

Understanding Privilege Through Ableism

“No one’s handed me anything. I’ve worked hard for what I have.”

This chapter explains the privileges automatically received by being a member of the dominant group. From a critical social justice perspective, privilege is defined as systematically conferred dominance and the institutional processes by which the beliefs and values of the dominant group are “made normal” and universal. While in some cases, the privileged group is also the numerical majority, the key criterion is social and institutional power. This chapter also extends the discussion of related concepts such as “internalized oppression” and “internalized dominance,” and offers examples of how these dynamics work to hold existing relations of power in place.

Vocabulary to practice using: internalized dominance; internalized oppression

A female prime minister was strategizing with her all-male cabinet about how to address a string of recent sexual assaults on women throughout the city. Someone suggested a 9:00 p.m. curfew, which the cabinet thought was a good idea. The prime minister also nodded her head in agreement, “Yes. No men will be allowed out after 9:00 p.m.” Her cabinet was shocked and said that was unfair, it was women who should stay in after 9:00 in order to ensure their safety. They only had the best interest of women in mind, they insisted, and the curfew was for their own good. The prime minister replied, “It is men who are committing these assaults, not women. Why should women’s movements be restricted?”

Imagine from a woman’s perspective what it would be like to walk freely throughout a city at night with no fear of sexual assault from men. But also notice whose movements are assumed to need restricting and who would be blamed for being in the wrong place at the wrong time were an assault to occur. In Chapter 5 we discussed the relationship between dominant and minoritized groups. In this chapter, we examine a key aspect of that relationship for the dominant group: privilege.

What Is Privilege?

The academic definition of *privilege* used in critical social justice may be different from how our readers know the word in everyday usage. Consider by way of analogy how most people use the word *average* to mean ordinary. In contrast, mathematicians would use the term average to specifically describe the mean, median, or mode of a series of numbers. In mathematical usage the average is the sum of all the numbers divided by the total number of items (the mean), the number in the middle when a series of numbers is ranked lowest to highest (median), or the number that occurs the most frequently in a series (mode). As you can see, while the lay usage (“ordinary”) may be loosely related, the mathematical usage has much greater specificity.

Similarly, the lay usage of *privilege* means to be *lucky*, to have *fortunate* opportunity and to benefit from this luck and opportunity. These definitions suggest that privilege is a positive outcome of happenstance. However, when academics use the term in describing how society works, they refer to the rights, advantages, and protections enjoyed by some at the expense of and beyond the rights, advantages, and protections available to others (Kimmel & Ferber, 2016; Johnson, 2006). In this context, privilege is not the product of fortune, luck, or happenstance, but the outcome of advantages some have and others do not. Because dominant groups occupy the positions of power, their members receive social and institutional advantages; thus one automatically receives privilege by being a member of a dominant group (e.g., cis-men, Whites, heterosexuals, the able-bodied, Christians, upper classes).

In Chapter 3 we described our immersion into our cultural socialization as similar to a fish immersed in water. While the fish is moving through the water, the water is also moving around the fish. Even when the fish is simply floating without expending effort, currents still affect its movement. When you are swimming in open water, your outcome (where you end up and how long it takes you to get there) is not determined solely by the effort you expend, but in larger part by the particular current you are in.

If the water is moving *against* you rather than with you, the amount of effort it takes to move forward is enormous. Yet this effort results in only the smallest increments of advancement. On the other hand, if the current is *with* you, swimming is almost effortless. With minimal effort, you can quickly travel a great distance and are seldom aware of the current at all (we are much more likely to be aware of the current when we have to swim against it). Privilege is like having this powerful current propelling you forward throughout your life.

While this metaphor may be useful for understanding privilege, we do not want to reinforce the idea of privilege as natural or an outcome of luck and happenstance; privilege is neither. Privilege is socially constructed to benefit members of the dominant group. Further, structures of privilege are not just artifacts of a racist, sexist, or classist past; privilege is an ongoing dynamic that is continually

reproduced, negotiated, and enacted. An example is *The Bell Curve* (Herrnstein & Murray), a bestselling book published in 1994 that argued that there were genetic differences in intelligence among racial groups, a perspective that is in line with the scientific racism that legitimized the enslavement, extermination, genocide, and colonization of racialized groups around the world. Geneticists have debunked this “fact,” yet books such as these continue to be published and widely read (Gould, 1981/1996; Nisbett, 1998).

