periods of high stress. Our needs are impacted by these

Organism-environment interactions affect both our needs and our abilities. For similar reasons, accessibility needs are not frozen in time. A person who has not used a cane in months might suddenly need one again after a challenging round of chemotherapy, while a deaf person might be able to lipread in some circumstances, but not when more than two people are speaking. Another person might be provided with printed materials that facilitate her participation in a departmental meeting. Later that evening, however, she may not be able to meet her colleagues for a drink at the local bar because it is crowded and too loud. Alternatively, a student's participation in a classroom discussion might take a turn for the worse when their previously manageable level of anxiety rises unexpectedly in response to a colleague's triggering remark. Another might have different accessibility needs in the university library than they would in a large auditorium. A person's accessibility needs might change throughout the course of the same day because they cannot comfortably wear their hearing aids for more than a few hours at a time. Meaningful accessibility requires revisable, open-ended arrangements that transform access into a dynamic process, and thereby, into an action verb.

The linear conception of time at the heart of accommodationist approaches also conflicts with the non-linearity of crip time in other ways. Scholars of disability employ the notion of crip time to describe the unique ways disabled and chronically ill people relate to time. As a concept arising from disabled experience, crip time challenges the primacy accorded to linear and progressive timeframes that exclude many disabled people from the category of "valuable citizen." In line with queer theorists (Freeman 2010; Halberstam 2005), theorists of crip time argue that normative conceptions of time alienate those whose bodies, minds, and desires fall out of sync with mainstream (i.e., white, cisgendered, heterosexual, and able-bodied) society. In their essay "Six Ways of Looking at Crip Time" (2017), Ellen Samuels reflects on how

experiencing "the impairments of old age while still young" (2017) has alienated them from societal ideals of youthfulness, health, and ability. Instead of following a straight line, the unpredictable temporality of chronic illness, for Samuels, involved "jerky stops and starts, tedious intervals and abrupt endings" (2017). Like Samuels, and despite social myths according to which all human lives progress linearly, many disabled and chronically ill people live full and complex lives in the margins of normative time. Alison Kafer writes that "rather than bend disabled bodies and minds to meet the clock, crip time bends the clock to meet disabled bodies and minds" (2013, 27). By bending the clock, crip time makes room for disabled ways of being in the world.

In contrast with modern ideals of relentless forward progress, crip time often involves slowness. For disabled people, operating on crip time might involve moving slower in space, requiring more preparation before leaving the house, or needing more breaks during the day. When things go slower, they also tend to take more time. The extra time required to perform some activities means that other activities might need to be delayed (or canceled altogether). Being mindful of crip time requires flexibility around scheduling and punctuality. The "slowness" of disability can have just as much to do with unexpected flare-ups of pain as it does with "dependency on attendants (who might themselves be running late), malfunctioning equipment (from wheelchairs to hearing aids), a bus driver who refuses to stop for a disabled passenger, or an ableist encounter with a stranger that throws one off schedule" (Kafer 2013, 26). In a nod to the notion of crip time, La Mar Jurelle Bruce describes the rhythms of madness under the heading of madtime. Madtime does not merely 'bend the clock,' as Kafer indicates that crip time does; it "tears calendars [and] smashes clocks" (2021, 204) altogether, giving way instead to the unruly expanses of mad temporality. Bruce connects his account of madtime to a critique of white Eurocentric reason and its obsession with clock-time. What Bruce terms

"Western Standard Time" (2021, 204) designates the dominant timetable of modern capitalist societies, one in which 'taking one's time' is equivalent to 'dragging one's feet.' Depressive time, one of the manifestations of madtime identified by Bruce, rejects linear temporalities in favor of the temporal unruliness of emotions like sadness, despair, and grief. One can imagine, here, the slowing down of physical movement that makes it difficult to complete daily tasks during periods of serious depression or the reclaiming of a "defiant slowness [that] centers and honors sorrow" (Bruce 2021, 213) in the face of ongoing legacies of racism.

Both Mad and crip time are incompatible with academic settings organized around temporal frames that reward progress and linearity. Due dates, extensions, schedules, sabbaticals, semesters, milestones, timetables, and tenure clocks set the pace of academic life and structure expectations of productivity in higher education. Academic spaces such as classrooms are also highly temporally regulated. As Price explains it, "[students] are expected to arrive on time, absorb information at a particular speed, and perform spontaneously in restricted time frames" (Price 2011, 63). Students who show up late to class are often perceived by teachers as rude and disruptive. Even though habitual lateness can be caused by logistical problems, learning anxiety, health-related disruptions, and severe depression, these reasons are rarely considered valid (or considered at all) by professors. Temporal expectations in the classroom are viewed as objective standards that serve to discriminate between serious and non-serious students, even when they exacerbate disability-related symptoms.

While some disabled students can apply for accommodations that provide them with extended testing time, Woods points out that this measure is often offered only during examinations, the assumption being that the standard pace of classroom lectures and discussions is universally accommodating. The disabled students interviewed by Tara Woods (2017) about their experiences in college writing courses explain that the imposition of strict

time limits to complete tasks can give rise to physical and psychological discomfort. A student describes his relationship to timed assignments as follows: "It is hard for me to focus with my ADD, but my OCD, I get really nervous about time and everything and making sure everything's correct. And when I do that and I get nervous, my Tourette's goes off, and it makes me more self-conscious about people hearing" (Wood 2017, 271). Time pressures quite literally exert pressure on disabled students' bodies and minds, who are then disciplined for the disruptions generated by their symptoms.

The slowness of accommodation bureaucracies can itself hinder disabled people's ability to meet expectations of productivity. As Price (2021) argues in her work on faculty accommodations, slowness is not intrinsically good or liberating for disabled people. Slowness can also generate harm. Price argues that the characteristic slowness of the system for accommodations negatively impacts disabled people in academic settings. To obtain accommodations, disabled people must carve out time in their schedule to meet with health specialists and access providers. Frequent delays in the implementation of accommodations cause disabled people to miss out on professional opportunities, lose sources of income, or sustain serious injuries. Disabled people can be forced to wait several months before obtaining accommodations, only to find themselves no longer needing these accommodations because they have dropped out of a course or left their position due to inaccessibility. The slowness of accommodation bureaucracies is qualitatively different from the slowness of crip time invoked by Kafer. It is wielded by institutions, either deliberately or non-deliberately, to control (or rather, to limit) disabled people's access to the support they need. Institutional inertia, bias, and apathy toward disabled people can manifest in how the institution takes its time and avoids certain responsibilities, an idea I will return to in the next chapter.

Crip time directly challenges some ideals held sacred by academics, including the view that a person's scholarly production is commensurate with her value. In an essay appropriately titled "It's Time for 'Crip Time," blind scholar Darla Schumm (2022) discusses her experience working to meet the requirements for promotion and tenure at her institution. Schumm notes that while conducting research is likely to be demanding for all scholars, "the layers of tedium multiply when doing it without sight" (2022). Using adaptive technologies that are not always compatible with university platforms and programs significantly slows down the writing process, while rereading a particular passage in a book can mean relistening to an entire chapter before finding the passage in question. For people with major depression, migraines, anxiety, or other nonapparent chronic illnesses and disabilities, unpredictable and intermittent symptoms can quickly throw a wrench in plans to complete a book manuscript, prepare a talk, or submit a grant application. While some institutions are willing to offer adjustments surrounding tenure review clocks, asking for an adjustment can itself be perceived as a sign that a scholar is unfit for tenure. If she is unable to meet the institution's inflexible demands, the next scholar in line for her position will be able to fulfill them.

For years, Schumm considered speaking up about the challenges she faced while doing research, but she felt "torn between a desire to let others know how remarkable it is that [she publishes] anything because it is so hard and a desire to be perceived as just another relatively unremarkable scholar, doing what scholars do" (2022). To avoid being perceived as "whiny and self-pitying" (2022), Schumm waited until she was tenured to publish this article on crip time. She writes: "I needed to 'prove' that I could jump through the hoops with the same timing as everyone else before exposing my vulnerabilities" (2022). The desire to be perceived as a "normal" scholar is powerful. Despite knowing they need crip time, many disabled students and scholars force themselves to meet institutional demands, even when it comes at great cost to

them. Many do so because they know that the field of higher education, despite its superficial commitment to diversity and inclusion, is not a place where disabled people can be their whole selves. Disabled scholars and students who exceed academic expectations by accelerating time's expected progression (for example, by publishing more than is expected of someone at their career stage, or by reaching a milestone faster than their peers) are praised for their excellence. If they can afford to, disabled people may also periodically move at faster speeds in anticipation of future disruptions (for example, because they know that they will run out of steam when the stress of the semester accumulates). Hyper-productive disabled scholars and students are praised for 'overcoming' their disability and held up as a model for others to (fail to) replicate.

The contrast between Mad and crip time, on the one hand, and academic time, on the other, became especially apparent at the height of the COVID-19 pandemic. As some scholars rushed to produce work on and about COVID-19, with some academic publications on the topic appearing only weeks after the start of lockdowns, many disabled scholars were struggling to merely survive the ongoing crisis. The already precarious position occupied by disabled scholars in academic settings was rendered more precarious by immediate threats of loss of employment, infection, debilitating illness, and death. Like many other disabled scholars "[working] from overwhelmed, traumatized, sick and pained bodyminds," Alyson Patsavas and Theodora Danylevich "felt and knew the gap between those who were able to use the pandemic times to produce more prolifically, and those whose reflections and experiences could not 'keep pace' with such crisis temporalities" (Patsavas and Danylevich 2022). While stay-at-home orders increased the productivity of some scholars, many others found themselves burdened with additional responsibilities and "negotiating intensified levels of grief, precarity, risk, fear, isolation, and anger" (2022). Closures of daycare facilities and schools forced many parents, but especially mothers, in the case of heterosexual households, to assume responsibilities for childcare

and forgo their academic research (Kasymova et al. 2021). Although the experiences faced by disabled caregivers during the COVID-19 pandemic were largely ignored by research and media, disabled scholars who are caregivers to children, family, and friends undoubtedly faced considerable challenges maintaining expected levels of productivity.

There is a clear, potentially ineliminable, tension between the variations of crip time and the rigidity of academic time. As Travis Chi Wing Lau writes, "[disability's] (ar)rhythms often clash with the academy's relentless temporality" (Lau 2017). For Lau, this means his disabled "bodymind will always be in tension with the profession [he is] training to enter" (Lau 2017). This tension can come to feel unbearable, especially given the fact that the demands of academic training often also strain biological and chosen familial ties, relations with community and land, and networks of care by healthcare providers and kin. Although legal accommodations can offer important forms of relief for some disabled people, crip time is not something that can be merely "accommodated." Honoring crip time in higher education would require a profound alteration of current ways of organizing academic life. It is unclear whether the field of higher education is ready to welcome such a radical transformation.

VI. The Medicalization of Disability

The ADA relies on a definition of disability that is independent from any medical diagnosis.

Despite this, the system for accommodations relies on medical professionals to establish student eligibility for accommodations. To become eligible, students must provide medical documentation describing the nature, severity, and effects of their impairment. The scope of these documentation requests varies across institutions, but it frequently requires students to undergo costly, time and energy-consuming procedures, tests, and evaluations. Accommodation bureaucracies cast medical professionals as gatekeepers of disability rights and reinforce

medicalized views of disability in society. By positioning Western biomedical knowledge as the arbiter of truth about disability, they exacerbate the social inequalities that disability accommodations are tasked to relieve.

The belief that a person's disability can and should be medically 'proven' is central to what Ellen Samuels calls the "fantasy of modern disability identification" (Samuels 2014, 124). According to this fantasy, disability is a "knowable, obvious, and unchanging" (124) feature of human bodies and minds that can be "measured, named, and quantified" (123). Fantasies of disability identification rely on processes of verification that treat disability as scientifically visible and verifiable, with the tools and measurements employed to establish disability status changing across centuries. The conviction that disability is a natural phenomenon that can be scientifically proven is empirically questionable. There exist many contemporary definitions of disability, to say nothing about the different ways disability has been defined in different historical periods. In the U.S., the ADA defines disability in terms of the limitations it imposes on major life activities. The notion of disability is a legal construct, rather than a medical one. This definition differs from how disability is defined under other U.S. laws. For instance, eligibility for Social Security Disability Insurance (SSDI) is determined by a person's demonstrated inability to be employed due to a medically determinable impairment. The proliferation of definitions of disability within the same legal system illustrates the fact that disability is not so much a discrete biological fact as it is an ambiguous, ever-shifting referent whose meaning varies historically, geographically, culturally, politically, and economically.

The system for accommodations offers a prime example of what Samuels describes as the biocertification of disability. Accommodation bureaucracies are essentially set up to validate or invalidate disability through the lens of biomedical knowledge. To be certified, disabilities must conform to hegemonic forms of disability categorization. A person's disability must fall

(or fit) into recognized disability categories without challenging the neat boundaries between them. Securing accommodations involves filling out—or, more accurately, getting medical doctors to fill out—the right forms in the right way. These forms can include questions about a person's impairment and diagnosis, symptomology, functional limitations, and medical history. They can also include questions about the frequency of a person's medical appointments, the medications they are prescribed, and how their disability interferes with their social and academic abilities. Thomas Abrams suggests that these and similar forms do not merely characterize a person's disability. Instead, they "[enact] disability, and in this way, [are] generative rather than representative of 'the real'" (Abrams 2015, 16). In other words, disability becomes objective (or real) when medical forms are appropriately filled out and filed away. Accommodation bureaucracies cast disabled people as 'entrants' in forms — understood here both as questionnaires and as pre-existing structures. This 'enframing' of disability itself produces the conditions for the emergence of disability as "an orderable and manageable thing" (2015, 15) that can be brought to "objective presence" (2015, 17). Disabled people whose disabilities defy medical categorization or do not fit in pre-established forms are screened out from obtaining accommodations.

There is no official requirement that documentation be requested or obtained to establish eligibility for accommodations. The ADA Amendments Act of 2008 makes this point very clear. While the law acknowledges that postsecondary institutions can require reasonable documentation, it also indicates that this step is not necessary. Institutions are not legally required to request medical evidence from students to establish disability status. The law also indicates that requests for documentation should remain reasonable to avoid generating additional obstacles for disabled people. The U. S. Department of Justice [DOJ] recently reached a settlement with Northern Michigan University following a complaint of disability

discrimination that confirms the DOJ's position regarding overbroad medical documentation requests. The DOJ's judgement in this case specifies that eligibility criteria for readmission after a medical leave should not screen out disabled people by placing an undue procedural burden on them. In a document offering guidance on documentation practices, the Association on Higher Education and Disability suggests that "requiring extensive medical and scientific evidence perpetuates a deviance model of disability, undervalues the individual's history and experience with disability and is inappropriate and burdensome under the revised statute and regulations" (Association on Higher Education And Disability 2012). While promising, this advice has yet to be widely adopted by institutions. Extensive documentation requests remain the norm across the field of higher education, and they discourage many students from seeking accommodations. As Tara Roslin argues, there is currently no regulatory framework "outlining and limiting the interactive process to inquiries of reasonable scope" (Roslin 2021, 111). The absence of a regulatory framework and accompanying lack of oversight "[results] in unwieldy documentation requests that intrude upon students' medical privacy and demean their personhood" (111). The current approach to accommodations casts medical professionals in a role they are not qualified to occupy because it "requires legal sophistication" (119). Again, under the ADA, disability is a legal rather than a medical category. This reliance on medical professionals to establish eligibility for accommodations "strains the physician-patient relationship, renders an undeserved endorsement of the medical model of disability, and tends to screen out disabled persons from accessing full and equal education" (120). Accommodationist approaches have "placed the medical community in a position of authority over disabled persons [and cast] providers in the role of 'keeper of the keys' to disability personhood" (120). Positioning medical professionals as legal accommodation experts pathologizes disability and reinforces medicalized views of disability in society.

To this day, the relationship between the disability community and the medical field remains fraught. Many disabled people are apprehensive about interactions with medical providers due to the pervasiveness of medical ableism. Sterilization campaigns, forced institutionalization, and abuses and neglect of disabled people in medical settings are not just horror stories from a distant eugenic past. They are very real concerns for disabled people in the U.S. and across the world (Dolmage 2022; Gim 2022; Roy et al. 2012; Scully 2020). Despite overwhelming evidence to the contrary, medical providers tend to assume that disabled people live worse lives than nondisabled people (Kothari 2004; Stramondo 2021). As evidenced by the adoption of hospital triage policies discriminating against disabled patients at the height of the COVID-19 pandemic, this assumption can become a death sentence for disabled people. Although they contain indispensable information, first-person reports of disability are often ignored or undervalued in medical settings. Though this view of disability has long been rejected by the disability community, patient-provider interactions are structured by the medical model of disability, which conceptualizes disability as "an individual tragedy or misfortune" (Reynolds 2017, 150) and associates it with pain and suffering. Both in society at large and in medical settings, disabled people's epistemic authority is distorted by ableist prejudice. These concerns are compounded for disabled people who also experience discrimination due to racism, sexism, classism, fatphobia, and transphobia in healthcare systems. Black, Indigenous, queer, trans, and fat disabled students and disabled students of color are more likely to encounter non-cooperative medical providers and struggle to obtain a medical diagnosis. They may not be able to switch medical providers when facing negligence, prejudices, or outright hostility. The process of obtaining medical documentation for one's disability is often strenuous. It is additionally challenging for disabled people without class, racial, male, thin, and cisgender privilege.

Financial burdens related to medical testing also function as a significant barrier to obtaining academic accommodations. Students must assume the costs of medical visits and testing, a reality made all the more concerning considering that many disabled students experience financial hardship (Moore 2003) and disabled Americans are two times more likely than people without disabilities to live below the federal poverty line (Center for American Progress 2022). In the United States, disability testing is a lucrative business. Testing costs can range anywhere from hundreds of dollars to several thousands of dollars for a single assessment and may not be covered by standard medical insurance. While some schools offer students resources to offset the costs of medical testing, most of them do not. Moreover, students may need to be tested multiple times and pay to have their results medically interpreted before obtaining an initial medical diagnosis (Krebs 2019). Medical assessments must also be routinely reviewed. A report on testing accommodations published by the United States Government Accountability Office (2011) details how a student was asked by her institution to obtain a new evaluation for her dyslexia every three years, despite her test results remaining consistent. In fact, it is common for schools to reject medical documentation of learning disabilities that is more than three years old (Macfarlane 2023). As Danielle Mireles (2020) argues, the requirement for medical documentation is perceived as a "race-neutral' and 'objective''' (2020, 45) criteria for evaluating the legitimacy of student needs. Yet, at least in the United States, access to healthcare is highly segregated along racial lines, resulting in massive racial disparities in access to care, diagnosis, and treatment (Baumgartner, Collins, and Radley 2021; Yearby 2018). Black students, students of color, and low-income students are significantly less likely to receive a medical diagnosis and to be approved for academic accommodations (Druckman, Levy, and Sands 2021; Yull 2015). Requiring that students obtain a medical diagnosis and pay out of pocket for disability testing imposes discriminatory

conditions that disqualify many disabled students from obtaining much-needed accommodations. By relying on policies that limit access to institutional support for low-income students, the system for accommodations perpetuates institutional ableism and racism in higher education.

VII. Forced Disclosures and Institutional Climates of Distrust

The expectation that disabled people will share personal information about themselves and disclose their disability to strangers to obtain accommodations is a central feature of accommodationist approaches. Invasions of privacy characterize the system for accommodations at every step. In addition to being exposed to medical scrutiny, disabled students must disclose their disability to the university and, by extension, to each of their professors. Although accommodation agreements shared with professors do not include information regarding the nature of a student's disability, the very act of submitting a letter to an instructor involves disclosing that a student has some form of disability. This act of disclosure often occurs before students have had time to build rapport with professors or even meet them in person.

Disability disclosures are complex rhetorical acts shaped by asymmetries of power.

While disclosing one's disability can be affirming in some contexts, it can be humiliating, unsafe, and demeaning in others, especially when it becomes a condition for obtaining access.

These kinds of disclosures can be especially unsafe for students, pre-tenured faculty, and other contingent faculty whose positions in academia are precarious. Disabled people have many valid reasons not to want to disclose their disability to coworkers, employers, and professors.

However, there is no way out of this requirement if they wish to obtain accommodations. Mia Mingus coins the notion of forced intimacy to describe how disabled people are forced to "share

personal parts of [themselves] to survive in an ableist world," (Mingus 2017b). She writes: "Disabled people are expected to 'strip down' and 'show all our cards' metaphorically in order to get the basic access we need in order to survive. We are the ones who must be vulnerable—whether we want to or not—about ourselves, our bodyminds and our abilities" (Mingus 2017b). Disabled people are forced to be vulnerable and disclose personal information about themselves even when doing so opens the door to potential abuses of power and retaliation. They must put their disability on display for others to obtain basic access.

These forced disclosures occur in the context of institutional climates of distrust in which disabled people's accommodation requests are treated with suspicion and viewed as unfair academic advantages at risk of being abused. Universities require medical certification to protect themselves from potential malingering. Extensive documentation requests are seen as necessary because accommodations should not be doled out to anyone who "just" asks for them. This approach to the provision of accommodations relies on the ableist myth of disability fraud, according to which a considerable number of people fake or exaggerate their disability status to gain social benefits and public sympathy. This myth has harmful effects on the lives of disabled people. It impacts how and whether disabled people choose to exercise their legal rights to accommodations, as well as the responses they can expect to receive when they do. Stories of people with non-apparent disabilities being violently confronted for using a disabled parking spot, or of ambulatory wheelchair users getting harassed for walking, routinely make the rounds on social media. Disabled people are accused of "gaming the system" and abusing benefits destined for others. Many nondisabled people (and some disabled people as well) are convinced it is "too easy" to obtain disability benefits and accommodations. In fact, it is very difficult to qualify for both. Disability fraud is extremely rare (Rein 2023; Segall 2023) and the overwhelming majority of applications for disability benefits are rejected (Tritch 2015).

Thousands of hours and taxpayer dollars are spent trying to identify cases of fraud while safety nets for disabled people nationwide continue to shrink.

What legal scholar Doron Dorfman (2019) calls the fear of the disability con also frames perceptions of accommodation requests in higher education. In a 2017 opinion piece published in the National Post, the professor of law Bruce Pardy compares academic examinations to track and field competitions, arguing that "extra time for mental disabilities is as unfair to other students as a head start would be to other runners" (Pardy 2017). Pardy claims that while students with physical disabilities are deserving of accommodations, students with mental and learning disabilities are not; these students' requests for accommodations amount to cheating. Views like Pardy's are not aberrations; they are extremely widespread in the field of higher education. As Katherine Macfarlane (2023) writes, "Tacademia" is especially prone to discussions that stigmatize people with disabilities" (1988). Complaints directed toward students with accommodations are commonplace. Students who are granted accommodations are often perceived by their peers and teachers as receiving unfair advantages, a view entrenched in ableist stereotypes that portray disabled people as manipulative, lazy, and illintentioned. Students with nonapparent disabilities are told that they are taking accommodations away from students who "actually" need them. The view that only some disabled students are rightly deserving of accommodations is especially popular. Behind closed doors, 'undeserving' disabled students are accused of being "snowflakes," "fakers," and "cheaters." Faculty members with nonapparent disabilities might hear these remarks from their own colleagues. When this happens, they are made to "understand that disability and disabled people are not welcome" (1988). They understand that it is not safe for them to disclose their own disability because this is how these colleagues would speak about them, too, behind closed doors.

In this climate, disabled students are understandably hesitant to apply for accommodations. Many choose to keep their disability status anonymous due to fears of negative interactions with individuals in positions of authority and fears of being perceived by their peers and professors as receiving special treatment (Grimes et al. 2019; Lyman et al. 2016; S. A. Smith, Woodhead, and Chin-Newman 2021; Kranke et al. 2013). As a result of these worries, many wait until their disability severely disrupts their academic work before disclosing it to others (Lightner et al. 2012). These disclosures sometimes come too late, and students end up dropping out of courses and programs. Many students, whether they are disabled or not, face challenges adjusting to postsecondary education. They may be moving away from friends and family for the first time in their lives and worry about finding new friends, managing new responsibilities, and succeeding in their classes, to say nothing about the additional worries experienced by first-generation students, low-income students, international students, students who are parents, and Black students and students of color. Cultivating a sense of belonging is especially important to student retention and success, but many students experience significant barriers to belonging in higher education. The desire to appear "as normal as possible" (Kranke et al. 2013, 43) motivates many disabled students, and especially students with psychiatric disabilities, to avoid disclosing their disability. A study found that up to 90% of students with psychiatric disabilities do not seek assistance from disability services due to fears of stigma (Megivern, Pellerito, and Mowbray 2003). Disabled students are also worried about being judged as 'outsiders' or 'leeches' by their peers and professors. One student frames their concerns as follows: "I feel mental health is my own personal struggle and I don't want special consideration when it comes to studying, I want to be able to achieve normality" (Grimes et al. 2019, 649). Students' fears of stigma are often rooted in past experiences of discrimination. Another student explains: "In the past I have been treated very differently by people once they

found out about my mental health issue. This has happened at work, at school as well as socially. I don't like to tell people about it unless they really need to know" (647). For Black disabled students and disabled students of color, worries about being judged as less qualified than their nondisabled peers are compounded by racist prejudice. These students must already contend with racist assumptions about their intelligence and academic merit (Mireles 2020; McGee 2018; Pellegrino, Sermons, and Shaver 2011). In determining whether to disclose their disability status, they must consider the possibility that obtaining accommodations will bolster negative racial stereotypes about their academic worth. Ultimately, students hesitate to request accommodations for a variety of reasons. They want to fit in and appear normalcy, they are afraid of being stigmatized, they do not want to be perceived as inferior or incapable, and they are anxious to be accepted by others. It would be too easy and convenient to dismiss these concerns as unfounded worries. Far from being unfounded, they are the product of institutional climates of distrust in which disabled people's self-knowledge is systematically invalidated and the legitimacy of accommodations is constantly called into question.

In addition to disclosing their disability, disabled students must learn to self-advocate. This requirement is largely attributable to differences in laws regarding accessibility in K-12 and postsecondary settings. Disabled students who may have become accustomed to the Individuals with Disabilities Education Act (IDEA) must now familiarize themselves with the ins and outs of anti-discrimination laws like the ADA and the Rehabilitation Act. Under the IDEA, the burden of identifying and serving the needs of disabled students falls on institutions. This responsibility is transferred from the school to the students in higher education, hence the requirement for students to disclose their disability to obtain accommodations. Because most disabled students transitioning from high school to post-secondary settings lack self-advocacy training and practice, this transition can be extremely difficult. Disabled students transitioning

from high school to higher education experience considerable "self-advocacy hurdles" (Eckes and Ochoa 2005, 16). Emunah Woolf and Alise de Bie (2022) identify a paradox at the heart of accommodationist approaches: students must prove their disability by making it visible, but they must also make it disappear by "passing' as normal" (2022) in the classroom. Their disability should be easily identifiable, and they should be able to "perform a 'less disabled' version of themselves" (2022) when necessary. The path to successful self-advocacy requires disabled people to turn the 'disability switch' on and off to make nondisabled people more comfortable. The constant burden of self-advocacy weighs heavily on disabled students. Aparna R., a disabled graduate student and disability activist, emphasizes the burdensome nature of this requirement: "There is often talk about how disability accommodations, and by extension disabled people ourselves, are a burden on instructors and schools. What's missing from the conversation is the burden that requiring self-advocacy places on us as disabled people just to secure our place in the classroom" (R. 2020). Self-advocacy is especially onerous for Black disabled students and disabled students of color who are "stereotyped in racially coded ways as unreasonable, aggressive, and 'angry' when [they] self-advocate" (2020). The forms of advocacy tolerated by institutions are heavily policed and systematically depoliticized. Disabled students must advocate for their needs without challenging the ableist institutional context and larger society—that imposes this requirement on them. Institutions promote self-advocacy through the individualist lens of self-efficacy and resilience while ignoring calls for systemic change.

VIII. Conclusion: The Inaccessible Path to Academic Accommodations

The findings presented in this chapter highlight why being 'included' in higher education is not enough. While the number of disabled students entering higher education has increased in recent decades, these students continue to face significant barriers to participation. Accessibility has been reduced to the provision of legal accommodations, but the system for accommodations is riddled with problems. Obtaining academic accommodations is a laborious process that exposes disabled people to medical scrutiny and forces them to disclose their disability to strangers, with no guarantee that the accommodations they are provided (if they are successful) will adequately meet their needs. Being granted accommodations also does not mean that these will be consistently enforced. Disabled students must advocate for their needs at every turn, reminding others of their accommodations and requesting that they be respected. Katherine MacFarlane (2023) offers the term "accommodation discrimination" to describe how a system intended to generate greater equality between disabled and nondisabled people in fact perpetuates discrimination. The process through which accommodations are obtained is "difficult, demoralizing, and ultimately discriminatory, even when the end result is the originally requested accommodation" (2023, 1972). The path to securing academic accommodations is itself inaccessible, and it exacerbates many of the inequalities it is tasked to resolve.

To my claim that the system for accommodations is riddled with problems, some might respond that we should focus our energies on ameliorating this system and fixing its problems. This system is not going anywhere, and it is the best tool we currently have at our disposal to increase accessibility in higher education. Instead of moving beyond accommodation, we should double down on them by making them more effective. I don't disagree that the system for accommodations could be ameliorated, and I support any changes to it that would allow it to better serve the needs of disabled people. That said, I do not think that accommodations are our best tool for creating meaningful access. To put it simply, access and accommodations are not one and the same. In fact, the conflation between these terms is highly problematic and limits

our understanding of what meaningful access involves and requires of us. Within an accommodationist framework, the golden standard for access is minimal compliance with the law. Reducing access to accommodations guarantees only a bare minimum of access in society. To achieve this bare minimum, disabled people must disclose their disability, obtain medical documentation, request accommodations, oversee their implementation, self-advocate for their needs, and manage stigma. As the next chapter will show, disabled people are forced to carry the weight of access alone.

Chapter 3: Access as Disabled People's Responsibility

I. Introduction

We have seen that accommodationist approaches in higher education generate several conceptual and practical issues. Although improvements to the system for accommodations would benefit (some) disabled people, accommodations are just this: temporary, individual arrangements that accommodate disability while leaving the ableist organization of society intact. There remains a central issue with how access is dominantly conceived that I have not addressed. This problem concerns how the responsibility for access is currently understood and distributed. Because the golden standard for access in society is minimal compliance with the law, nondisabled people and institutions must only give thought to accessibility when they are legally required to, and many only do so retroactively, after failures of compliance have been identified by disabled people. For nondisabled people and institutions, avoiding taking responsibility for access beyond the scope of what the law minimally requires is both common and uncontroversial.

In contrast, and as the necessary counterpart to this predicament, disabled people are the ones who must request access, advocate for their needs, and ensure that accessibility measures are maintained. Disabled people are reminded everywhere they go and in everything they do that "the burden of access is on [them]" (Ortiz 2019). As Piepzna-Samarasinha writes, "access is seen as personal responsibility that crips are supposed to handle on our own and not bother other folks with" (Piepzna-Samarasinha 2020). Moreover, because legal accessibility standards guarantee only a bare minimum of access in society, their implementation frequently result in access provisions that are experienced by disabled people as restricted, lacking, and unreliable. The many disruptions to disabled people's lives and everyday activities occasioned by deficient access and persistent inaccessibility are simply normalized as the price to pay for

being included. At the end of the day, the responsibility for access falls in the lap of disabled people, who are left carrying "the weight of access" (Mingus 2012) alone.

This chapter and the next function as companion chapters, with each chapter addressing a different side of the same coin. These chapters examine how access responsibilities are conceived, assigned, and avoided in contemporary societies. While Chapter 4 will focus on some ways in which privileged actors avoid taking responsibility for access, this chapter investigates what happens when disabled people are expected to assume responsibility for access everywhere they go. I demonstrate that the individualization of the responsibility for access in society results in invisible costs and burdens for disabled people living in ableist societies. Far from materializing spontaneously, access requires consistent efforts on the part of disabled people. Its successful actualization is never guaranteed. As I will show, navigating access as a disabled person involves not only financial costs and administrative burdens but also bodily burdens of awareness, relational burdens, burdens of self-advocacy, emotional costs, costs to belonging, and costs of time, attention, and energy.

Key to my work in this chapter and the next is the idea that the distribution of some responsibilities in our societies both exploits and reinforces existing social inequalities based on ability, race, gender, class, size, and nationality. There is much to be learned about a social order by examining its responsibility arrangements. As Margaret Urban Walker argues, "following the trail of responsibilities" (Walker 1998, 14) is an effective strategy for identifying "what is valued and who is who" (1998, 14) in relationships and societies structured by hierarchies of race, class, gender, sexuality, ability, and nationality. In the current landscape, some people are burdened with socially devalued responsibilities, while others walk away from the responsibility assignment game largely unscathed, assuming access responsibilities only when doing so is convenient or beneficial to them. While some people "bear the costs" (Walker

2008, 7) of dominant responsibility arrangements, others "[reap] their benefits" (7) through sanctioned forms of irresponsibility and avoidance. In actual, rather than ideal, societies, responsibility arrangements that unfairly benefit some people and groups at the expense of others are the rule, rather than the exception.

Gaining a better understanding of how access responsibilities are conceived, assumed, and avoided does not yet tell us who should be held responsible for what and why. The following chapters do not outline the responsibilities of individuals, institutions, and societies. I reserve this discussion for later work and focus, instead, on the preliminary task of making apparent the effects of the current distribution of access responsibilities on the lives of disabled people (Chapter 3) and identifying how strategies of avoidance adopted by privileged agents allow them to evade access responsibilities (Chapter 4). My goal is to develop a richly textured, socially situated, empirically informed analysis of existing responsibility arrangements and consider what they can tell us about dominant understandings of access and disability in society. This should not be taken to imply that these chapters offer no normative insights. Thick descriptions of the everyday experiences of actual people, especially when these experiences are both ignored and invalidated by the societies they live in, yield crucial insights for determining whether existing responsibility arrangements are just and sustainable for the people involved in them, or whether they are valuable at all. I view my analysis of access responsibilities as what Walker calls an "exercise in transparency" (2002, 182). The aim of this type of exercise is "to check if things are as we think, if they are good in ways we think, \[and \] if there are ways they could be better" (216). This kind of exercise invites us to ask ourselves (and to ask each other) the following questions: What effects do our responsibility arrangements really produce? Who is called on to play what role(s) within them, and on what basis? Do these arrangements reflect our values and priorities as societies? Lastly, could they be better and how

might we go about transforming them? On this fertile ground, we can begin the essential work of transforming existing practices of responsibility around access.

II. Making Invisible Costs and Burdens Apparent

While attributions of responsibility are typically regarded as "good and unproblematic" (Gilson 2022, 424), the work of feminist scholars in recent decades reveals how the allocation of responsibilities in our societies can be wielded to perpetuate inequalities (Ciurria 2020; Gilson 2022; Tronto 2013; Walker 2008; Young 2004). Responsibility arrangements that are made to appear "normal" and "natural" can both produce and reinforce forms of domination, exclusion, oppression, and coercion. These arrangements are made to appear perfectly legitimate, even as they leave some groups and individuals to assume costs and burdens that others manage to steer clear of. To understand how some groups and individuals avoid responsibilities assumed by others, we must consider the kinds of stories we tell about responsibility. In her work on responsibility for sexual injustice, Erinn Gilson (2022) argues that practical failures of responsibility in our everyday lives are bolstered by conceptual failures. While practical failures pertain to how responsibilities are enacted in the world, conceptual failures are inherent to the narratives we employ to make sense of ourselves and of others as responsible beings.

Addressing practical failures of responsibility goes hand in hand with addressing narratives about responsibility.

This connection between narratives and practices of responsibility can be studied through the example of care. Care is treated as something that comes naturally to some people but not others, rather than as a skill or disposition that can be cultivated. Narratives according to which women are naturally better at caring are employed to justify the uneven distribution of caring responsibilities in our societies and legitimate women's continued exploitation under

cisheteropatriarchy. Mountains of evidence show that women (and femme-identified persons, more generally) are disproportionately entrusted with responsibilities for care in their families, relationships, communities, and workplaces. Women provide the majority of formal and informal care to family and kin (e.g., spouses, parents, parents-in-law, friends, elders, neighbors) and account for roughly two-thirds of the global health and social care workforce, earning on average 24% less than their male colleagues in these sectors (Boniol et al. 2019; Mahase 2022). Despite being central to the functioning of our societies, care work is poorly paid and undervalued. Among several other consequences, the uneven distribution of caring responsibilities limits women's social mobility and widens racial and gender inequities in health outcomes (Seedat and Rondon 2021; European Institute for Gender Equality 2024; Lu 2022). Caring is something women—and especially Black women, women of color, and poor immigrant women—are expected to do out of love and generosity, irrespective of the costs and burdens it imposes on them. For this reason, many of these costs and burdens remain invisible.

Much like care, access is treated as something for which only some people are responsible. Although it is central to ensuring human flourishing, access is framed as an individual responsibility to be assumed by disabled people. The implicit assumption shaping this approach to access is that the people who "need" access should be held responsible for it. Meanwhile, those who do not "need" access (i.e., nondisabled people) need not concern themselves with questions of accessibility. While the effects of the gendered distribution of caring responsibilities are well documented, the consequences for disabled people of carrying the weight of access everywhere they go are less familiar. In their everyday lives, disabled people must request, manage, negotiate, and maintain access by deploying a wide range of efforts and satisfying strict requirements. Because access is never guaranteed and is always under threat in ableist societies, these efforts must be repeated, and disabled people's eligibility

for access is constantly re-assessed. Many disabled people describe the process of navigating access as a full-time job they must perform in parallel with their daily tasks and activities. Navigating access as a disabled person can involve doing things like writing emails, making phone calls, filling out paperwork, figuring out eligibility criteria, getting tested, calculating costs, booking appointments, doing research, scheduling appointments and follow-ups, gathering medical records, booking transportation, asking and answering questions, fundraising, waiting, tinkering, negotiating, self-accommodating, advocating for oneself, educating others, fighting ableism, managing feelings (other people's and one's own), and cultivating relationships. Unexpected challenges arise around every corner.

The individualization of the responsibility for access results in significant costs and burdens for disabled people that are largely ignored in contemporary society. The hidden costs of navigating access—and life with a disability, more generally—have earned the name of the disability tax (or #DisabilityTax) in disabled communities (Andrews 2023; Konish 2023; Palmer 2023). These added costs can include expenses associated with grocery delivery services, personal care assistants, air purifiers, vet care for service animals, flight tickets without layovers, home modifications, special diets, and accessible housing and transportation. Disabled people must also often pay out of pocket for assistive technologies, devices, accommodations, medication, and services they need to survive. The fact that these additional expenses are seen as disabled people's individual responsibility exacerbates the interactive nature of the relationship between disability and poverty. People living in poverty are more likely to develop chronic health conditions and disabilities, and many disabled people live in poverty due to systemic barriers to employment, limited educational opportunities, barriers to wealth accumulation, and inadequate social supports (Axel-Lute 2023; Goodman et al. 2017; Ives-Rublee and Sloane 2021).

Navigating access also involves significant administrative burdens for disabled people. Elizabeth F. Emens (2021) coins the term "disability admin" to describe the multiple layers of administrative work disabled people must perform to secure basic access. For instance, disabled people face multiple layers of administrative burdens when applying for social benefits, dealing with insurance companies, and requesting accommodations in the workplace. Administrative burdens routinely prevent disabled people from obtaining forms of assistance they qualify for and limit their social and economic mobility. Again, these burdens are assumed by disabled people alone rather than being shifted on (or, at the very least, shared with) more powerful actors like governments, employers, and institutions. These costs and burdens are differentially distributed according to intersectional factors such as race, gender, age, class, size, nationality, and citizenship status. The interactive effects of disability and poverty are exacerbated for Black and Indigenous disabled people and disabled people of color, given that they are more likely than white disabled people to live in poverty and to be unemployed due to systemic discrimination (National Disability Institute 2020). For instance, disabled people who lack privilege and resources are often unable to hire a lawyer and file a complaint for discrimination when their employer (or university) denies their right to accommodations. The costs of litigation deter many disabled people from seeking legal redress from discrimination. Multiply marginalized disabled people must assume the costs and burdens of navigating access in addition to negotiating other forms of structural injustice and discrimination that leave them with less time, energy, and social, cultural, and economic capital to invest in efforts to secure access.

The consequences for disabled people of carrying the weight of access everywhere they go are not typically apparent from the perspective of more privileged actors. In some cases, this is because they are actively and deliberately ignored or invalidated. In other cases, however, these costs and burdens are overlooked for the far more banal, but equally pernicious reason that many nondisabled people do not think about access unless (or until) they are compelled to do so, and most of them do not believe that access has anything to with them. Instead of being recognized as the product of ableist systems and practices we all play a role in reproducing, they are normalized as the price to pay for being included and the inevitable consequence of being disabled. There is, I believe, another reason that helps explain why the costs and burdens of navigating access are so widely ignored in society. Many nondisabled people assume that access is something that spontaneously materializes when they wave their magic wand and generously agree to help disabled people. Access is viewed as something disabled people passively receive, rather than as something they must actively work to secure, manage, protect, and, almost just as often, create for themselves and for other disabled people. In fact, access is primarily seen as a burden for the people or institutions who must provide it. When the provision of access imposes an "undue burden" on providers, disabled people's accommodation requests are no longer perceived as "reasonable." In this picture, disabled people are "needers" and "takers" that force other members of society to spend money, make sacrifices, and deploy additional efforts to meet their needs. This conception of access is rooted in and reinforces the ableist perception of disabled people as lazy, idle, and passive recipients of care and benefits. The challenges of navigating access for disabled people are rendered invisible by our society's treatment of access as a form of charity or goodwill rather than as something disabled people are owed by right.

In reality, of course, access does not spontaneously materialize or fall in disabled people's laps. Access is neither easy to achieve nor magical, or at least not in the way nondisabled people often imagine it to be. The many financial costs and administrative burdens associated with navigating accessibility as a disabled person confirm this (Dawson 2019;

Goodman et al. 2020; Litchtman 2023; Schweitzer et al. 2022). While these costs and burdens are increasingly well documented, several others remain largely unexamined within disability scholarship. I explore some of them in the following sections of this chapter. As I will show, the burdens assumed by disabled people in a society that holds them individually responsible for access also include bodily burdens of assessment and self-awareness, the management of spatial and temporal disruptions, careful planning around one's interactions with the world and with other people, and calculations and compromises within relationships with friends, family, employers, coworkers, professors, doctors, and complete strangers. In addition to financial costs, the process of navigating access involves emotional costs as well as costs of time, attention, and energy. The more resources disabled people must dedicate to ensuring their own participation in the world, the less of these resources they have remaining for themselves and their relationships, communities, projects, and futures. The considerable toll that navigating access takes on disabled people's well-being, comfort, and relationships is a direct product of the individualization of the responsibility for access in our societies.

III. Bodily Burdens of Awareness and Costs to Belonging

In an article titled "How We Use Our Bodies to Navigate a Pandemic," journalist Gia Kourlas suggests that the COVID-19 pandemic has forced all of us to pay close attention to our bodies in space. Social distancing requirements have created "a new way of moving, a new way of dancing in the streets" (2020) marked by a heightened sense of awareness of our own bodies and immediate spatial environment. Kourlas' claims in this essay echo those of many others who argue that the pandemic robbed us of our most intimate experience of space as a supportive milieu in which we are unthinkingly submerged. These and similar accounts of the disruptive effects of the pandemic assume that our everyday relationship to spatial

environments is generally fluid and harmonious. They assume a body that is at ease with itself and in the world, unencumbered by hindrances and surrounded by affordances that allow it to realize its project.

Against this claim to universality, scholars of race, gender, and sexuality have produced extensive analyses of the heightened forms of awareness members of socially marginalized groups must develop to move through the world. For instance, scholars of race have argued that Black people's embodied experiences under white supremacy are weighed down by the constant threat of racial profiling and racist violence. Helen Ngo argues that the everyday work of dealing with racism includes many kinds of "micro-level bodily adjustments" that operate "on the materiality of the body itself" (Ngo 2019, 59). In racist societies, Black people and people of color people must carefully monitor and adjust their gait, posture, gestures, and facial expressions, at times pulling down a hoodie when walking down a dark street at night, at others avoiding reaching for their wallet in an interaction with a police officer, maintaining physical distance from white people, or lowering their voice in public. These types of "gestural, postural, and behavioral strategies" (57) are both necessary and burdensome. At the same time as they allow Black people and people of color to manage racism, these forms of adjustment require considerable, near-constant efforts that overload the body with stress. Embodied habits cultivated in oppressive contexts are onerous for the people who acquire them as a matter of survival and involve levels of vigilance that are physically, mentally, and emotionally taxing. Many disabled people are intimately familiar with the experience of having to adjust and adapt their behavior to move through a world designed for nondisabled bodies and minds. Due to persistent inaccessibility, they must remain closely attentive to features of their bodies and of their environment that remain unexplicit within the experiences of persons with dominant social identities and embodiments. This includes, for instance, noticing weather conditions, the

height of sinks in a bathroom, a crumbled sidewalk, scents people are wearing, the number of exits in a densely packed room, the sloping of a street, or the availability of audible traffic lights at an intersection. Collecting this information in real time is essential for identifying accessibility features of the built environment and compensating for their shortcomings.

Even in purportedly "accessible" environments, disabled people often face considerable challenges completing basic tasks. Mazurik et al.'s (2014; see also Poldma et al. 2014) study of disabled people's experiences navigating a large shopping mall in Canada illustrates the burdensome nature of spatial navigation for these visitors. While participants with low vision appreciate being able to enter the mall through an adjacent subway station, they struggle, once inside, to decode the mall's signage due to poor lighting, low color-contrasts, and illegible fonts. For wheelchair users, the route from the subway station to the mall is fully inaccessible. To access the mall, they must exit the subway station and re-enter the building through an entrance off the street. Their route is regularly slowed down by crowded sidewalks, inattentive pedestrians, poor weather conditions, and the lack of a wheelchair-accessible ramp outside the mall. Some areas of the mall are marked as off-limits altogether, while the viability of others must be evaluated on a case-by-case basis. A motorized wheelchair user interviewed in an alternate study describes how using her wheelchair in urban environments calls for special vigilance. To assess her surroundings, she relies on her proprioceptive sense of her own extended embodiment as a wheelchair user, a sense sharpened by the familiar experience of maneuvering a mobility device in environments primarily designed for ambulatory pedestrians. She describes her "constant assessment of whether spaces are wide enough for her chair, whether alternatives to the troublesome cobblestones justify the risk, \[\text{and} \] whether the tram rails will mean that she will not be able to cross the street before the light changes" (Lid and Solvang 2016, 181). When a street "slopes upwards on each side toward the middle," (186) she

must inch her wheelchair closer to the street center to avoid being caught off balance and "sitting lopsided in the chair" (186). To maneuver her wheelchair through uneven street surfaces and narrow pathways, she remains on high alert. In these examples, disabled people's attention is absorbed by the requirements of spatial navigation.

Accessibility is not only a matter of participation, but also a matter of safety. What happens, for instance, when the audible signals at a road crossing have not worked for months, when a parked car blocks the sidewalk on a busy street, when the only available elevator is a freight elevator intended for cargo rather than human bodies, or when the only gender-neutral bathroom stall is inaccessible for trans and nonbinary disabled people? Disabled people must take it upon themselves to ensure their own safety by adapting their use of spaces, at times compromising their desires and comfort to avoid or limit potential threats. In their study of disabled people's experiences navigating risk and ableist hostility in their everyday lives, Claire Edwards and Nicola Maxwell offer the notion of "safety work" to describe a kind of work that involves "developing routinised, planned, spatial practices as a way of negotiating feelings of un/safety" (Edwards and Maxwell 2023, 164). For the interviewed participants, this work includes not going out at night to avoid unwanted sexual attention, remaining as inconspicuous as possible in public to avoid intrusive questions, prioritizing familiar routes, avoiding routes that are difficult to navigate, and storing detailed information about the configuration of spaces for future reference. While these strategies allow disabled people to address "the emergent, fluid, and often unexpected nature of un/safety" (171), the fact that they must be developed at all is a reminder that disabled people's daily experiences of mobility are impacted by ableism and systemic inaccessibility. Safety work is also a common fixture in the everyday experiences of people living with environmental illnesses and multiple chemical sensitivity (MCS). Mel Chen's meditation on their embodied experience of space as a person living with MCS offers

insights into the kinds of bodily adjustments that make public outings possible: "I must follow the moment-to-moment changes in quality of air to inhale something that won't hurt me, turning toward a thing or away from it correspondingly [...]. I am perpetually itinerant, even when I have a goal; it means I will never walk in a straight line" (Chen 2012, 202). For Chen, the straight lines of "efficiency" (2012, 202) are replaced by a taxing feeling of perpetual itinerance. The bodily burdens of accessibility include having to take responsibility preemptively and proactively for ensuring one's safety in inaccessible landscapes.

Alongside these types of micro-adjustments, disabled people must manage the spatial disruptions generated by deficient access. As a result of compliance-based approaches, disabled people are often offered only the bare minimum of access in society. For instance, a university building might have one accessible elevator, one accessible bathroom stall, and one computer with captioning software. In this context, isolated access failures can have a broadly immobilizing effect. Hollis Peirce's (2019) autoethnography of his experience as a disabled student at Carleton University in Canada offers many examples of this. When attempting to conduct an unofficial accessibility audit at his university, Peirce noticed he could not access the campus library to evaluate its accessibility features. At the time, the ramp outside the library's main entrance was impracticable due to weather conditions. Meanwhile, the sole elevator connected to the library was under repair. As a result, Peirce had no way of accessing the library. Peirce observes that this type of failure "demonstrates how dependent [he] is on very specific locations throughout Carleton's campus" (Peirce 2019, 58). The issue, of course, is not that Peirce depends on features of his environment to accomplish daily tasks. Rather, the problem is that the supports on which Peirce depends are deficient, restricted, and unreliable. Peirce offers the notion of "choke points" to designate infrastructure or amenities that function as "the sole points of access to a part of campus" (2019, 58). The choke points identified by

Peirce include an elevator that once damaged his chair by repeatedly slamming shut against it, as well as an elevator in which he can neither press the floor buttons with his hands nor with his wheelchair tray. Choke points like these are "everywhere on campus" (62), both in older buildings and in "brand-new" (62) buildings and facilities. If (or rather, when) choke points break down, entire areas of campus become off limits. Disabled people are reminded that accessibility is their responsibility every time their lives are disrupted by these failures. They are the ones who must adjust their movements, restrict their activities, and recalibrate their plans. At the end of the day, they are the ones who must change the course of their day and, at times, of their lives, to make up for inadequate access provisions.

In many cases, accessibility failures are not slight inconveniences that can be quickly resolved at no cost to disabled people. In addition to limiting disabled people's spatial agency, failures of access can compromise their physical safety and generate feelings of embarrassment, frustration, and discouragement. Peirce recounts a day when an elevator on campus broke down while he was riding it on his way to a film studies course. Stuck in the elevator, he had to be "physically carried out, once someone could be found to help [him]" (58). Peirce ultimately dropped his film studies course "because of the undependability of the only elevator in the building" (58). This scene is troubling to imagine, as is the decision Peirce had to make to drop the course he was enrolled in. We can speculate that Peirce preferred the option of dropping the course to one that would have involved extended negotiations with faculty and university administrators. The burden of navigating these interactions would have been additionally disruptive to his life as a student. Even if it involved neglecting his academic interests, dropping the course might have seemed to him like the best way to maintain an agreeable and non-confrontational relationship with the institution and with professors. From the perspective of outsiders who were unaware of this incident, Peirce merely switched out one course for

another. His reasons for doing so and the work involved in changing courses mid-semester both went unnoticed. The Twitter thread #WhyDisabledPeopleDropOut gathers many more personal anecdotes from disabled people who dropped out of academic programs and courses due to issues of accessibility. Christine Marshall, the queer deaf activist who started this thread, explains that while dropping out of a course due to restricted access might seem like an extreme solution, it is "logical when simply getting to class can be physically harmful" (2020). Experiences of being carried out of a broken elevator by one's nondisabled peers, of not being able to use the restroom during an exam because there are no accessible stalls, of being stared at for using a mobility scooter and struggling to make it through narrow hallways, explain why so many disabled people drop out. Inaccessible environments are not just inaccessible, they are hostile to disabled people's bodies and minds. In many cases, disabled people do not have the possibility to avoid engaging with inaccessible environments. Boarding an inaccessible bus or riding an unsafe ramp can both result in serious bodily injury for wheelchair and scooter users, but doing so might be necessary to get to a doctor's appointment, commute to work, use the restroom, or pick up their children from school. Disabled people must assume risks to their personal safety and push their bodies and minds to their limits simply to perform tasks that are completed every day by nondisabled people at no cost to them.

Finally, managing the responsibility for access can come at the cost of enjoying physical proximity with other people. Because accessibility is treated as an individual responsibility, disabled people must routinely make their own "special" arrangements everywhere they go. Conferences, meetings, retreats, celebrations, and informal get-togethers are often planned with little concern for booking accessible venues and offering accessible transportation.

Disabled people must adapt to the limited forms of accessibility on offer and, in many cases, take on the work of identifying more accessible alternatives that will allow them to participate

in social activities. Doing so might involve staying in a hotel halfway across town, being the only person to attend a work retreat remotely, skipping talks in poorly ventilated conference rooms, using a different entrance or elevator than everyone else, or paying for a cab instead of boarding the free but inaccessible shuttle at the airport. Elisabet Apelmo and Camilla Nordgren, two disabled academics, recall having to find their own hotel when attending an academic conference because the hotel recommended to conference participants was inaccessible for them. Staying in a different hotel "involved missing social interactions, opportunities for meeting acquaintances, brainstorming with colleagues, benchmarking and collaborations for future projects" (Apelmo and Nordgren 2021, 112). Instead of functioning as hubs of connection, conference spaces like this one can become sites of unnoticed exclusion. For every disabled person that manages to attend the conference, retreat, meeting, or get-together, there are many more who do not attend because they cannot once again carry the weight of access alone. When disabled people do not make it to an event or social gathering, the need for access disappears along with their presence. Nondisabled people are unlikely to consider the reasons why disabled people did not (indeed, could not) show up.

Although the bodily burdens of navigating access are often inapparent to outsiders, they are not insignificant. Rather, they infiltrate every aspect of disabled people's interactions with their environment and hinder their ability to engage fluidly with the world and with other people. These burdens are detrimental to disabled people's mental and physical health, but they are also existentially damaging. The repeated experience of being made acutely aware of one's embodiment when navigating one's surroundings, of not finding one's mode of embodiment reflected in how the world is organized, and of routinely confronting obstacles can distort (or even prevent the formation of) a person's sense of belonging in the world. Practices of spatial exclusion and marginalization are not always overt or explicit. There are many subtle ways to

convey to some people that they are unwelcome and undesired in a space and to encourage others to claim ownership of it. Every time accessibility is not made a priority and is relegated to being an afterthought, disabled people pay the price. They must individually manage the responsibility for access by shouldering burdens of awareness, attention, adjustment, and vigilance that remind them they do not fully belong.

IV. Temporal Burdens and The Costs of Asynchrony

I have foregrounded thus far the spatial dimensions of disabled people's experiences of navigating access, but these cannot be separated from temporal ones. To put it simply, navigating access takes time. Disabled people must carefully plan their interactions with the world to account for access and lack thereof. This type of planning can involve scheduling transportation far in advance, making inquiries and phone calls, contending with delays, waiting for answers, and recovering from ableist interactions and experiences of inaccessibility. Despite disabled people's best efforts to predict potential obstacles, unexpected accessibility failures and disruptions can slow everything down. A trip to the grocery store that should have taken less than an hour might end up taking the whole afternoon because the accessible van showed up late or did not show up at all. At the airport, a disabled person might miss their connecting flight because their wheelchair was misplaced and lost, or because it was mishandled and is now missing a peg. The many temporal setbacks occasioned by accessibility issues typically end up costing disabled people. In their everyday lives, disabled people must pay the price for falling out of sync with dominant temporal expectations.

To get a sense of the temporal burdens involved in managing access, consider the following fictional scenario offered by Desiree Valentine (2020). A disabled person is invited by a friend to a concert. In their invitation, this friend enthusiastically shares that the venue is

accessible. Rather than simply buy a ticket and go on with her day, the disabled concertgoer initiates a series of steps aimed at confirming whether the venue is, in fact, accessible. For this fictional attendee, the process of preparing to attend the concert begins long before she picks out her outfit and orders a ride share on the evening in question. From the outset, her orientation to the concert is anticipatory. While her friends' sense of anticipation is affectively textured by excitement, hers is tinged with worry. Will she be able to join them, this time, or will inaccessibility hold her back once again? Although her friend tells her that she should be able to attend the concert, she knows better than to assume that the venue will be accessible without verifying this information herself. She begins by looking up the event page on social media to locate accessibility information. Finding only shreds of information, she contacts the organizers to fill in the blanks. For example, she might ask them if there will be a scent policy, whether this is a standing event, or if flashing lights will be used. Perhaps she also uses a web mapping platform to study the building's entrances and exits, calculate the distance between the concert venue and the nearest subway station, and check if there are any accessible parking spots on the street nearby. Finally, she checks her calendar to consider whether her schedule on the day after the concert will allow for recovery time. She knows she will need time to rest before resuming work the next day if she is exposed to harsh chemicals, forced to stand on her feet for several hours, or experiencing high anxiety due to overstimulation. A few days after emailing the organizers, she receives answers to her questions. At this point, all details have been ironed out. She informs her friends that she will be attending the concert with them. This story ends on a high note: the disabled concertgoer attends the concert with her friends, and it appears her "access needs were 'met" (77). But the how of how accessibility is achieved matters greatly to this story. To confirm that the event would be accessible, the disabled attendee had to engage in a series of inquiries and inspections. She carried out this work on her own time by

asking questions, conducting research, and sharing personal information about herself with strangers. Neither the nondisabled friends who invited her nor the organizers who failed to include clear accessibility guidelines on the event page shared this burden with her by taking on a more active role in the creation of meaningful access.

In this fictional story, issues of accessibility are resolved within a few days. It often takes disabled people much longer to obtain basic access. The process of securing accommodations, for instance, is often tediously slow. In academic settings, for instance, disabled people must dedicate significant amounts of time to the task of obtaining accommodations and justifying their needs to professors, colleagues, doctors, and university administrators. The work of the Disabled Faculty Study, an eight-year project investigating the experiences of disabled faculty members, illustrates the effects of temporal delays on disabled people's ability to survive academic settings (Price 2021; S. Kerschbaum et al. 2017; Price et al. 2017). Margaret Price (2021) argues that "even when accommodations are granted fairly readily, they often cannot be used without investing huge chunks of time" (271). To illustrate this claim, Price offers the example of Teresa Blankmeyer Burke's efforts to secure ASL interpreters for talks she was invited to give at two different schools. At the first school, interpreters were secured quickly after a brief email exchange. When it came to the second university, Burke had to exchange close to 200 emails with organizers on-site before finally receiving confirmation that interpreters had been hired for her presentation. Disabled faculty members must handle these kinds of protracted negotiations at the same time as they are expected to teach, publish, supervise students, and take on an active role in their departments. Studies show that disabled students must also invest significant amounts of time in seeking accommodations, justifying their needs, reminding others about their accommodations, and requesting their enforcement. The disabled students interviewed by Sarah Holloway (2001)

report that these efforts must "be repeated over and over again [...] every exam cycle, [or] every time they [require] access to a building" (2001, 601). A participant whose accommodations include additional time to complete written examinations remarks that she also needs additional time to set up her accommodations: "It's time again and extra time, in exams I have to go round people and ask to make sure I've got the extra time organized" (602). It takes additional time to obtain additional time, a dizzying realization that exposes some of the contradictions at the heart of the system for accommodations.

Because navigating access is seen as disabled people's responsibility, disabled people must manage the delays and setbacks caused by inaccessibility. Students who turn in assignments late because they are still waiting for the talk-to-text software they were promised by their department months ago or who miss class because of health issues triggered by mold in their university dorms are held individually responsible for falling out of synch with the progress their nondisabled colleagues are making. They are told they are "making up excuses" when they bring up inaccessibility to explain their behavior. Lateness is considered especially unprofessional in institutional settings. Chronically late coworkers, students, and teachers are perceived as lazy, negligent, and irresponsible. At Apelmo and Nordgren's institution, disabled people fought for months to request that the university designate accessible parking spots in proximity to university buildings. At the time of these protests, most of the university's parking lots did include accessible parking spots, despite there being disabled students, professors, staff members, and visitors who need them. After much back and forth, the university agreed to designate some accessible parking spots, but denied disabled people's requests that each parking lot include at least three of them, arguing instead that "regulations [required] only one spot" (2021, 111). The university lots now include some accessible parking spots, but they are regularly obstructed by containers and have restrictive time limits that

prevent their users from parking their car for the entire workday. The authors explain that because the number of accessible parking spots is so limited, disabled people must "go to work much earlier in the morning and [account] for having to drive around in search for a spot" (112). Disabled drivers must plan their commute to campus to account for the possibility that no spots will be available and that they will need to park in a more remote location. They must be certain to build in enough time in their schedule for these contingencies because being late is "[their] problem" and both "students and colleagues expect [them] to be on time for lectures and meetings" (112). This expectation may very well be unrealistic given the university's lack of concern with ensuring accessibility, but that, too, is disabled people's problem.

Earlier in this chapter, I described how disabled people develop strategies to evaluate risks and orientate themselves in shifting landscapes of accessibility. While a large part of this work unfolds in real-time, many disabled people also make use of careful planning to identify obstacles they might face in the world. Without careful planning, some things are bound to go awry. As one disabled person interviewed by Smith et al. puts it, disabled people are constantly forced to think "three steps ahead" (2021, 4). He describes how every step of the journey must be thought out, from the moment he leaves his house to head to the cinema until he makes it safely back home at the end of the evening. Memorizing familiar routes, performing accompanied practices of new routes with friends or family, downloading mobile apps that track the real-time progression of trains and buses, and learning to problem-solve quickly in the face of obstacles are all tried-and-tested strategies for moving through the world with a little more ease as a disabled person. However, even the strategies have their limitations, and many challenges simply cannot be anticipated or avoided. Busses that do not stop for disabled people, bureaucratic delays when renewing disability identification, malfunctioning applications, equipment malfunctions, outdated information about roadwork and detours, and dehumanizing

interactions with drivers can all bring disabled people's journey to an abrupt halt. The burdensome nature of these disruptions intersects with forms of oppression and privilege that can either mitigate or exacerbate them. For instance, commuting is especially burdensome for disabled people who do not have the disposable income to afford taking the occasional cab or driving a car and who must instead ride several inaccessible buses and trains to get anywhere.

While many of our daily activities benefit from some level of planning, several others are deeply satisfying precisely because they recruit our capacities for spontaneous exploration. Our embodied experience of the world is made richer by the possibility of improvisation. Far from being limited to the domain of artistic expression, improvisation plays a key role in human activities like walking, speaking, cooking, exercising, dressing ourselves, and exploring our sexuality. We might say that finding a balance between repetition and novelty is what makes our lives feel both existentially secure and exciting. Experiences of unscripted play and exploration are beneficial to us far beyond childhood. Think, for instance, of the pleasure people might experience when deciding on a whim to go dancing with friends, exploring a city on vacation, trying out a new hiking trail and discovering its rhythms and slopes, or even just sitting at a different table to people watch at your favorite coffee shop. While seemingly banal, these examples all capture something essential about how we experience and express our spatial and temporal agency as human beings. The requirement to meticulously plan the simplest of daily activities to account for access limits disabled people's agency and dims possibilities for more improvised forms of exploration.

A disabled person interviewed by Lid and Solvang explains that over the years, she has significantly reduced the "frequency of spontaneous trips [she makes] to unfamiliar parts of the city" (Lid and Solvang 2016, 187). She notes: "I seldom do anything unexpected. [...] I get tired of being unsafe and insecure—it is demanding both mentally and physically" (187). A

participant in the same study describes how his relationship with the city has changed since becoming disabled. The more uncontrived relationship he formerly had with his surroundings when going on walks through the city has been replaced with a task-oriented focus that leaves no room for aimless exploration: "I cannot be a flâneur and just stroll around [...]. Today I always have a specific thing to do and then come straight home again" (188). Having to account for access in everything one does is burdensome. As these examples illustrate, many disabled people ultimately choose (or rather, are forced to) limit their activities or adopt a more utilitarian relationship to them, for instance by always coming straight home after running errands or by missing out on spontaneous gatherings with friends and colleagues. Without framing spontaneity and improvisation as uncontested goods, we can recognize the burdensome nature of having to plan, anticipate, and choreograph one's everyday activities far in advance. The additional time, energy, and resources that navigating accessibility requires make it incredibly challenging, and sometimes even impossible, to cultivate relationships with other people and participate with them in social activities.

Accessible transportation must typically be booked several days in advance and frequently results in unreliable and restricted access. Consider, for instance, Samantha Walsh's firsthand account of her experiences navigating the transportation services offered by the Toronto Transit Commission (TTC) in Ontario, Canada. During her recovery from a spinal cord injury, Walsh became a frequent user of the TTC's accessible transit service Wheel-Trans, which offers door-to-door transit services for disabled riders. These services are intended to make up for the broad inaccessibility of regular TTC services. Wheel-Trans services must be booked by users via computer or telephone a few days in advance of pickup and involve strict late cancellation policies and penalties for late arrivals. The company's no-show policy states that drivers are "expected to wait no more than five minutes before [...] giving up on the ride"

(69) and leaving the premises. Eligibility for Wheel-Trans services is also closely monitored. Potential customers must travel to a designated facility (on their own, of course) to attend an in-person assessment, a requirement for which no exceptions can be made. In 2007, a report on the use of video surveillance in TTC vehicles found that video footage of disabled riders was being used against their knowledge to reassess and, in many cases, challenge their eligibility for Wheel-Trans services. The TTC has since been mandated to make their use explicit, but cameras remain in place today.

Walsh explains that getting used to the requirement to pre-book Wheel-Trans services well in advance of her travels was a challenge. She writes: "The first time I ever booked Wheel-Trans, I got up and had to be somewhere for noon, but the only times available for pick-up were 2:00 and 4:00pm. Because I couldn't get where I needed to go, I chose not to go anywhere" (76). Walsh would soon find out that inflexible pick-up and drop-off times were only the beginning of her worries. In the following months, she spent hundreds of hours either on Wheel-Trans commutes or planning for them by adjusting her work and life schedule, taking on "extra scheduling (shadow) work to function" (78). Although Wheel-Trans drivers are only required to wait five minutes for riders before leaving without them, "Wheel-Trans provides users with a window of time in which they will possibly pick [them] up and an estimated time of arrival that is not guaranteed" (79). Walsh's dealings with Wheel-Trans took a considerable toll on her ability to participate in social gatherings and networking events. She writes: "My 45-minute commute became two to three hours. I spent a lot of time waiting for Wheel-Trans if they were late, while also having to show up places very early if that was when a ride was available. \(\capprox...\) I was exhausted all the time, while not actually doing very much other than traveling" (76-77). As a result of using Wheel-Trans, her "world became very small" (77). It shrunk to the point of revolving almost entirely around planning, travel, and waiting.

On one occasion when her Wheel-Trans ride was very late, Walsh called a dispatcher to determine what was happening. The dispatcher Walsh spoke to was condescending and refused to let her know whether she had missed the bus, "[insisting that Walsh] wait an additional half-hour before disclosing the information she had at her disposal" (81). The dispatcher spoke over Walsh, dismissed her concerns, and eventually raised her voice at her. Following this incident, Walsh decided to file a complaint. She "waited on hold for almost an hour" (81) before speaking to someone who suggested she should have been "nicer" (81) with the initial dispatcher. Walsh was eventually transferred to a supervisor who mentioned that her concerns could be expressed by "[sitting] on an advisory committee that meets during the day" (81), when she usually works. Walsh writes: "I am always curious about why I, as a marginalized person, have to volunteer my time to explain why I should be able to access public transportation" (81). Taking the time to explain to other people the burdens of navigating access as a disabled person is one of the burdens involved in assuming the responsibility for access as a disabled person.

Consider, also, Emily Ladau's account of riding the New York subway as a wheelchair user. When Ladau arrived at Penn Station forty minutes before she had to get to a destination that was a ten-minute transit ride away, she knew from experience that she was still cutting it close. Looking back on this experience, Ladau writes: "Silly me, hoping that a system designed to exclude disabled people would actually come through," (Ladau 2021). At the station, the only alternative to an elevator that had not been functioning in months was a lift that had to be manually operated by an employee. Ladau scrambled to find someone to operate the lift, calling for an attendant multiple times before a janitor stepped in to help and found one for her. After some delay, Ladau finally boarded the train to her destination. When the subway doors opened on 59th Street, however, Ladau "was facing the biggest gap between the train and the platform

[she had] ever encountered on the subway" (2021). She knew that if she tried to get off the train, her "front wheels would get stuck and [she would] go flying" (2021). Two train conductors told her there was nothing they could do to help. Ladau was holding up the train and other passengers were staring. She was told she would need "to ride the subway to the next accessible stop, change platforms, and double back" (2021). The next accessible station, it turns out, was on 125th street, some sixty-six blocks away from where the train was now stopped. Ladau finally made it to her destination some forty-five minutes later, feeling deeply discouraged:

In the grand scheme of things, this was hardly the worst access issue I've encountered [...]. A heavy sense of defeat washed over me as I wondered how much time I've lost to inaccessibility. To the endless calls I've made asking if I can enter a business or use their restroom. To the attempted moments of joyful spontaneity, only to be turned away by stairs. To the roundabout journeys to back alley dumpsters that leave me feeling like human garbage, because that's the only accessible way to enter a building. To the seemingly endless waiting for access to the world around me, as though it's a privilege and not a basic right for all. (Ladau 2021)

Phenomenologists tell us that our orientation to the world is structured by a sense of futural anticipation. Our present is always pregnant with a sense of futural anticipation. This is evident in even the most banal examples. When we are observing the cover of a book, for instance, our perception of it is intentionally structured by the expectation that, as we turn the book over, its currently non-present back cover will appear. Our familiarity with books as a kind of three-dimensional object that has a front and back cover strengthens this expectation. Experiences of waiting also illustrate this clearly. When I wait, I am typically waiting for something. When this 'something' occurs (for instance, my friend walks through the front door of the café, or my bus rounds the corner in the distance), my expectation is fulfilled. I might experience a sense of relief or mere contentment. When the experience of waiting stretches beyond a certain point, however, waiting seemingly loses its transitive character. I am no longer absorbed in time's

passage, unthinkingly propelled toward a future I pre-reflexively anticipate. In such cases, I encounter the experience of waiting itself; I am merely waiting. This is the kind of waiting I imagine Ladau to be referring to when she describes the experience of waiting for access as "seemingly endless." It is a kind of waiting that does not lead to anything and is imposed on disabled people by ableist systems. Disabled people must continue waiting for access even when meaningful access never materializes. They are expected to remain patient, cooperative, optimistic, and understanding as they wait for a new lecture hall to be built, a budget to be adopted, a ride to show up, or a request to be approved. The time disabled people spend waiting for access is a reminder that neither their needs nor the quality of their lives are considered a priority.

How we spend our time and what time we have available to spend matters to the quality of our lives. Discourses of "work-life balance" emphasize the importance of protecting at least some portions of our time from the extractive logic of capitalism and its unrelenting demands for productivity. Scholars are increasingly attentive to the effects of the uneven distribution of temporal resources among different social groups and to the value of time as a social and political good (Goodin 2008; Kwok 2022). This work suggests that our ways of having and spending time have everything to do with our social location and relative privilege. Dominant temporal frameworks make it seem normal, natural, and unavoidable that some people have more time (for rest, leisure, entertainment, and relationship-building) while others must spend more time (finding work and working multiple jobs, getting places, advocating for their needs, planning their interactions with the world, and recovering from them). Time, perhaps, is not best described as a resource we accumulate (spent here, saved there) but rather as an index of where we stand (or sit) in the systems that govern our lives. The forms of temporal asynchrony that disabled people experience because of deficient access can be interpreted as instances of

crip time. Recall that crip time is a concept emerging from critical disability scholarship which captures the various ways disabled people experience time differently than able-bodied people. Crip time "bends the clock" (Kafer 2013, 27) of normate time to meet disabled rhythms of life and ways of being. In doing so, it rejects unbending and unrealistic temporal expectations and disrupts ableist ideals of normalcy and productivity. This conception of crip time centers temporal reconfigurations that are liberating, rather than alienating. But crip time can also involve the painful experience of being thrown into temporal disarray and finding oneself out of synch with others. Widespread barriers to accessibility in society do not only reinforce disabled people's spatial isolation and spatially segregate them. They also generate forms of asynchrony that make disabled people feel temporally disjointed and disconnected from the rest of the world.

V. Relational Burdens and Emotional Costs

Accessibility is often framed as an impersonal bureaucratic process, rather than as a deeply relational enterprise. In fact, relationships with other people and with institutions are central to the work involved in achieving access. Because access is framed as something that is offered to disabled people by nondisabled people and institutions, disabled people must cultivate (and preserve) harmonious relationships with these actors to secure and maintain accessibility provisions. I employ the notion of relational burdens in this section to describe the many expectations built into this requirement. Navigating access involves a series of relational compromises, sacrifices, and calculations, and it is emotionally costly for disabled people. To obtain access, disabled people learn to self-advocate by performing an agreeable version of themselves. They must learn to communicate their needs clearly and effectively, as well as deal with nondisabled people's defensiveness and discomfort around issues of access. Many disabled

people have faced ableist opposition and passive aggressive retaliation when requesting access. Even when they are faced with these kinds of reactions, disabled people are expected to regulate their emotions and silently endure the emotional violence of ableist hostility. While requests for access are sometimes well received, the costs involved are not always worth the potential outcomes. All too often, disabled people sacrifice their need for access to maintain relationships and protect themselves.

Because the responsibility for access is individualized, disabled people must bring up access (and, in many cases, create their own access) everywhere they go. Recall, for instance, how the fictional disabled concertgoer in Valentine's story had to share personal information about herself with strangers and inquire about access provisions to confirm that she could attend the concert with her friends. In addition to becoming experts in their own needs, disabled people must develop strong self-advocacy skills. The better disabled people get at advocating for themselves and describing their needs to others, the better chances they have of being granted basic access and surviving in the world. As I mentioned in Chapter 2, selfadvocacy is a cornerstone of the system for accommodations. While self-advocacy is often framed by ableist societies as a tool of emancipation, disabled people know all too well that selfadvocating for access is more often "mentally and emotionally exhausting" (Konrad 2021, 181) than it is freeing or empowering. When self-advocating, disabled people are routinely forced to endure intrusive questioning, tolerate nondisabled people's ableist prejudices, and respond to seemingly endless requests for justification. The requirement that disabled people learn to selfadvocate to overcome barriers to accessibility only serves to place the burden of access more firmly on their shoulders.

In healthcare settings, developing self-advocacy skills around access can be necessary for obtaining vital forms of care. Failures to provide culturally competent ASL interpreters, use

plain language, allow for flexible appointment times, and provide physically accessible medical equipment all adversely impact the quality of care disabled people receive and contribute to exacerbate the recorded health inequities between disabled and nondisabled people (Emerson et al. 2021; Horner-Johnson 2021; Mitra et al. 2022). Faced with these barriers, disabled people find themselves caught in a double bind. They must choose between two less-than-ideal options: advocate for access and "Trisk" being labeled as a 'problem patient'" (Pulrang 2022) or tolerate deficient access and compromise their safety, comfort, and dignity. Disabled patients might ask themselves variations of the following questions: Should I postpone this appointment until an interpreter is present or settle for understanding only half of what the doctor says? Should I request an accessible stretcher, or will this cause the staff to roll their eyes at me? If I ask too many questions about the layout of the examination room, will this nurse dismiss my concerns the next time I call? How should I address (in)accessibility and what will doing so cost me, both now and in the future? In many situations, as Andrew Pulrang writes, disabled people must choose between "life hacks or activism" (2022). While individual strategies of selfaccommodation can allow (some) disabled people to obtain the care they urgently need, putting up with a lack of access as a patient does not advance and, in fact, may significantly set back efforts to increase accessibility for other disabled patients in healthcare settings. Status symbols indicative of wealth, high levels of educational achievement, and legal literacy can also be leveraged by disabled patients with racial, class, and male privilege to put pressure on medical providers and institutions and ensure that accommodations are provided to them. For many other, less privileged disabled people, this type of status-based negotiation is not an option.

While efforts to appear cooperative and compliant in the face of inaccessibility can be temporarily effective for some disabled people, they are likely to be ineffective for patients whose social identities already mark them out as being ill-tempered and manipulative, as is the

case for Black patients and patients of color (Ashley 2014; Beagan et al. 2024), patients with personality disorders (Aves 2023), and patients who are substance users (Garpenhag and Dahlman 2021; van Boekel et al. 2013). Despite their best efforts to appear agreeable when requesting access, many disabled people are automatically perceived as antagonistic, aggressive, and overly demanding. Of course, disabled people whose legal right to accommodations has been violated have the option of filing a formal complaint. However, in addition to offering no certainties, formal complaint procedures require time, attention, energy, and resources that disabled people might not have. Making a formal complaint also leads to a person being perceived as a complainer. Complainers must often contend with the belief that people like them burden the system and bother other people by "fussing," "bitching," "nagging," and "whining" about largely imaginary problems. Instead of tarnishing the image of the people or institutions targeted by a complaint, complaints tend to besmirch the reputation of complainers.

These types of costly compromises and calculations are not exclusive to healthcare interactions. Disabled people must carefully determine when to advocate for their needs (or whether to advocate for them at all) in a variety of settings. In contexts where access is treated as "a reward for good behavior" (Mingus 2012), being seen as a "nice" or "good" disabled person—one who does not ask for or complain too much—functions as an essential survival strategy and can be necessary for preserving harmonious relationships with colleagues, employers, professors, family members, friends, and neighbors. To be perceived as "nice" and "good," disabled people must perform gratitude when receiving any type of access. The belief that "disabled people should just be grateful for whatever [they] get—whatever crumbs are thrown [their] way" (Mingus 2017a) is central to dominant approaches to access in society. The provision of academic accommodations, for instance, comes with a set of implicit

behavioral and affective requirements. Disabled students who receive accommodations must appear grateful regardless of whether these accommodations are adequate or sufficient. Dolmage remarks that students who are granted accommodations "have to feel and act fully accommodated at all times, even when they are not" (Dolmage 2017, 81). For instance, they may be expected to perform better, participate more in classroom discussions, and even smile more or be chattier. They must "perform the role of gracious, thankful subject" (81) and certainly not ask for more than what they have already received. Performing a "friendly disabled self" (Konrad 2021, 187) is both a requirement for obtaining access and the expected outcome of receiving any kind of access whatsoever.

In addition to advocating for their needs and performing a 'friendly disabled self', disabled people are often required to educate nondisabled people about accessibility. While sharing access knowledge is crucial for involving more people in the work of creating access, the work of educating nondisabled people and getting them involved in access involves multiple challenges and comes at cost for disabled people. In an essay titled "Why I No Longer Provide Free Disability Access Advice," Naomi Ortiz (2019) recalls the hundreds of hours they have spent helping nondisabled people make their spaces more accessible. Over the years, Ortiz provided "free labor and advice" (2019) to museums, restaurants, cultural groups, institutions, and art collectives. While accessibility measures are sometimes temporarily implemented, things just often "go back to the way they were" (2019) as soon as Ortiz is out of the picture. Disabled people are expected to continue educating nondisabled people (doing so over and over and over) even when the recommendations they make do not lead to lasting, systemic changes. Ortiz further explains that while nondisabled people typically start out feeling enthusiastic and claiming they want to learn, many of them change their minds and shift attitudes when they realize what needs to be accomplished. They may be on board with access in theory but be

reluctant to embrace the changes it requires in practice. Nondisabled people and institutions can also claim that they care about access and want to learn but still expect disabled people to do most of the work (or take the figurative first steps). Disabled people are typically the ones who must assume the emotional costs involved in actively addressing what others are willing to passively ignore. Disabled people know all too well that, in most cases, nothing will change if they do not call attention to inaccessibility. Theri Pickens compellingly describes the costs of always being the person who must bring up the question of accessibility: "Naming it when it's not outrightly named as such or calling attention to it when it appears that it's sort of floating there and no one wants to deal with it is – it's costly. It's expensive. It's emotionally expensive" (Brilmyer 2022, 141). It is emotionally costly to realize that everyone around you knows something must be done but that no one is doing anything because they are waiting for you, a disabled person, to take the lead. If you do not outrightly name issues of access or call attention to them, nothing will happen. It is taxing to always be the only person in your friend group, workplace, family, sports team, neighborhood association, or community that brings up access. Ethan, a participant interviewed by Annika Konrad in her study on the rhetorical labor involved in negotiating access, puts it this way: "You get so tired of trying to explain to someone that you just don't go into detail, you just don't bring up the subject, you just don't make an issue out of it. Sometimes you just don't say anything at all" (180). You end up not bringing up access altogether because it is too costly.

Konrad suggests that a major reason why engaging in "pedagogical work" (2021, 181) around access is so tedious for disabled people is because doing so involves managing nondisabled people's "discomfort about disability" (Konrad 2021, 180). Nondisabled people's discomfort is often palpable in how they welcome information about access, address nondisabled people's requests, and interact with them. Disabled people must develop discomfort

management strategies aimed at putting disabled people at ease and making their disabled selves legible to them. These strategies can involve over-explaining one's accessibility needs, providing detailed information about the effects of disability symptoms, or reassuring nondisabled people that accessibility measures will benefit them, too, and will not disrupt their activities. Catering to nondisabled people's comfort also sometimes involves being expected to confirm (or even publicly endorse) their perception of themselves as sympathetic political allies. Much like many white people count on reassurances of their "goodness" by people of color around them, many nondisabled people implicitly expect to be told by disabled people that they are "good people" with "good intentions" when engaging in even the most minimal forms of access work.

The costs of interacting with nondisabled people around issues of access also involve having to deal with potential aggression and hostility. Quite paradoxically, disabled people are both expected to educate others about access and are antagonized for doing so. In addition to providing their time and expertise for free to organizations, Ortiz explains that they have had to perform "the heavy emotional labor of [dealing] with resistance" (2019) when educating nondisabled people about accessibility. They have been angrily shouted at, blamed, and criticized by the very people who solicited their help. Over time, the burden of these interactions has put a strain on Ortiz's emotional well-being as well as on their relationships with these people. They write: "Often, I am left out of social opportunities because they see me as an enforcer of access that they are no longer providing. I become, in their resentful eyes, the disapproving 'access matron' that no one likes to be around" (2019, emphasis added). People who bring up accessibility everywhere they go are often seen by others as boring, uptight, and inconvenient. Like Ortiz, they may be perceived by their peers as 'disapproving matrons' and 'enforcers of access' whose sole purpose is to discipline others and spoil their fun. This can

eventually lead to their exclusion from committees, gatherings, events, and friend circles ("Don't invite her, she always finds something to complain about!"). Disabled people have no choice but to bring up access everywhere they go yet doing so can cause them to be cut off from other people's lives. In addition to being excluded from spaces because of inaccessibility, disabled people often find themselves relegated to the outskirts of relationships and communities because the people in these relationships and communities do not want to have to think about access.

While managing nondisabled feelings around access, disabled people must be sure to conceal their own feelings of frustration, anger, and disappointment. Emotional regulation is key to successfully navigating access interactions. To preserve agreeable relationships with access providers and cultivate an image of themselves as good-natured and amiable, disabled people become skilled at masking their emotional responses. When nondisabled people offer Ortiz "absurd reasons why they don't want to make changes to include disabled folks" (2019) including by telling her that ramps are too expensive, that she should fundraise for sign language interpreters herself if she wants them, or that making the space more accessible will ruin the ambiance—she must remain poised. She writes: "In my body, I hold my anger, not wanting to lash out at them. Sometimes I lose sleep because I feel the strain of pushing for inclusion, where someone really thinks that I am the problem" (2019, emphasis added). One of the disabled people interviewed by Konrad similarly describes repressing her emotions when she is denied assistance from grocery store workers who claim they are too busy to help her: "I don't really show them my frustration. I just try to smile but inside I'm at like a hundred degrees" (2021, 188, emphasis added). In both examples, anger is held in just below the surface. The experience of being 'at a hundred degrees' on the inside while smiling on the outside is emotionally painful. Concealing emotions can be an effective survival strategy in the short

term, and it is especially likely to be successful in preventing discomfort in other people, but it can have damaging long-term effects. Studies reveal that people who habitually suppress their emotions experience less satisfaction and feelings of closeness in interpersonal relationships (Le and Impett 2016; Impett et al. 2012). Instrumental emotional regulation can lead to burnout, anxiety, depression, and otherwise adverse health consequences. Perhaps most importantly, emotions that are "held in" do not receive uptake. Instead, they accumulate like an invisible weight inside a person.

I am reminded, here, of Sara Ahmed's (2017a) account of feminist snaps. Ahmed describes moments of snapping as instances when "you just can't take it anymore" (2017b) and the floodgates let down. Although moments when a person snaps often appear sudden from the perspective of outsiders, they are the result of accumulated pressure. A person may snap because they realize they are unwilling or unable to go on in the same way and to put up with the same things (for example, with everyday ableism, an abusive partner, or a job you hate). Snapping can be a first step toward making important changes in one's life or taking political action. However, moments when people snap do not always feel liberating or empowering. They can also be extremely painful. I recounted earlier in this chapter Ladau's experience of getting stuck on the New York subway. Ladau explains that she "internalized quite early in life that the burden is supposed to be on [her] to stay calm and deal with whatever access barriers come [her] way" (2021). Staying calm in the face of persistent inaccessibility is not always possible, or at least it is not possible forever or for everyone. Ladau writes: "\[As\]\] the train doors closed at 59th, something in me snapped. I began crying uncontrollably. \(\subsets\)...\\ \] I cried because I felt like a fraud" (2021). That same morning, Ladau had given a talk about systemic ableism and its effects on the lives of disabled people. Now, as she sat crying on the train, her impulse was to apologize to her boyfriend for arriving late to meet him. Despite his reassurance that none of this was her fault, Ladau's "guilt was unshakable" (2021). In the same day, she had "gone from empowered activist to apologizing as if inaccessibility [was her] fault" (2021). This moment of snapping was loaded with feelings of guilt that she could not shake off completely. In addition to dealing with ableist attitudes and barriers in society, disabled people must compose with how internalized ableism shapes their perception of their own needs for access. Disabled people's relationship to themselves is also strained by the weight of access.

Disabled people's demands for access can be received with hostility in relationships with strangers, but intimate relationships with loved ones can also bend or break under the weight of access. Due to decimated and underfunded institutional systems of care, many disabled people rely on intimate partners and family members to meet their accessibility needs. While bringing a loved one into the fold of access work can be a transformative experience, it can also put a strain on human relationships. Some nondisabled people may withdraw from (or even avoid forming) relationships with disabled people because such relationships are perceived as involving added layers of complexity. The isolation experienced by disabled people in ableist societies is also a function of the forms of rejection they face at an interpersonal level when their needs are perceived as "too burdensome" for others to handle. Disabled people also experience high rates of abuse (e.g., physical, verbal, emotional, sexual, and financial) and neglect (Hague, Thiara, and Mullender 2011; Orfila et al. 2018). Much of this abuse and neglect happens in their homes, at the hands of caregivers who are often also their spouses, children, parents, siblings, or more distant relatives. Many disabled people find themselves stuck in abusive relationships with the people they rely on for vital forms of access. Here, too, the performance of a friendly, unassertive, and even obedient disabled self can be necessary for obtaining access at the same time as it can seriously compromise one's safety, dignity, and wellbeing.

Sacrificing accessibility needs for the sake of protecting valuable relationships is a costly compromise disabled people are often forced to make in ableist societies. A disabled professor, for instance, might put up with faculty meetings in an inaccessible building to maintain agreeable relationships with her department head and colleagues. A disabled parent might avoid telling their spouse that they are unable to run after their children and need support to supervise them on high-pain days to avoid being perceived as an unfit parent. To preserve longstanding friendships with college friends, another disabled person might continue going out for drinks with them at loud and crowded bars in which he is unable to lip-read. These types of sacrifices extend beyond the scope of interpersonal relationships and include relationships with communities of choice. Despite their commitment to political liberation, many social justice movements and organizations remain deeply inaccessible for disabled people. In these contexts, disabled people may find that their relationships with able-bodied organizers and communities are conditional on their ability to demonstrate that they do not need "coddling" and can stand on their feet for hours at protests, hold organizing meetings late into the night, occupy a building for hours without eating, and run to safety when the police rush a crowd.

Multiply marginalized disabled people might be forced to compromise their accessibility needs to build political community with people who share other identities with them (for example, to join a support group for formerly incarcerated people, get involved in a Black student organization on their campus, or honor ancestral familial ties). Black, Indigenous, queer, trans, poor disabled people and disabled people of color might be forced to choose between communities that are reluctant to address ableism and inaccessibility, on the one hand, or primarily white, straight, and middle-class disability communities that uphold sexist, racist, trans- and queerphobic norms, on the other. They may feel that they cannot be their whole

selves in either community and eventually come to repress either their core accessibility needs or aspects of their identity to experience a minimal—albeit fraught—sense of belonging. A tragic cost of navigating access in ableist societies involves feeling like one must "pick and choose between different types of inclusion and oppression" (Konrad 2016, 193). Having to pick and choose which parts of yourself you can honor and which ones you must repress is emotionally taxing. Mingus' remarks on this topic are worth quoting at length. She writes:

I have watched ableism tear apart relationships with people I love. I have seen access be too much of a barrier for people to be in relationship with each other. I have made excuses for inaccessibility because I loved people and didn't want to lose relationships with them. I have excused racism, sexism, violence, homophobia because I didn't want to, couldn't afford to lose access. I have asked for access or raised ableism in relationships, only to have those relationships end abruptly. [...] I have had access made invisible or belittled by loved ones; I have had to make access happen so the person providing access didn't know they were. I have kept parts of myself from people I love because I was afraid to, didn't know how to be whole and complex in the context of needing access. This is the cruelty of ableism: it robs us of each other. (Mingus 2018)

Relationships are vital to our well-being and survival as social creatures. We rely on social connections along the spectrum of intimacy to develop our sense of agency, accomplish activities, meet our needs, and sustain our mental and physical health. Connections with others enrich our lives by providing us with a sense of belonging, and being deprived of them limits our ability to live a good life. Recognizing "the relational and human quality of access" (Mingus 2017a) is key to rejecting purely logistical approaches to it and embracing more liberating ways of creating access collectively. The work of creating access can strengthen human relationships by allowing individuals to reject deep-rooted feelings of shame around need and to embrace interdependence. The fact that access and relationships are so deeply intertwined is both promising and terrifying. As I have argued, disabled people must often rely on nondisabled people and institutions to meet basic access needs. Instead of harnessing disabled people's

access knowledge and skills, paternalistic approaches to access confine disabled people to the role of passive access receivers. In ableist societies, this type of asymmetrical dependency relation renders disabled people vulnerable to neglect, coercion, and abuse. Disabled people have long objected to perceptions of them as tragically dependent, yet these views persist. Disabled people are perceived as inherently dependent on others at the same time as they are forced to shoulder the costs and burdens of access individually, often by creating access for themselves, for other disabled people, or even for nondisabled people. The solution to these problems is not to move access out of the realm of human relationships. The illusion that this could ever be possible sustains ableism and renders unnoticeable the burdens disabled people must carry within their relationships and the costs they suffer. A more transformative solution involves reconfiguring social relations across the spectrum of intimacy to reflect the fact that access is a social imperative that concerns both disabled and nondisabled people. Without this type of social reconfiguration, disabled people will continue being forced to endure relational burdens and emotional costs that compromise their relationships with other people and with themselves.

VI. Conclusion: Too Much Effort, Not Enough Spoons

In her phenomenological account of life with a disability, S.K. Toombs describes "a typical experience" (13) of moving through the world as a disabled person. Toombs' journey begins at a regional airport, where she finds no wheelchair-accessible parking spot that would allow her to deploy her van's lift. When she notices that rental cars block the wheelchair-accessible ramp outside the airport, Toombs must alert someone inside the terminal and wait for the cars to be moved. Inside the commuter plane, she is physically carried to her seat—a process that requires strangers to manually lift her legs, fold her arms, and strap her "in the manner of a corpse" (14)

on a carry-on device—in full view of everyone waiting in the airport lobby. When she arrives at her first destination, this process must be repeated. She must be carried once more because the elevator at the airport terminal is broken and describes feeling the irritation of the people carrying her in their words and actions. Meanwhile, the 'accessible' restroom stall does not accommodate her chair unless she leaves the door open. On her second flight, the aisle between seats is too narrow for her wheelchair. To use the restroom, she must request assistance from a flight attendant long before she will need it to ensure that she can get to the restroom in time. Once Toombs finally arrives at her hotel, she finds that none of the hotel's restaurants are accessible to her from inside the building. She can access them from the street, "but this necessitates going two blocks in the pouring rain" (15). Toombs cannot stroll "farther than a block in any direction" (15) because the sidewalks do not have curb cuts. The "effortful nature of worldly engagement" (1995, 15) leads to what Toombs calls "existential fatigue" (15). She writes: "When ceaseless and ongoing effort is required to perform the simplest of tasks [...], there is a powerful impulse to withdraw [...]. The person with a disability is tempted severely to curtail involvements in the world" (15, my emphasis). There are not enough spoons to fight all the access battles that need to be fought. When their spoons for navigating access run low, disabled people are forced to withdraw from activities, relationships, careers, and opportunities. Disabled people are regularly forced to limit or withdraw their involvement in spheres of life that provide them with meaningful opportunities for growth and social connection due to restricted access or because navigating access takes too much of a mental, physical, emotional, and relational toll.

The experience of constantly coming up against walls, barriers, and obstacles is exhausting, as is the requirement to secure one's own participation in the world by taking responsibility for access alone. Sara Ahmed offers a definition of privilege that is fitting here:

"privilege [is] an energy saving device: less effort is required to pass through when a world has been assembled around you. [For others] so much more effort is required to get through" (Ahmed 2013). Privilege allows some groups and individuals to smoothly navigate their environment without constantly coming up against walls, barriers, and obstacles because the world has been "assembled" (or organized) around their bodies, minds, and capacities. In contrast, people who do not embody dominant norms of whiteness, maleness, thinness, and ability expend more energy passing through the world because the world has not been "assembled" around them. While some people experience little to no resistance when they move through the world, others must constantly fight, push, and strain to convince others they deserve to be included. Ahmed concludes: "Feeling depleted can be a measure of just what you are up against" (2013). The individualization of the responsibility for access wears disabled people down and leaves us feeling depleted. It also leaves us less able to do things like care for ourselves and each other, build sustainable communities, write our own stories, fight systems of oppression, and live joyful and abundant disabled lives. As Mia Mingus tells it, "the weight of inaccessibility is not logistical" (2012), or at least it is not only this. This weight is something we carry—often silently and shamefully—in our bodies and minds, an invisible weight that gets heavier each time we must individually shoulder the costs and burdens of (in)accessibility.

Chapter 4: Avoiding Taking Responsibility for Access

I. Introduction

The previous chapter provided an empirically grounded examination of the hidden costs and burdens of navigating access for disabled people. I have shown that the burden of requesting, arranging, planning, creating, and dealing with accessibility, as well as with its absence or breakdowns, falls on the shoulders of disabled people, almost always at great cost to them. The responsibility for access is narrowly individualized such that disabled people must oversee access everywhere they go. Holding disabled people individually responsible for access hinders their participation in social life and exacerbates patterns of inequality. In the meantime, several privileged actors are allowed to avoid taking responsibility for access. A central reason why disabled people are burdened with access responsibilities is because strategies of avoidance around access are so commonplace and uncontroversial in our societies. The strategies people and institutions adopt to legitimize inaction, dodge criticism, and point the finger elsewhere around questions of access do not appear problematic because they are consistent with the view that access is an individual responsibility from which some people are "naturally" spared because they are not disabled.

Changing existing practices of responsibility around access is key to building a more accessible world and achieving meaningful access. This ambitious project will require multiple types of interventions on several scales. I suggest that one such intervention involves identifying common strategies of avoidance around access and challenging the forms of irresponsibility they promote. This chapter does not offer a set of arguments for who should be responsible for what and why. My primary concern, instead, is to discern avoidance behaviors and strategies adopted by privileged agents and to investigate how these forms of avoidance are enabled by social narratives that frame accessibility as an individual responsibility disabled

people must assume alone. If our goal is to transform existing practices of responsibility around access, why focus on avoidance and irresponsibility at all? In her work on responsibilities for addressing structural injustice, Iris Marion Young argues that "producing more awareness" (2011, 154) around strategies of avoidance is crucial if we wish to effectively address many of the most urgent issues our societies face today. Gaining a better understanding of how responsibilities are avoided is key to "holding one another accountable" (154) and addressing responsibility gaps that allow structural injustices to persist. Similarly, in her work on caring responsibilities, Joan Tronto argues that focusing on irresponsibility can help us better understand "how some people end up with less, and other people with far more of the responsibility that might be better allocated in society" (2013, 64). I agree with Young and Tronto that studying how people and institutions avoid assuming some responsibilities, and understanding how they manage to do so, is just as important as studying what responsibilities they do take up. Taking Young's and Tronto's suggestions to heart, this chapter identifies and analyzes some common strategies that allow privileged agents to avoid taking responsibility for access.

The first of these strategies involves either diffusing the responsibility for access beyond recognition or, in cases where the responsibility has already been dispersed, taking advantage of its diffusion across multiple parties. In cases of diffusion, everyone is waiting for someone else to act, but no one is willing to claim responsibility. Diffusions of responsibility make disabled people who are seeking access feel like they are going in circles and being 'passed around' without receiving the support they need. The second strategy I consider involves diversions of responsibility. The responsibility for access is diverted when people and institutions offer reasons or make excuses for inaccessibility. This avoidance strategy is what we might call with Jay T. Dolmage (2017, 36) a "yes, but" type of strategy: yes, this building,

course, bus, service, or event is inaccessible, but it's the best we can do, but it's better than nothing, but it's an old tradition, but disabled people usually don't come to these kinds of events, etc. Finally, a third way of avoiding responsibility for access is by constantly delaying taking responsibility for it. In this type of case, a person or institution claims responsibility for access while situating the actualization of this responsibility in a different (and, often, distant) spatiotemporal frame.

As will become progressively clearer throughout the chapter, none of the strategies I consider amount to flat-out denials of responsibility. While there exist countless examples of situations where people and institutions straightforwardly deny the responsibility for access, I am interested in cases where everyone seemingly "cares" about access and thinks access is "good," but no one (other than disabled people themselves, that is) is willing to take responsibility for it. Strategies of avoidance are not always conscious, deliberate, and calculated. In everyday life, we often deploy strategies of avoidance without being fully aware of them and without having planned to do so ahead of time. We are often especially eager to avoid what I sometimes refer to in this chapter as "sticky" responsibilities: responsibilities that are perceived as tedious, thorny, tricky, or otherwise challenging for those who must assume them. People and institutions often get defensive when it is suggested to them that they are avoiding taking responsibility for something. They might respond that they are not being purposefully avoidant and protest that they have "good" intentions. The fact that strategies of avoidance are not always deliberate does not mean that they do not have pernicious effects, and it should not cause us to look away from them. For people who occupy privileged social roles and positions, avoiding taking certain responsibilities can become almost like second nature. Much like our bodies perform a familiar gesture by habit, without us having to exercise conscious thought, we replicate some of our social behaviors and practices without deliberation, in a thoughtless

manner. Responsibility avoidance can become habitual for some people when entire social systems are set up to allow them to rely on less privileged people to assume certain responsibilities. Finally, while I limit myself to identifying strategies of avoidance in this chapter, future discussions should also consider how to address and repair failures of responsibility around access. In addition to determining how responsibilities for access can be differently distributed, we must collectively determine how to hold people and institutions accountable for how they perform these responsibilities. Doing so is crucial for building interpersonal and institutional trust and will strengthen our collective capacity to achieve meaningful access.

II. Privileged Irresponsibility and Strategic Avoidance

When the time comes to distribute access responsibilities in our societies, some agents receive preferential treatment. They are both excused from consideration for certain responsibilities and receive disproportionate praise when taking any amount of responsibility. Agents who receive "passes" (Tronto 2013) out of responsibilities can focus their time, attention, energy, and resources elsewhere, on presumably more 'important' matters, ignoring in this process the costs and burdens assumed in their place by less privileged agents. Unjust responsibility arrangements are preserved by concealing crucial information about the sacrifices they require and the interests they genuinely promote. Indeed, many privileged actors have a vested interest in preserving the status quo by willfully ignoring the extent to which they benefit from these arrangements. Privileged individuals are often treated as if they have good reasons not to be held responsible for things that are considered better accomplished by others. When powerful groups and individuals are allowed to avoid these responsibilities, the responsibilities they escape do not magically disappear; they are simply directed elsewhere. Privileged

irresponsibility begets "unprivileged responsibility" (Raghuram 2019), as evidenced by the many costs and burdens assumed by less privileged agents in unjust societies. While the previous chapter has focused on the costs and burdens assumed by the unprivileged, I now focus on the forms of irresponsibility and strategic avoidance that allow privileged agents to turn their back on certain responsibilities.

The gendering of care as a feminine activity impacts the distribution of caring responsibilities in society, as I showed in Chapter 3. Narratives that suggest women are natural caretakers legitimate the fact that they assume the brunt of caring responsibilities in their families, workplaces, communities, and relationships. Instead of concerning everyone, the responsibility for care is treated as though it concerns only some members of society. In fact, the same narrative that suggests women are naturally better at caring allows men to be excused from caring responsibilities. Tronto offers the notion of "passes" to explain how men are permitted, and, in many cases, are explicitly encouraged to avoid, caring responsibilities "because they are engaged in other activities that they (and, presumably, society) deem are simply more important than caring" (2013, 33). Instead of thinking about and performing care, men are allowed to focus on responsibilities and opportunities that promote their social mobility, wealth accumulation, and self-actualization. Being given a pass out of caring responsibilities both reinforces male privilege and is a consequence of it. Chief among these passes, for men, are the "production" and "protection pass." In heteronormative family units, being assigned the role of protectors and providers automatically grants men a "protection" pass' out of the responsibility for [more] feminized forms of care work" (79), a division of responsibilities that mirrors the division between the household as a private domain and the public sphere of economic production. While "new fathers" (Prattes 2022) are praised for assuming minimal responsibilities for care in the family unit, women in heterosexual

partnerships are reminded they are lucky to have a spouse who cooks dinner, cleans dishes, and assists with childcare.³ Implied in this claim is the view that women should be grateful for any type of involvement from their spouse and not ask for more.

While Tronto focuses primarily on the effects of hegemonic constructions of masculinity on the distribution of caring responsibilities, a more explicitly intersectional analysis allows us to see that wealthy white women also receive passes out of caring responsibilities. The expectation that Black women and women of color will perform white women's "dirty work" is built into formal and informal systems of care in white supremacist societies (Duffy 2007; Glenn 1992; Roberts 1997). What Dorothy Roberts (1997) describes as the racialized dichotomy between "menial" and "spiritual" housework helps us see this clearly. The history of domestic work in America shows that privileged white women have long assumed socially valued responsibilities for "spiritual" work (e.g., supervising domestic work, hosting guests, and reading bedtime stories to children) while receiving a pass out of "menial" housework that involve more strenuous and undignified tasks (e.g., cleaning floors and bathrooms or doing laundry). Today, the very same structures that allow privileged white women to "lean in" and assume leadership roles in the corporate world still exploit the labor of the working-class women of color and Black women who take care of their homes, husbands, and children. The higher up the social ladder someone is (or manages to climb), the more some responsibilities are considered 'below their pay grade'. They become too tedious, dirty, or unimportant for them.

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³ The labelling of care as inherently feminine also has the effect of feminizing men involved in caring. In French, the expression "pink men" [hommes roses] is employed to denigrate men who participate in household chores and express their emotions. Rooted in misogyny and queerphobia, this type of discourse suggests that men who clean, cook, and care for children must compromise their "manliness."

Tronto's account of privileged irresponsibility emphasizes the role that ignorance plays in allowing privileged agents to ignore hardships faced by less privileged others. The four phases of care identified by Tronto begin with the identification of a need that must be met, but she notes that "ignorance serves to prevent the relatively privileged from noticing the needs of others" (121). Ignorance justifies privileged unresponsiveness and irresponsibility because "[not] knowing about a problem seemingly absolves one from trying to solve it" (Tronto 2013, 60). Privileged agents must not meet needs they are unaware of or address problems they do not see as problems. The type of ignorance described by Tronto is not an accidental by-product of limited epistemic resources. It is a kind of ignorance that is "purposefully crafted" (Prattes 2020, 30) with the aim of preserving existing structures of domination. Ciurria adopts a similar conception of ignorance when considering how powerful agents disappear when the time comes to establish responsibility for wrongdoing. She describes this phenomenon as "the mysterious case of the missing perpetrators" (171). Drawing on work by Charles Mills, Ciurria offers "the case of the missing racists" (178) as an illustrative example. Mills argues that white supremacist liberal social orders promote the lie that racial equality has been achieved and that racism is non-existent. This narrative protects white members of society from charges of racism by writing racism out of existence: if racism is over, white people cannot be racist. In addition to protecting white people from blame, this narrative immunizes them against knowledge of the reality of racist oppression. Even though white people are the ones who "constructed the very false narratives that structure their cognition so as to protect themselves from knowledge of white supremacy" (180), white ignorance functions as a shield against blame.

Many forms of privileged irresponsibility are maintained through similar forms of ignorance: I(or we) didn't know this problem existed! Or: I (or we) didn't know I(or we) had anything to do with this! Although it is not one of the strategies I foreground in this chapter,

ignorance is one of many strategies that allow agents adopt to avoid taking responsibility for accessibility. For instance, many nondisabled people are unaware of the barriers to accessibility faced by disabled people. It is entirely possible and even remarkably easy for nondisabled people to ignore issues of accessibility in their daily lives. Accessibility is not something they must think about or concern themselves with. It is not something they are required to notice since the world is designed for people with bodies and minds like theirs. Failing to notice a problem—either willingly or unwillingly—often protects us from having to take responsibility for it. In this case, nondisabled people who do not notice inaccessibility can avoid taking responsibility for it. Ignorance, in the form of weaponized incompetence, can also come in handy when the time comes to problem-solve and actively address issues of inaccessibility. Instead of recognizing that the creation of access involves skills that can be honed and practiced, individuals and institutions can deliberately underperform and feign ineffectiveness. To the suggestion that they play a role in performing access responsibilities, some privileged agents might respond: I (or we) don't know how to do this as well as you, disabled people! Following disabled people's leadership when creating access is important, but it does not warrant exploiting their labor while tolerating the inaction of more privileged actors. Because appeals to ignorance can serve to license systemic forms of irresponsibility, we should remain closely attentive to the role it plays in allowing some agents to avoid taking responsibility for access.

Ignorance is a common way of avoiding responsibility, but there exist many others.

Strategies of avoidance that allow privileged agents to avoid unwanted responsibilities are constantly emerging and evolving. Regardless of whether these forms of avoidance are conscious or deliberate, they affect how responsibilities are parsed and whether they can be justly distributed. Before her untimely death, Young was working on developing an account of

responsibility for structural injustice, a kind of moral wrong she describes as exceeding the actions of individual agents but as reproduced daily through all our actions and inaction. In the posthumously published *Responsibility for Justice*, Young argues that agents make use of at least four different strategies to avoid taking responsibility for structural injustice. The first of these strategies involves reifying structures by treating them as "natural forces" (154) and claiming we have "no choice but to act as we do" (154). Reification describes how we treat "products of human action in particular social relations as though they are things or natural forces" (154). This type of obfuscation is often not deliberate or explicit. Young notes that reification is a product of the accumulative effect of human action. Large-scale social processes reproduced by thousands of persons inevitably acquire a certain level of calcification and are perceived as rigid. Reification becomes a problem when we use it as "an excuse to accept the harm or disadvantage of certain groups because it is as futile to try to change [social processes] and their outcomes as it is to try to prevent earthquakes" (157). Treating the systems we participate in daily as "objective facts we must deal with" (154) allows us to avoid taking responsibility for transforming them.

We also avoid taking responsibility for structural injustice by denying our connection to the vulnerability of others. Young explains that while any of us recognize some level of responsibility for "the effects of <code>[our]</code> actions on people with whom <code>[we]</code> directly interact" (158) (e.g., our spouses, children, and friends), we avoid other forms of responsibility by denying our connection with less proximate others (e.g., factory workers in a different country). Thirdly, we can avoid our responsibility for structural injustice by emphasizing "the demands that relationships of immediate interaction make on us" (161) at the expense of all other relationships with living beings. The fourth and final strategy considered by Young involves claiming that something is not our job (or not our problem). We avoid taking responsibility for

structural injustice when we recognize that a situation in the world is unjust and needs changing but refuse to take responsibility for bringing about change. This type of avoidance strategy rests on the following conviction: "somebody should do something" (166) but that somebody is not me and it is not my job to see to it that something is done. Young points out that even when we have not individually and deliberately caused a given situation, we might have a role to play in working with other actors to change social systems that systematically produce unjust outcomes. In each of these cases, strategies of avoidance "offer actors excuses for not trying actively to change" (170) what needs changing.

Strategies of avoidance license irresponsibility for the most privileged agents in society while leaving urgent problems unaddressed. They hinder our ability to collectively address these problems in ways that do not merely reproduce existing patterns of injustice. Achieving meaningful access is a challenging project that will only be made more so if we do not develop a better understanding of the strategies of avoidance that allow actors to evade access responsibilities at every turn. Merely identifying these strategies is not enough; we will also need to develop counterstrategies aimed at curbing their effects and restricting their occurrence. Nonetheless, naming these strategies and analyzing how they work is valuable if we wish to build a world in which disabled people are not left to carry the weight of access alone. The remainder of this chapter is dedicated to analyzing three common strategies that allow privileged agents to avoid taking responsibility for access.

III. Diffusing the Responsibility for Access

Studies show that the involvement of multiple parties in a situation changes individual behavior and diminishes our sense of responsibility for the consequences of our actions. In other words, we tend to feel less responsible for an outcome when the requirement for moral responsiveness is dispersed or diluted across several actors. This sociopsychological phenomenon has been observed in many kinds of situations and is described by social scientists under the heading of diffuse responsibility. Researchers have employed this notion to make sense of group-level phenomena such as the bystander effect, a phenomenon in which individuals fail to intervene in a crisis when other witnesses are present, and social loafing, which describes the tendency of individuals to exert less effort when working in a group (L. C. Butler et al. 2022; Decady Guijarro and Bourgeault 2023; Karau and Wilhau 2020). In addition to diminishing our sense of responsibility, the diffusion of responsibilities can make it challenging to assign responsibility to discrete actors for an outcome. The more hands, so to speak, that are involved in decisions and processes, the more challenging it becomes to hold anyone accountable for anything, a problem some have described as the problem of many hands (Licia Carlson 2021; Thompson 1980). Diffuse responsibility can have a neutralizing or even disintegrating effect on processes of accountability. In its most extreme forms, it can lead to the perpetuation of large-scale injustices and atrocities.

My interest lies in how diffusion can be employed as a strategy of avoidance. To avoid taking responsibility for a problem, agents can deploy efforts to diffuse the responsibility for this problem (or situation) across multiple parties. The more parties are involved in a situation, the more opportunities there are to pass the buck to someone else and avoid taking responsibility. In contexts of diffuse responsibility, agents can also take advantage of the involvement of other actors to fade into the background and transfer their responsibilities to another party. When many hands are involved, responsibilities can be passed around strategically and change hands at a moment's notice. One of the simplest ways to avoid assuming a responsibility you do not want to assume is to delegate it to someone else. To avoid taking matters into their own hands, and thereby avoid getting their hands "dirty," agents can

delegate "sticky" responsibilities. Delegation can lead to better overall outcomes when a party that is more skilled, knowledgeable, and resourceful ends up assuming a given responsibility. Yet researchers have found that our motives for delegating responsibilities are not always commendable. We do not typically delegate responsibilities to generate better outcomes; our motives are often much more self-interested (Bartling and Fischbacher 2012; Steffel, Williams, and Perrmann-Graham 2016). In everyday life, we often delegate responsibilities regardless of expertise to avoid responsibility and blame, rather than to put responsibilities in the "right" pair of hands.

Scholars distinguish between vertical and horizontal forms of diffusion (Dana, Loewenstein, and Weber 2012; Iusmen 2020; McGraw 1990). Responsibility is diffused vertically when agents delegate responsibilities they wish to avoid to intermediaries (e.g., an employer who hires a firing consultant tasked with laying off employees). Horizontal diffusions of responsibility occur when someone avoids intervening in a situation and instead implicitly relies on others to take responsibility (e.g., a professor who assumes that another professor will look out for the struggling transfer student). Vertical diffusion can operate in two directions. Responsibility is diffused from top to bottom when powerful agents avoid "sticky" responsibilities by delegating them to subordinates. In practice, occupying a higher level of authority does not always give rise to a higher level of responsibility. People occupying managerial roles can delegate key responsibilities (for example, the responsibility of a making a challenging decision) to organizational members at lower levels to avoid responsibility. If it produces positive results, they can position themselves to reap the benefits of this decision without having assumed the responsibility for it. In contrast, a responsibility is diffused "upward" when a party defers to parties with a higher level of authority to avoid sticking their

neck out, for instance by claiming ignorance or blaming their inaction on their lack of resources or skills.

Both vertical and horizontal forms of diffusion are at play in how the responsibility for access is avoided in everyday life. First, the responsibility for access can be diffused horizontally in a group of people with members of roughly equal status. Imagine a group of nondisabled people planning an annual conference. No one brings up the question of accessibility because everyone figures someone else will do so if they think it's important enough. If no one brings up accessibility, then it's almost as if the responsibility for addressing it does not even exist. When everyone could be responsible, no one is responsible. In contrast, the responsibility for access is diffused vertically when it is handed off from one department, committee, or office to the next without anyone deciding that the buck stops with them and assuming responsibility for access. When disabled people try to figure out who is responsible for access, they are sent on a wild goose chase. There is always someone else they must turn to and plead with to have their requests met: first department heads, then Human Resources officers, program administrators, building managers, elected officials, lawyers, and judges. At every step, disabled people are offered only vague promises and dodgy explanations. Instances where it is more challenging to determine who is responsible for access than it is to figure out access for oneself are instances of diffuse responsibility.

Large institutions with internally complex systems and procedures are breeding grounds for diffusions of responsibility. The more complex the systems and procedures and the more actors are involved in upholding them, the more chances there are for responsibility to be diluted beyond recognition. On the surface, it may seem like an institution has channels of communication in place for receiving accessibility requests as well as effective mechanisms for addressing access failures. In practice, however, disabled people often find out the hard way

that these channels and mechanisms are resistant to effective utilization. Havi Carel and Ian James Kidd (2021) argue that institutions become opaque when they are "increasingly resistant to assessment and understanding by their agents and, especially, their users" (2021). Institutional opacity makes it challenging to understand the inner workings of an institution and to know how to comport oneself within the institution to achieve one's aims. Users interacting with opaque institutions might express themselves in the following terms: "Where do these reports go? Who do they go to? What happens with them?' 'All my questions get passed on "up the chain", but no answer ever comes back again.' Do you understand a word of what the Head of Operations said in their email? [...] Who do I ask? What do I ask for? Who should I speak to? What are the right terms to use if I am making requests? Am I only likely to be taken seriously if I use the right language – and if so, what is that language?" (2021). In the case of access, an opaque institution can cause us to ask questions such as: Who oversees accessibility here? Who do I have to talk to about this problem? Can someone explain to me why this request was rejected? What is being done about the complaint I filed months ago? Am I being taken seriously? These questions often receive no clear answer. Carel and Kidd argue that while epistemically just institutions "protect our epistemic agency, efficiently support our endeavours, and fairly and reliably disperse social and epistemic resources" (2021), opaque institutions "erode our epistemic confidence" (2021). They make us feel lost, confused, and alienated.

Interacting with opaque institutions is difficult for anyone, but it is especially challenging for people whose epistemic agency is thwarted by ableist, sexist, classist, and racist economies of credibility. Indeed, many persons and groups find that the "epistemic dice are [loaded] against them" (2021) at every step of their interactions with institutions. They are regarded as incompetent, irrational, and unprofessional simply by virtue of their existence.

When we come across institutional opacity, many of us respond by asking questions and demanding greater transparency. For instance, a person might ask to be provided a justification for why her social benefits were cut; another might challenge a departmental decision that is framed as unavoidable. These practices of epistemic resistance are essential, but they are not available to everyone. Opaque institutions are "intolerant to resistant behaviour" (2021) and often will not hesitate to retaliate against agitators (for example, by "misplacing" their complaints, keeping them waiting, calling them into disciplinary meetings, or drowning them in paperwork). Challenging institutional opacity can cause a person to be labeled as "belligerent, aggressive, hostile, destructive, and non-cooperative" (2021); it is also mentally, emotionally, and physically taxing. Recall our discussion of the costs and burdens of navigating access in the previous chapter. Navigating access is even more exhausting when the responsibility for it has been diffused.

In Chapter 3, I introduced Apelmo and Nordgren's collaborative autoethnography of their experiences as disabled academics. Over the years, the authors have faced multiple accessibility concerns in university environments. They have also faced institutional challenges when attempting to address inaccessibility. Apelmo and Nordgren explain that when accessibility concerns are brought to the attention of relevant parties, nothing seems to change. More precisely, no one is willing to take responsibility. They write: "Departments send the tasks to other departments or to other institutions outside the university, i.e. the municipality or the property owners. Years have passed and the inaccessibility remains. No one raises her/his hand saying, 'I have the responsibility and I will see to it that this is solved.'" (117). Too many parties are involved for disabled people to keep track of, and the complaints they file end up getting "stuck" (118) within maze-like bureaucratic structures. For those on the receiving end of these complaints, handing off the problem of inaccessibility to a different office,

committee, department, or municipality creates the impression that something is being done ("we've forwarded your request"; "they should be able to help you better than we can"; "they're the experts on this") without being held responsible for the result. In this scenario, it is not just the problem of inaccessibility that is being passed around 'like a hot potato'. Disabled people themselves are being passed around like a problem nobody wants to deal with. Their complaints are handed off by one person or office to the next until (hopefully!) disabled people find a way to self-accommodate or stop showing up altogether. Like Apelmo and Nordgren, many disabled people are "still waiting for the person responsible for accessibility to raise his or her hand" (119).

In higher education settings, disabled students with accessibility requests can be conveniently handed off to the office of disability services. On most course syllabi, accessibility only makes an appearance once, to indicate to disabled students that they should consult their institution's office of disability services if they wish to set up accommodations. By framing accessibility this way, course syllabi communicate to disabled students that accessibility is the domain of the office of disability services. The course syllabus, as an institutional document, figuratively hands off disabled students' accessibility concerns to this office: take your concerns there, don't bring them here. As a result of being passed around in this way, disabled students may come to feel like there are institutional figures of authority they should not (or cannot) talk about access with, as well as resources on campus that are off-limits for students "like them."

For faculty members, relying exclusively on disability services to address the needs of disabled students is a very effective way of avoiding taking responsibility for access beyond the scope of what the law minimally requires. Studies show that a significant number of faculty members have limited knowledge of laws regarding accessibility and their legal role in providing students with accommodations (Katsiyannis et al. 2009; West, Novak, and Mueller 2016).

Although the reasons for this gap in knowledge are undoubtedly complex, we can speculate that many faculty members implicitly consider that they are not responsible for familiarizing themselves with policies and resources regarding accessibility because other people and offices on campus are responsible for doing so in their place. While some faculty members are eager to learn more about the accommodations process, many others use the existence of institutional services for disabled students as an exit strategy to avoid taking responsibility for access. In doing so, they eschew consideration of the role they could play in generating more accessible learning environments and supporting disabled students.

Diffusion of responsibility can also occur in contexts where agents act within the confines of established standards and protocols. This type of diffusion is evident in Cassandra Hartblay's (2017) study of the experiences of wheelchair users in Russia. Hartblay explains that "bad ramps" (17) that are impracticable for disabled users are a common fixture in urban environments despite being "an illogical absurdity" (2017, 11). These inaccessible ramps are proof that access can be provided "in name only" (9), with no consideration for disabled people's actual needs. When asked about these failures, Hartblay's disabled interviewees do not blame individual actors. They explain that ramp-builders are only responsible for adhering to design standards; they are not responsible for results. Many of them sympathize with the reality of individual agents working in a system where centralized standards have the last word. As Hartblay writes: "[standards] make everyone responsible at the same time that no one person is responsible for an end result" (17). The author concludes the following: "culpability for inaccess is defined by diffuse responsibility" (17). Failed ramps are the result of a system in which accountability is diluted because individual actors must defer to an inflexible, "depersonalized, [and] centralized set of norms and standards" (17). These individual actors are not deliberately relying on diffusion to avoid taking responsibility for access. They are

simply "rational actors in an imperfect system making compromised choices" (17). I fully concede both points (i.e., avoidance is not always malicious and all of us must make choices in an imperfect system). Yet merely pointing to centralized standards as the reason why inaccessibility persists is a prime example of how diffusing responsibility can serve the purpose of avoidance. Design standards cannot assume the responsibility for deficient access alone. These standards did not simply fall from the sky; they are the product of human action. Reifying these standards to avoid assuming responsibility for access amounts precisely to the type of reification denounced by Young earlier.

Without adequate safeguards in place, the mere fact that responsibility is distributed across multiple parties is enough to generate responsibility gaps. Any responsibility that is shared by multiple actors runs the risk of being diffused. At the same time, the involvement of multiple parties is key to achieving many desirable outcomes. Differently situated actors are likely to have access to different skillsets, resources, knowledges, social capital, and levels of authority. All these actors will not have the same level and type of responsibility, but close, meaningful collaboration between multiple actors can yield valuable results. My point is that the best solution to the problem of responsibility diffusion is not to renounce any sharing of responsibilities. Instead, we can pursue ways of mitigating the pitfalls of shared responsibility by limiting instances of diffusion that shield powerful actors from taking any responsibility. The attribution of responsibilities must be paired with robust accountability mechanisms if responsibility arrangements are to be effective at all.

Although much more needs to be said about this question, I suspect that building greater accountability will not be best achieved through a fixation on hyper-regulation and sanctions. Onora O'Neill (2014) argues that there is not much evidence showing that the adoption of managerial methods to ensure accountability—which typically involve "setting"

targets, measuring performance against these targets, and sanctioning defective performance" (174)— does, in fact, lead to improved performance. Even when these methods are adopted with good intentions, they often fail. Managerial accountability is based on vertical, top-down approach to accountability. Those who are on the top (e.g., managers) set targets for actors that are below them (e.g., people, departments, or institutions). Bureaucratic accountability functions much in the same way, but "focuses on adherence to standard procedures" (175). In both cases, satisfactory performance is judged 'objectively' based on the evaluated party's ability to check the right boxes, irrespective of what these boxes are measuring. A checklist approach to accountability reintroduces many of the problems accountability systems are charged with alleviating. The goal of evaluated parties can quickly become to identify how they can check accountability boxes (e.g., by meeting targets and adhering to standards) while doing only the bare minimum. This is not the kind of accountability I have in mind when suggesting that shared responsibility requires accountability.

IV. Diverting the Responsibility for Access

The responsibility for access is diverted when people and institutions offer reasons or make excuses for inaccessibility.⁵ Making excuses for inaccessibility is a "yes but" type of avoidance

may not be valuable or relevant, it may or may not find its way to the relevant audience, and the work involved in

responsibility for certain things in ways that do not seem reprehensible.

⁴ O'Neill also very convincingly demonstrates that our obsession with transparency as a measure of accountability is problematic. Quite simply, to be transparent is not *in itself* an indication that a party is accountable. It is only an indication of the fact that a person, institution, or organization is disclosing information. This information may or

making this information available can distract from other, more meaningful efforts to ensure accountability.

⁵ Philosophers disagree about whether justifications and excuses are mutually exclusive kinds. I do not position myself in these debates here. Rather, my focus is on how offering reasons and excuses can allow us to avoid taking

strategy: yes, accessibility is both legally required and socially desirable, but here is why this building, event, service, or institution is still inaccessible. Yes, accessibility is a laudable aim, but it's just so hard, we've done the best we can, or we didn't know it was that bad. As Titchkosky (2011) reminds us, the exclusion of disabled people from social life is still treated by most people as something for which reasons and excuses can be provided. These reasons and excuses vary widely ("because of the past, because of the passage of time, because of ten, twenty, thirty years, because it won't make a difference, because we don't know what to do" (76)) but they all encourage the belief that inaccessibility is sensible, acceptable, or at the very least tolerable. Repeatedly encountering people and institutions that offer reasons and excuses to justify one's exclusion from the world is a pernicious type of violence against disabled people that has yet to be fully theorized. In what follows, I consider how offering reasons and excuses for inaccessibility conceals the harms of inaccessibility and allows agents to avoid taking responsibility for access.

Many of us have experienced the frustration of being on the receiving end of an apology that does not, in fact, feel like an apology. Apologizers can give the impression that they are apologizing for something while avoiding taking responsibility for it. In some cases, apologies are not a claim to responsibility. They function, rather paradoxically, as a concealed expression of irresponsibility. Jay T. Dolmage has coined the concept of ableist apologia to describe "a genre or category of statements and sentiments that distance the speaker from responsibility" (Dolmage 2017, 35) for ableism. Ableist apologia allow apologizers to avoid taking responsibility for ableist remarks, attitudes, behaviors, and practices by apologizing for them. Ableist apologia are affectively complex. On the surface, they give the impression that someone is concerned with, or at least that they minimally care about, the harms of ableism. At the same time, "the emotion is not necessarily sincere and the apology is not exactly an apology at all"

(35) because it is an apology that "defend [s] the apologizer and attempt [s] to explain away their actions or inactions" (36). The apology serves to protect the apologizer. It does not involve any commitment on their part to change a course of action or meaningfully work to repair the harm that has occurred.

Ableist apologia are often offered defensively by apologizers as "a response to the charge of ableism" (Licia Carlson 2021, 73), whether it is explicit or implicit. If a professor feels that her student will call out an ableist remark she made during class (perhaps because the professor is perfectly aware, in fact, that her remark was ableist), she might defensively deploy ableist apologia in their next meeting to distance herself from the responsibility for perpetuating ableism. Some forms of ableist apologia are "tinged with a sense of regret or fatigue, with the feeling that the apologizer is throwing their hands up in the air and saying: there's nothing I can do" (35). In the introduction to Academic Ableism: Disability and Higher Education, Dolmage explains that one reaction he anticipates the book might elicit from some of its readers, whether "in the form of a conscious response, or an unconscious feeling" (35), is some variation of the following sentiment: "Of course higher education is ableist." This cynical sentiment, Dolmage explains, is "rarely coupled with a concern about this state of our institution" (35). Claiming that "of course higher education is ableist" vaguely gestures at regret while still diverting responsibility away from oneself. Of course, higher education is ableist and inaccessible, but there's nothing I can do. Finally, ableist apologia are sometimes offered in a passive aggressive, hostile, and combative tone to indicate to those who are on the receiving end of the apology that the apologizer does not think they have anything to apologize for. Passive aggressive, hostile, and combative apologies are meant to suggest that "this is the last thing the apologizer is willing to do—that they are asked to do so much, that they do so much" (35). Apologizers are likely to express annoyance, or even anger, if someone suggests

that their apologies are not enough, because the goal of ableist apologia is to apologize without taking responsibility. To put it bluntly, ableist apologies are meant to shut disabled people up by "[ending] a conversation that needs to be just a beginning" (39). Ableist apologia aim to keep things exactly the way they are.

Ableist apologia are a common occurrence in academic institutional settings. For instance, a professor who refuses to accommodate a student requiring a quiet testing environment might explain that "[they] need to impose standards" (36) or that "[they] would be doing [this student] a disservice if [they] didn't prepare them" (36) for the 'real world.' We might think, also, of the kinds of statements used to justify inaccessible buildings on campuses ("it's a historical building!"), assigning ableist materials in a course ("it's an essential text!"), making ableist jokes ("I didn't mean it that way!"), not hiring interpreters ("interpreters, in this economy?"), or holding a panel on disability without any disabled speakers ("we couldn't find anyone!"). In each of these examples, ableist apologia "[helps] ableism disguise itself" (36) as common sense. These and similar utterances are not inconsistent with statements promoting a culture of inclusiveness for diverse students, scholars, and practitioners in higher education. Instead, the very existence of institutional statements orients our reception of ableist apologia as acceptable and justifiable because ableism is logically incompatible with an institution that is committed to access and inclusion.

Although the barriers disabled people face are sometimes perceived as unfortunate—or even as unjust and unacceptable—by nondisabled people, this does not necessarily result in a willingness to share responsibility for access. Apelmo and Nordgren, whose collaborative autoethnography of their experiences as disabled academics in Sweden I considered in the last chapter, report an incident that illustrates how ableist apologia unfolds in interpersonal interactions. This incident occurred after their department was relocated to a newly renovated

building. While the seating area in this new building's lecture hall was accessible for wheelchair users, its podium was not because it was separated from the seating area by a short flight of stairs. For Apelmo and Nordgren, the message sent by the configuration of the conference hall is clear: "wheelchair users [are constituted] as passive listeners, not as active lecturers or students" (Apelmo and Nordgren 2021, 111). When they complained to university administrators about the inaccessible lecture hall, a representative of the university instructed them to simply avoid booking it. Following additional advocacy efforts by disabled faculty members, the university finally announced that the halls would be closed until the issue was fixed. This announcement aroused strong reactions from nondisabled colleagues: "Some had initially expressed support and showed indignation that a newly renovated building had inaccessible halls, but when it became a fact that the halls could not be used at all and lectures were to be held in another building—meaning they would have to move—colleagues disapproved" (2021, 111). These reactions can be interpreted as a type of ableist apologia masked by performative allyship. At the time when the issue had no bearing on their existence, the authors' colleagues showed indignation. Despite expressing outrage in the face of inaccessibility, they expected that the inaccessible lecture hall would at least remain available for them. Performative allyship allows actors to apologize for ableism ("it's really such a shame!") without considering how their own habitual ways of moving through the world might need to be transformed in and by the process of creating access. Of course, increasing accessibility is a laudable aim, but what about us?

Perhaps one of the most common examples of ableist apologia involves claiming that accessibility measures are too expensive to be implemented. Few things appeal more directly to people's common sense than money talk: "Of course, we care about access, but we just can't justify the expense." Because of how accessibility is viewed in society, accessibility measures are

always framed as additional expenses. There are some expenses we must assume, while others we should carefully consider. Weighing the costs and benefits of disabled people's inclusion in society is seen as a perfectly sensible thing to do. Financial considerations are built into accessibility laws. Rod Michalko and Tanya Titchkosky write that "[the] legislative notion of 'undue hardship' offers reasonable grounds for not providing accessibility" (Titchkosky and Michalko 2001, 209-10). Disabled people need not be included if their inclusion costs businesses, employers, institutions, and others too much. The argument goes something like this: "Wheelchair ramps, talking elevators, braille markings are 'extras'—and costly ones at that—to the creation of an environment. But it is unreasonable to expect a society to bear the costs of adding such 'unnatural' features to its 'natural'" (210). Some expenses are reasonable (for example, spending half a billion dollars on a new sports stadium), while others (for example, braille markings) are not. A sports stadium is a 'natural' feature of contemporary university environments, while braille markings are 'unnatural'. Accessibility is treated as a drain on collective resources that could be better spent elsewhere, much like disabled people themselves are portrayed as 'scroungers' and 'leeches' that drain other people's resources. Economic rationality allows agents to avoid taking responsibility for access while portraying themselves as financially responsible.

When making excuses and giving reasons for inaccessibility, speakers must choose their words carefully. Hannah Egard (2022) argues that a common way of excusing inaccessibility without taking responsibility for it is by using what communication scholar Anita Pomerantz (1986) calls 'extreme case formulations'. Extreme case formulations are used to bolster the legitimacy of a claim. Examples of such formulations include expressions such as 'everywhere,' 'everyone,' 'no one,' 'not at all,' 'without a doubt,' or 'all the time.' We use extreme case formulations in a variety of contexts, for instance, to defend ourselves against accusations

("there's no possible way I could have avoided this!") or to convince someone that something is right because it is commonly done ("everyone does it all the time!"). In her study of accessibility in Sweden, Egard demonstrates that accessibility officers, traffic planners, and building permits administrators employ extreme case formulations to normalize and legitimize what she calls "half-measures of access" (2022, 14). Despite Swedish accessibility standards requiring "equal and independent access and usability for everyone" (14), Egard finds in her study that restricted access is the norm in city centers. A first example of "half-measures of access" she considers is the absence of permanent ramps outside public establishments. Instead of offering permanent ramps, establishments rely on doorbells and detachable ramps. Disabled people must ring a bell and wait for a store clerk to meet them outside and install a portable ramp for them every time they want to enter a building. These portable ramps are often unsafe for wheelchair users because they are too short. An administrator of building permits interviewed by Egard concedes that "90 percent of all entrances" (19) on a given pedestrian street are up a short flight of stairs. To explain why so many entrances are inaccessible to wheelchair users, he declares: "Unfortunately, we found out that the only solution that works [...] is that we recommend doorbells and detachable ramps. [...] It is the only solution. The only way—" (19, emphasis added). Doorbells and portable ramps are "legitimized and perceived as right and acceptable" (2020) even though they are inadequate. Using expressions like "the only solution" and "the only way" produces the impression that half-measures of access are unavoidable. Notice that in presenting restricted access as the only solution and the only way, no one is taking responsibility for the failures under consideration.

At a later point in the same discussion, the building permit administrator explains that while a permanent ramp "would be the ideal measure from an accessibility perspective, [it is] not a realistic one, in his point of view" (19). Describing permanent ramps as idealistic is a way

of making inaccessibility seem reasonable. When lack of access is seen as reasonable, the demands of disabled people become un-reasonable. Disabled people calling out inaccessibility are treated as though they are overdemanding, unrealistic, or nonsensical. The implicit suggestion here is that disabled people's reasoning abilities are distorted by their proximity to disability. The fact that disabled people require access distorts their ability to judge what is reasonable. They are 'too close' to the problem and thus cannot see the matter at hand objectively. They always ask for 'too much', 'too soon'. Here, 'too close,' 'too much,' and 'too soon' also function as extreme case formulations. This type of paternalistic, often even condescending, treatment of disabled people's demands allows agents to perform a responsible orientation toward questions of accessibility ("I understand your concerns") while evading responsibility ("but there's nothing to be done" or "but it is what it is" or "but it's better than nothing"). The process of making excuses and giving reasons for inaccessibility is a selfreinforcing loop: the more people give (and hear) reasons and excuses, the more they assume that lack of access is something for which reasons can be provided and excuses made. Titchkosky argues that "the social activity of people seeking reasons [for inaccessibility] fosters the sensibility that lack of access is reasonable" (Titchkosky 2011, 77). Ultimately, it does not matter whether disabled people are given a "good" reason for lack of access. As Titchkosky notes, "[some] reasons are not agreeable, some unjust" (77). Still, with each reason provided, "radical lack of access [is painted] in an ordinary hue" (77). Reasoning about lack of access is a way of making "the on-going exclusion of disabled people appear more or less ordinary" (77). Because it is made to appear ordinary, the exclusion of disabled people is no longer shocking or unacceptable. It becomes a sensible feature of social life.

Reasons, excuses, and empty apologies change nothing about the reality of inaccessibility. As Dolmage put it, they are intended to end a conversation rather than initiate

change. They function as a temporary distraction that allows agents to deflect responsibility and maintain the status quo. In practice, disabled people are still expected to carry the weight of access alone. What would it take to throw a wrench in these kinds of diversions of responsibility? Clarifying how diversion functions as a strategy of avoidance is only a first step. Identifying diversions of responsibility when we recognize them in the world around us would be another step. As Titchkosky argues, "the most ordinary or acceptable ways to speak of access" (78) in our societies perpetuate the ableist myth that access is disabled people's problem, and, by extension, their responsibility. Because diversions of responsibility are an essential part of how we talk about and relate to access as a society, we must engage in a process of disorientation (or defamiliarization) in which we interrogate our deepest-held assumptions about what is considered say-able (i.e., normal, acceptable, and ordinary) and what effects this has on the world around us.

V. Delaying Taking Responsibility for Access

A third way of avoiding responsibility for access is by delaying the fulfillment of this responsibility. As a tactic of avoidance, delaying functions by constantly deferring action. Delaying tactics are employed to make things move slowly to gain an advantage. We can avoid a task or decision, for example, by delaying the moment of deciding or carrying out a task. Delaying something does not yield the same benefits as delegating it, because the decision or task remains ours, but it does allow agents to skirt "sticky" responsibilities temporarily. It is often important to those who are doing the delaying to emphasize that they are not denying someone's right to access or invalidating the importance of ensuring accessibility. Access is treated as something that will happen someday, sometime, eventually, in due course, and when the timing is right. As this section will show, delays that keep disabled people waiting for

access can have devastating consequences. By constantly putting off accessibility for a different time and place, people and institutions avoid taking responsibility for access here and now.

In complex bureaucratic systems, diffuse responsibility and responsibility delays are often connected; they can also be mutually reinforcing. On the one hand, large-scale endeavors that require collaboration between different actors can be delayed because the many actors involved are constantly shifting responsibilities around. Scheduling a meeting, agreeing on a course of action, or getting a project off the ground and running typically takes longer when more parties are involved. On the other hand, delays can themselves generate greater diffusion because, as time passes, some new actors are introduced while others disappear. Bringing new people up to speed about a problem that needs urgent solving takes time. It can require getting in touch with someone who previously worked on this problem but now works in a different building, department, company, or institution. Delays and diffusion often work together to limit disabled people's access to lifesaving care provisions and social safety net programs.

Slow-moving bureaucratic processes are breeding grounds for responsibility delays and diffusion. Many disabled people are familiar with the reality of accessibility requests getting lost, falling between the cracks, or remaining "stuck within bureaucracy" (Apelmo and Nordgren 2021, 118). Interviews with disabled Americans who have navigated programs such as Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) reveal that countless administrative barriers make accessing the resources offered by these programs extremely difficult. A major reason why navigating these programs "drains [disabled] people's time, energy, and physical and mental well-being" (Schweitzer et al. 2022) is that the application process is never-ending and assistance is constantly deferred. Interviewees report spending years working on applications that ultimately get rejected, after which they are "left to work through similarly long and strenuous appeals processes" (2022). As one interviewee

explains: "Almost everyone, from what I hear, is rejected on the first time that they apply. It's almost as if they just wanted to see if you're really serious" (2022). Another interviewee describes their experience as follows:

Four months after I applied, I was sent to the Social Security-chosen doctor for the consultative exam. Six months after I applied, I got my first denial. I appealed. My second denial came 10 months on from my date of application, and we requested a hearing a year and five months in. We received a hearing date, which was a year and eight months in; had the hearing, which was absolutely miserable; and then, a year and nine months in—luckily, less than a month after the hearing, which I think is a lot faster than some folks—I was notified that the judge had approved me. Then, it took six months between hearing that the judge had approved me and receiving backpay (2022).

Despite the laborious nature of their trajectory, this applicant is one of the lucky ones. In recent years, roughly two-thirds of SSDI applications and half of SSI applications were denied (Social Security Office of Retirement and Disability Policy 2020; 2021). 8,000 applicants declare bankruptcy each year, and 11,000 of them die while awaiting a verdict on appealed decisions (Schweitzer et al. 2022). Delays do more than just keep disabled people waiting. They force many people to endure untenable living and working conditions. Carel and Kidd report a series of cases of suicides and suicide attempts linked to interrupted social benefits in their discussion of institutional opacity. Among these is the case of Philippa Day, a British disabled woman who took her life when her benefits were withdrawn after she fought for months to have them reinstated. An inquest following her death found that administrative errors by the Department for Work and Pensions and its contractors led to the mishandling of her case (P. Butler 2021). Day's family was compensated by a government contractor for the systemic errors and negligence that led to her death. A party was found liable for her death, but institutional procedures have not substantially changed, and the administrative barriers Day faced remain in place. Having to wait several months, and in some cases years, to receive benefits or reverse benefit denials remains the norm.

Bureaucratic processes can also be drawn out slowly in the hope that complainers will run out of steam. Michael Lipsky's (1980) influential study of street-level bureaucracy shows that time plays a key role in how public agency workers monitor interactions with clients and ration service provisions. Lipsky argues that time costs can be wielded as tools for reward and punishment: clients are rewarded when services are sped up and punished when they are delayed (90). Time costs can also function as a deterrent for complainers. Agencies can impose constraints on how complaints or requests should be submitted (e.g., by phone, fax, mail, or email) to discourage "complainants who would protest if it were easier" (90). Various delaying tactics can be employed by organizations to suppress inconvenient complaints and get rid of the just as inconvenient people formulating them. Administrative delays, whether they are intended or not, shift the responsibility for access onto the shoulders of disabled people.

Miyoko, a faculty member interviewed by Margaret Price and the Disabled Faculty
Study, reports how she faced an exhausting thread of email exchanges when formally
requesting accommodations from her university's human resources department.

Misunderstandings on the part of the university repeatedly slowed down this process. One of
these misunderstandings involved Miyoko's request to change her teaching load from 3/3
(three courses taught in the fall and three in the spring) to 2/2/1/1 (two courses in the fall, two
in the spring, and two over the summer). Miyoko recalls the absurdity of having to write a
letter explaining to university administrators that both course loads amounted to the same
overall number of courses taught. Eventually, the stress and effort involved in navigating this
process led Miyoko to leave her tenured position. Slow responses, drawn-eeout exchanges, and
feigned incompetence wear disabled people down, as they would anybody. These delaying
tactics are especially exhausting to a person when she knows that they reflect the fact that she
is perceived as a burden and treated as a problem. When a disabled person leaves the

institution—because her contract has not been renewed, because she is denied tenure, or because she can no longer tolerate institutional ineptitude around accessibility—her disappearance "removes both the need for accommodation and any trace of its history" (Price, 272). In the end, both Miyoko and her need for access disappeared from the record. Miyoko's departure allowed the university to avoid having to offer her an accessible teaching schedule.

Built-in protections for accused parties under the ADA allow actors to delay taking responsibility for access. I mentioned in the introduction that the ADA does not have an enforcement agency and instead encourages a culture of self-regulation around accessibility standards. This means that disabled people are responsible both for identifying failures of compliance and for filing accessibility complaints to ensure that these failures are addressed. In addition to placing an undue burden on disabled individuals, this process encourages entities to adopt an entirely reactive approach to the enforcement of accessibility standards. The efficiency of this process has been further undermined by the adoption of the ADA Education and Reform Act (H.R. 620) of 2017, which specifically targets Title III of the ADA regarding access to places of public accommodations like grocery stores, movie theaters, doctor's offices, places of recreation, and day care centers. The amendment enforces a notice and cure requirement that protects private entities from civil lawsuits and burdens victims of discrimination. Under this amendment, disabled people who face architectural barriers must provide businesses with a written notice describing in detail what sections of the ADA have been violated, whether they already requested assistance from the business to remove this barrier, and whether the barrier is permanent. Once they receive this notice, businesses are given an initial 60 days to respond to it and an additional 120 days to demonstrate that "substantial progress" has been made in addressing the issue. This means disabled plaintiffs must wait almost six full months before being allowed to take legal action. For businesses, this amendment eliminates any incentive to

proactively comply with accessibility requirements and address complaints in a timely fashion. Because the notion of substantial progress is only vaguely defined, businesses can continually defer the actual removal of barriers if they can show that they are making satisfying headway toward this goal. The American Civil Liberties Union has firmly denounced the adoption of this amendment, arguing that its "true purpose [...] is to allow businesses to delay meeting their obligations under the law–for weeks, months, or longer at the expense of people with disabilities" (American Civil Liberties Union 2017). By allowing businesses to delay meeting their legal obligations, this new amendment enshrines their right to delay the implementation of accessibility measures. The amendment undermines the very purpose the law is intended to serve and places the burden on disabled people to wait for access, once again.

There is another important way in which the responsibility for access can be avoided by being delayed. This way of delaying responsibility is more subtle, but it is important to identify at a time when more and more actors (e.g., universities, governments, and even large corporations) are turning to accessibility talk to promote an image of themselves as modern, progressive, and socially responsible. Let me offer an example of what I have in mind. Imagine a school announcing an ambitious project to build a state-of-the-art accessible classroom featuring cutting-edge technology that enables multimodal learning. The school plans to invest thousands, perhaps even millions of dollars into this ambitious ten-year project. Local newspapers pick up the story and praise the school for investing in future generations of teachers and students. While the public's attention is trained on this news, the current needs of disabled people at this school remain unmet. When they bring up access concerns to the administration, disabled people are told they must be patient. They are reminded of the state-of-the-art classroom and asked to stop complaining. In this type of scenario, access responsibilities are avoided by framing access as something that can only ever happen in the

future. What nondisabled people imagine that disabled people will need in the future takes precedence over the actual needs of disabled people in the present. It is much less convenient to deal with the messiness and complexity of actual demands for access than to promote (and, most likely, perpetually delay) plans for a state-of-the-art classroom. Creating access for the future is important. However, we should be wary of ambitious promises of future accessibility that function as a smokescreen allowing actors to avoid taking responsibility for access in the present.

Because they prioritize "flashy" innovation over demonstrated effectiveness, ambitious plans to create accessibility in the future are often out of sync with the actual needs of real disabled people. In the example I offer, the school's plan to build a state-of-the-art classroom might function as what disability activist Liz Jackson (2022) calls a Disability Dongle: a design or technology that offers solutions to problems nondisabled people imagine disabled people to have. In 2019, The New York Times published an article on researchers exploring how Google Glass, a brand of smart glasses developed by the company, can be employed to teach autistic children how to maintain eye contact. Rather than identify neurotypical norms of communication as the problem, the article and research project frame smart glasses as a solution to the problem of neurodivergence, thereby reinforcing ableist norms and further marginalizing autistic children without access to this technology. Jackson writes: "To the disabled users they are ostensibly designed for (or "with") [disability dongles] are at best speculative: promising in concept but practically unattainable" (2022). The fact that they are practically unattainable for disabled people is considered irrelevant because Disability Dongles have a futuristic edge that "appeal s to the abled imagination" (2022) in tech-obsessed societies. The general hype around Disability Dongles is a manifestation of technoableism, which Ashley Shew (2023) describes as the belief that "technology will 'solve' the problem of

[disability] and save [disabled people]" (7). Many technologies are essential to disabled people's everyday lives. The harmful assumption driving technoableism is not that technology can improve some disabled people's lives; it is that technology can rid us of disability, and that this would be a good thing. Investing in technologies that purport to increase accessibility without consulting disabled people about whether these technologies would in fact make their world more accessible is a waste of resources. It is also insulting to disabled people everywhere who are trying to get their most basic accessibility needs met. Fancy gadgets and technologies are much more profitable to advertise for developers, business owners, corporations, and institutions than a 'boring' ramp. These investments are "pitched as inspirational" (smith 2019) to largely nondisabled publics. For most disabled people, access does not look like signing gloves, stair-climbing wheelchairs, and other unsafe, expensive, and ineffective gadgets. It looks like subsidized housing, universal healthcare, ASL interpreters, ramps, and functioning elevators. "Techno-utopian" (Jackson 2022) plans to create seamlessly accessible futures gloss over the barriers faced by disabled people today and leave their most urgent needs unmet.

VI. Conclusion: Radical Change Is What We Need

Together, the last two chapters painted a portrait of how responsibilities for access are currently distributed (and, just as importantly, avoided) in contemporary society. Under current responsibility arrangements, disabled people are expected to assume the responsibility for access largely alone, while nondisabled people and institutions deploy constantly evolving strategies to avoid taking responsibility for access. Existing practices of responsibility exacerbate social inequalities and promote unjust social arrangements. Disabled people pay a heavy price for the myriad forms of irresponsibility displayed by more privileged actors in the world around them. Being forced to carry the weight of access seriously compromises disabled

people's physical, emotional, and mental well-being, their relationships, and their ability to flourish.

The fact that strategies of responsibility avoidance around access as so uncontroversial and commonplace should concern us. If addressing an issue requires different kinds of efforts from different kinds of actors, and some of these actors are constantly finding ways to avoid taking any responsibility, we are bound to face considerable problems. Young is right to point out that "collective action is difficult" (153). It is challenging for more reasons than I can enumerate, but one of these reasons is that people and institutions would often rather "distance [themselves] from responsibility" (169) rather than assume responsibility. Many privileged agents benefit from the forms of responsibility avoidance analyzed in the last chapter. They have a vested interest in preserving the status quo by preserving existing responsibility arrangements.

In the face of this problem, what should be done? Stricter regulations and legal sanctions might motivate actors to take responsibility for access, but regulations and sanctions are often easy to circumvent for powerful agents, and they ultimately target only minimal compliance with accessibility laws. As I have argued throughout this project, compliance-based approaches to access guarantee only the bare minimum of access in society; they do not yield meaningful access for disabled people. The work of transforming practices of responsibility around access to ensure that disabled people do not carry the weight of access calls for a radical change in our way of thinking about and viewing access as a society. To transform existing practices of responsibility, we must revise the narratives of responsibility that bolster these practices. The conclusion to this project examines this suggestion in more detail and considers how we might go about sharing the responsibility for access.

Conclusion

I. Crafting New Stories and Practices

We often feel as though existing responsibility arrangements are set in stone and find it difficult to imagine them being otherwise. This is the case with existing practices of responsibility around access in our societies. The fact that disabled people must assume the responsibility for access everywhere they go and in everything they do is perceived as an objective constraint, rather than as a socially constructed requirement that hinges on how we organize our societies. One reason for this is that we typically *live through* these responsibility arrangements rather than explicitly reflect on and evaluate them. Even though they deeply shape our lives and relationships, dominant responsibility arrangements are taken for granted and left unexamined. Several forces conspire to make our practices of responsibility seem evident and unavoidable even when they produce unjust outcomes.

In reality, our practices of responsibility are not immutable. A re-organization of existing responsibility arrangements is always possible. Instead of accepting them at face value, we can challenge responsibility arrangements that generate unjust or harmful outcomes and consider how we might go about transforming them. In her constructivist account of morality, Walker argues that the background understandings reflected in our practices of responsibility—understandings about such things as "who gets to do what to whom and who must do what for whom, as well as who has standing to give or to demand accounts" (Walker 2008, 11)—can, and, indeed, *should* be submitted to critical scrutiny. Walker maintains that "patterns of ascribing and deflecting responsibility are socially shaped and differently shapeable" (99). Responsibility arrangements that are sustained by "coercive power, or duplicity, or manipulation" (11) are especially ripe for critical consideration. My efforts in Chapter 3 and 4 aimed at pressing existing responsibility arrangements around access "toward

transparency" (11) to make visible the outcomes they yield. By exposing their effects, and especially the toll they take on disabled people's lives, I hope to have convinced readers of the urgency of changing them. But how can we go about doing this? How can we, in Walker's words, "try to put people and responsibilities in the right places with respect to each other" (78)? Where do we go from here? We might begin tackling this daunting task by examining what it is we are currently doing and asking ourselves what we wish to do differently and why. Walker stresses the collaborative dimension of this evaluative process, an emphasis that suggests that all relevant parties should be able to participate in deliberations concerning matters that affect their lives. Moral philosophers, Walker argues, are not higher sources of moral authority who can determine alone what kinds of lives we should be living. This is a task that concerns us all, and thus, it requires collective processes of deliberation that will involve differently located deliberators.

While I agree with Walker's emphasis on the need for collective deliberation, I am also concerned with its potential drawbacks. To begin, limitations of time and resources will force many people to absent themselves from collective deliberations about the allocation of responsibilities. As Tronto observes, unprivileged agents who are currently overburdened with responsibilities may find that they have neither the time nor the resources to "be around the table making decisions about the allocation of responsibilities" (56). This is a major problem given that these agents assume the greatest costs and burdens within existing responsibility arrangements, and thus, they are the ones who have the most to lose when these arrangements persist unchanged. Tronto notes that powerful agents can exercise control by "[excluding] the less powerful; this is one of the things that it means to be more powerful" (58). Excluding some people from the process of deliberation is one way of exercising control over its outcome, but it is not the only one. Another way of "[rigging] the outcome of a circle of responsibility [...] is

to absent oneself or one's group from the 'people' whose roles are under discussion in the responsibility-setting game" (58). In this case, less privileged actors must shoulder the burdens of deliberation alone, and they are the only actors whose names are thrown in the hat when the time comes to determine who is responsible for what. Being offered a proverbial 'seat at the table' can become a trap when systemic conditions remain unchallenged. Both exclusions and absences can be strategically used to distort the outcome of deliberations, and thus to "ensure the adequacy of the democratic process [we must make] certain that people neither absent themselves nor exclude others from" (63) deliberations.

Second, it is not the case that anyone who takes part in public deliberations can tell their story and be taken seriously. The structural forces that conspire to make dominant responsibility arrangements seem evident and unavoidable also work hard to silence critiques of them. The forms of epistemic marginalization to which disabled people are subjected in ableist societies make it especially challenging to formulate such critiques and to ensure that they are valued. Disabled people living in ableist societies are subjected to systemic forms of epistemic prejudice and denied epistemic agency (Ho 2011; 2022; Scully 2018). Excluding disabled people's knowledge and experiences is a sure way to preserve existing responsibility arrangements around access. Moreover, ableist expressive norms and standards of intelligibility affect disabled people's ability to be understood in spheres of public deliberation (Afsahi 2020; Catala 2015; Knight 2015; Raisio, Valkama, and Peltola 2014; Schramme 2021). Questions of access are interwoven with these concerns. Democratic deliberation requires that all members of a community be given the opportunity to express themselves and to be heard, but this necessarily requires ensuring communicative access for disabled people who do not communicate in normative ways. Deliberations about the allocation of access responsibilities must themselves be accessible for disabled deliberators.

Paradoxically, disabled people's access knowledge is both exploited and invalidated in contemporary society. On the one hand, disabled people are constantly expected to teach nondisabled people and institutions how to make their conferences, concerts, websites, and workshops accessible, most often without receiving any pay or formal acknowledgment for this work. On the other, disabled people's claims about access are often treated with suspicion or ignored altogether. This type of invalidation is incredibly harmful to disabled people, but it is also a loss for nondisabled people. Disabled people hold invaluable insights into what it would take to radically transform the world we live in to make it more accessible for people with constantly evolving and incredibly diverse bodies, minds, needs, and capacities. Those of us who have the chance to experience disabled friendships and community know that, under favorable conditions, the work involved in creating and navigating access can be joyful, rewarding, and relationally enriching. Every day, disabled people are practicing forms of access that challenge dominant narratives about access in our societies. Disabled people have many access stories to tell that would blow nondisabled people's minds because they disrupt the assumption that having accessibility needs is shameful or that ensuring accessibility can never be anything other than an inconvenience. By learning from these stories, nondisabled people might come to think differently about themselves and the world around them, becoming newly aware of the vast network of interdependencies that makes it possible for them to exist and thrive as embodied beings. Disabled people's stories, perspectives, and experiences—especially those of multiply marginalized disabled people who have intimate knowledge of the different systems of oppression that intersect with ableism—must be at the heart of this project.

Disabled people have already begun the work of developing new practices and narratives of responsibility. In contrast with our society's current treatment of access responsibilities, proponents of disability justice, an intersectional political movement for

disability liberation pioneered by queer and trans disabled people of color, call for a radical reconceptualization of access in collective terms. Disability justice scholars and activists conceptualize access as a shared responsibility, rather than as a private responsibility to be assumed by disabled people. On this view, the creation of meaningful access is something that concerns all of us, not than just a handful of disabled people left alone in their corner of the room. As Mia Mingus explains it, shifting how we frame the responsibility for access ultimately shifts our vision of access itself: "access shifts from being silencing to freeing; from being isolating to connecting; from hidden and invisible to visible; from burdensome to valuable; from a resentful obligation to an opportunity; from shameful to powerful; from ridged to creative" (Mingus 2017). Instead of a checklist of things to do, access becomes a space of connection and possibility. This way of reconceptualizing access is transformative, both for disability politics and for how we collectively imagine what sharing the world with others involves and asks of us. Sharing the responsibility for access releases disabled people from the shame, isolation, and indignity associated with the process of navigating access in ableist societies. Within a disability justice framework, both practices and narratives of responsibility around access are radically transformed.

Taking inspiration from the political activism and intellectual insights of disability justice scholar and activists, I suggest that recognizing access as a shared responsibility for disabled and nondisabled people is key to achieving meaningful access in contemporary society. To make sense of this proposal, however, we must broaden our understanding of responsibility.

II. Sharing Responsibility for Access: Some Guiding Coordinates

In recent years, a growing number of scholars, many of them feminist theorists, have raised questions about the limitations of conceptions of moral responsibility that hold individual

agents responsible for the harms they have caused (Gilson 2022; Lin 2024; McKeown 2021; 2024; Young 2011a; Zheng 2018; 2019). These accounts of responsibility fall short when the time comes to address some of the most urgent issues (and responsibility gaps) our societies face today, such as housing insecurity, healthcare disparities, climate change, systemic racism, or the ongoing legacy of settler colonialism. How do we determine who is responsible for addressing wrongs that are not "rooted in the malicious intent of an individual or [in] intentionally discriminatory policies or practices" (Parekh 2017, 620)? How must we, as individuals, understand our responsibility in the face of injustices that unfairly constrain the opportunities available to some people while benefiting others? In the case that concerns us, who is responsible for addressing the problem of systemic inaccessibility? Who are we justified in holding responsible for the task of creating meaningful access?

Young's discussion of responsibility in *Responsibility for Justice* has played an influential role in these discussions and inspired many debates since its publication. Tracing a parallel between moral and legal forms of reasoning, Young argues that our most common approach to responsibility aims to establish "guilt or fault for a harm" (2011, 97). What Young calls the liability model of responsibility assigns responsibility to agents for harms they have directly and voluntarily caused with sufficient awareness of the consequences of their actions. Given its focus on identifying responsible individuals— "the liable ones" (98)—, the liability model creates a neat distinction between guilty and innocent parties. Within this model, practices of assigning responsibility "are generally backward looking in their purpose" (98). Attributions of responsibility seek to identify "the specific culprits or liable parties who should make restitution" (109) for harms that have occurred.

While this model of responsibility is valuable in some contexts, it is ineffective in others. For one, this approach places stock in the idea that agents are responsible for harms they have

intentionally and willingly caused. This is a problem given that various forms of social privilege insulate powerful agents from forms of awareness that could generate responsibilities for them. The perpetuation of many forms of structural injustice requires the inattention, indifference, and ignorance of powerful agents. Moreover, many of the downstream consequences of our actions in complex social systems elude us completely. This can be due to willful forms of ignorance, but it is just as often because it would be practically impossible to keep track of all of them. Most centrally, Young argues that structural injustices do not lend themselves to ascriptions of praise or blame. They are incompatible with a "who dunnit" (95) strategy for assigning responsibility because no individual agent can plausibly be held liable for them. Structural injustices are reproduced daily by "thousands or millions of persons" (95) whose individual actions do not strike us as morally abhorrent because they are acting in accordance with "normally accepted rules and practices" (100). They are the unintended result of large numbers of people acting within structures they have not themselves devised or designed.

While no single person directly and deliberately produces these injustices, individual agents contribute to perpetuating them "indirectly, collectively, and cumulatively through the production of structural constraints on the actions of many and privileged opportunities for some" (96). Through our everyday actions and decisions, we are all implicated to varying levels in structural processes that generate unjust outcomes. The belief that we could ever extricate ourselves entirely from these interlocking structures is a move to purity that conceals the extent to which our lives are enmeshed in them. We may not be individually blameworthy, but

this need not mean that we bear no responsibility whatsoever.⁶ As Young reminds us, holding someone responsible does not always "imply finding [them] at fault or liable for a past wrong" (104). We can also hold each other and ourselves responsible for bringing about desirable outcomes. To assign responsibilities in this sense, however, we need a supplementary model of responsibility.

Young's suggestion is a model she names the social connection model of responsibility (SCM). As its name indicates, the SCM emphasizes how all of us are connected to the reality of structural injustice in our societies. Young argues that we need not relinquish talk of responsibility simply because no "particular [agent] [...] can be shown to be causally connected to the circumstances for which responsibility is sought" (97). The type of responsibility Young is after does not derive from a causal connection to harm. Instead, her claim is that "all those who dwell [in unjust structures] must take responsibility for the harms they cause, though none is specifically liable for the harm in a legal sense" (105). Responsibility under the SCM derives from "belonging together with others in a system of interdependent processes of cooperation and competition through which we seek benefits and aim to realize projects" (105). We are responsible for transforming unjust structures and processes by virtue of our connection to them.

In developing the SCM, Young takes issue with the view that harm is always "a discrete, bounded event that breaks away from the ongoing normal flow" (107) of things.

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⁶ Young's suggestion that individuals are *not* morally blameworthy for structural injustice has been criticized by many of her commentators. Maeve McKeown unpacks Young's comments to this effect and finds that, on Young's view, we are not morally blameworthy for structural injustice "due to a lack of intent, which is demonstrated by two excuses: inadvertence and constraint" (McKeown 2024, 120). I refer readers to McKeown's work for a detailed discussion of Young's position.

Think, for instance, of the way sexual violations or police shootings are treated as abnormal deviations in an otherwise uncorrupted moral and social order. When disruptions occur, we are quick to isolate and denounce the actions of a few bad apples. Doing so allow us to avoid considering the conditions that enabled (and perhaps even encouraged) their actions, as well as our own role in reproducing these background conditions. In contrast, Young encourages us to bring to the foreground of our awareness the tacitly accepted background conditions that structure our lives and relationships. An account of responsibility that extends beyond mere liability asks that we consider the background conditions that make our participation in the reproduction of structural injustices appear ordinary and unavoidable. If "[most] of us contribute to a greater or lesser degree to the production and reproduction of structural injustice precisely because we follow the accepted and expected rules and conventions of the communities and institutions in which we act," (107) then these norms and conventions must be re-evaluated.

Although Young clearly states that "[any] attribution of responsibility carries plural temporalities" (108), she notes that the SCM's temporal emphasis is primarily *forward*-looking. While the liability model seeks to assign responsibility for "an isolatable action or event that has reached a terminus" (108-109), the SCM concerns itself with injustices that ongoingly shape social relations and "[are] likely to persist unless social processes change" (109). Young emphasizes in many places the idea that the SCM's purpose is not "guilt-finding, or fault-finding" (108). It is, quite literally, to change the course of history. Without collective efforts aimed at disrupting them, structural injustices will persist unchanged. The SCM directs our attention toward the work that remains to be done to "reduce and eliminate" (110) injustices caused by structural processes in the world around us.

Finally, Young explains that this responsibility concerns all of us. In contrast with the liability model, which distinguishes between liable and absolved parties, the SCM offers no exemptions. The responsibility for structural injustice is a responsibility shared by "all those who contribute by their actions to the structural processes that produce injustice share responsibility for those harms" (109). Young explains that "a shared responsibility is a responsibility I personally bear, but I do not bear it alone. I bear it in the awareness that others bear it with me" (109-110). While it is a distributed responsibility that it calls on each of us individually to act, this responsibility cannot be discharged in isolation. Since all of us contribute through our daily actions to the reproduction of large-scale injustices, it follows that we must "[join] with others in collective action" (111) to change institutions, practices, and processes that generate unjust outcomes. The task at hand requires the involvement of "many actors from diverse positions within the social structures" (111). No single agent can change the world alone.

How do we know what is required of us and of others? No doubt in part because her work on this topic was cut short by her death, the answers Young provides to this question is rather thin. Claiming that "responsibility is more discretionary than duty" (144), she argues that "[it] is up to the agents who have a responsibility to decide what to do to discharge it within the limits of other moral considerations" (143). In other words, we ought to act in the face of injustice, but it is up to us to determine how to do so. Instead of a set of explicit guidelines, Young offers readers guidance in the form of "parameters of reasoning" (144). These parameters reflect Young's conviction that agents occupying different social positions have "different kinds and degrees of forward-looking responsibility for justice" (144). They include the power or influence we hold over structural processes, our relative privilege in relation to

them, our interests relative to the responsibility for justice, and our ability to draw on the resources of organized entities we are a part of.

The reason I present the SCM model is not because I think it is necessarily the best or the only way of framing our shared responsibility for access.⁷ Making this claim would require a much longer discussion of this model's benefits and potential shortcomings, a task I reserve for later work. What I wish to retain from Young's account is the idea that we are responsible for more than the direct results of our actions and decisions (although this sense of responsibility is crucial, too). No single agent is individually to blame for the systemic forms of inaccessibility experienced daily by disabled people. But this does not mean that we are not responsible to varying degrees for changing the world around us so that it is more livable for people with different kinds of bodies and minds. Because "we are all, collectively, the social architects of our common social life" (Gorman 2024, 417), we bear some responsibility for building a more accessible world. Claiming that access is a shared responsibility that involves disabled and nondisabled people does not negate the importance of legal responsibilities for providing access. We should work to safeguard laws that protect disabled people's right to social participation, all while pressing at the seams of legal frameworks to consider who is consistently left behind by them. The notion of shared responsibility I have in mind only expands our understanding of who can be held responsible for access, when, and where, as well as what kind of access we are responsible for creating.

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⁷ Robin Zheng (2018) has offered a convincing critique of the SCM and developed an improved model of responsibility she calls the "Role-Ideal Model" (RIM). As its name indicates, the RIM argues that our responsibility for injustice is best understood through the lens the social roles we occupy (e.g., parent, teacher, citizen, nurse, or spouse).

There is no blueprint available that can determine in our place who should be held responsible for what access responsibilities, in what way, and to what extent. In line with Young's framing of shared responsibility, my intuition is that while all of us are responsible for joining with others in demanding structural changes and organizing for disability and social justice, doing so will look very different for different people and involve different kinds of interventions on different scales. At a macro level, this can involve things like working to expand voter access for disabled people, supporting legislation that would streamline access to social programs, protesting budget cuts to these programs, joining a grassroots disability organization, or boycotting inaccessible events. On a smaller scale, taking responsibility for access involves working to develop the relational skills and capacities required to listen to (other) disabled people's claims of injustice, learn from people with different and potentially conflicting points of view, accept that we will make mistakes, and hold each other accountable for materializing our commitments to creating meaningful access. Without neglecting our most ambitious, long-term goals, I hope we can begin this work now.

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