Another more recent example is the research into the “causes” of homosexuality and how that research is used to justify the denial of privileges and opportunities to same-sex partners and gay and lesbian people. Still another is the immensely popular writing of Ruby Payne (2005), who promotes the idea of a “culture of poverty.” She argues that those who are at the bottom of society are there because they are culturally deficient—that is, they lack the attitudes or work ethic necessary to “get ahead” in society. Perspectives such as these are sometimes referred to as *cultural deficit theory*.

In this chapter we want to unravel two interrelated dynamics that are central to understanding social and institutional privilege: the *external and structural* dimensions and the *internal and attitudinal* dimensions. We will use the example of ableism to examine how these dimensions of privilege play out.



Cultural Deficit Theory: The explanation that minoritized groups do not achieve in society because they lack the appropriate cultural values (e.g., “They just don’t value education”) or because their culture is deficient in some other way.

External and Structural Dimensions of Privilege

Are you left-handed? If so, you may notice how left-handed people are marginalized by social norms: the desks in classrooms, the shape of scissors, the locations of buttons on carry-on handles, a camera’s shutter release button, and even the standard way one is taught to strum a guitar or swing a hockey stick. It is possible that you may not have noticed these things, or perhaps they don’t seem significant to you, even if you are left-handed. It may even be the case that left-handed people prefer to use these “normal” tools, having become used to doing things “backwards.” And perhaps there are some right-handed folks who, just for fun, like to use lefty tools to see how it feels for a while. Yet it is still the case that only right-handed people have automatic *structural privilege* (i.e. unearned advantages)—because they were born right-handed in a social world that was designed for people like them.

Moving on from left-handedness to consider a case with higher stakes, think about how ableism operates (*ableism*: the oppression of peoples with disabilities).

Those of us whose bodies fit the fluid social category called “normal” can go through entire days, weeks, and months never having to consider (for example the physical) barriers that limit access to our environment. How we will get to a certain event, whether we can enter a building, or how we will be seated at the coffee shop, can all be taken for granted. Even if a building is considered accessible, there is often only a single entrance providing access to a limited part of the space, such as the top of a large lecture hall. Such limits segregate people who use wheelchairs or other tools for mobility. They would likely have the worst view and difficulty hearing the questions posed to the speaker, and would have difficulty being heard or seen were they to pose questions. Those of us who are able-bodied can take access for granted because the social and physical environment was set up to accommodate our bodies, giving us social privilege and enabling us to not have to think about life without such “rights.”

“But,” you may wonder, “aren’t there more people *without* disabilities than people *with* disabilities? Shouldn’t social institutions accommodate the majority?” While in some cases the privileged group is also the numerical majority, that is not the key criterion. For example, the following dominant groups do not constitute a numerical majority: Men, the upper classes, and White South Africans under apartheid. The key criterion is institutional power; a focus on numbers hides this reality.

As the example of ableism illustrates, privilege has the following external and structural dimensions:

- The integration of dominant group norms into the structures of society
- The construction of what’s normal and not-normal by the dominant group
- The invisibility of privilege for the dominant group

The integration of group-based norms into the structures of society. As we explained in Chapter 5, oppression is a deeply embedded system that operates on multiple levels at all times. The result of this system is consistent unearned privileges and advantages for the dominant group, regardless of any one individual member’s intentions. As with our male who sympathized with suffragists but still benefited from an androcentric system that granted him the vote (elevating and imposing *his* ideas and beliefs over women’s), intentions are irrelevant to receiving privilege. Even if a male disagreed with denying women the right to vote, and even if a male worked for women’s suffrage, he still lived in a society that automatically granted him privileges that were denied to women.

Similarly, in the example of ableism, since many of the things taken for granted as basic rights for able-bodied people (such as access to buildings and transportation) cannot be taken for granted by people with disabilities, they become privileges for the able-bodied. It is not necessary to do anything in order to receive these privileges; it isn’t even necessary to agree that we should receive them.

Simply as a result of living in a society that defines some bodies as normal and some as abnormal, and then devalues the abnormal, those defined as normal (the dominant group) gain unearned benefits. Having always had these benefits, we come to see them as natural, inevitable, and something to which we are entitled (if we see them at all).

As an example of the structural integration of dominant norms, consider how cities and towns are designed. Prior to the 1990s, curb cuts (the place where the sidewalk slopes to the street), or tactile paving (textured surface to assist the visually impaired) did not exist. For able-bodied people, the need for curb cuts would not cross our minds—we can simply step up or off the curb. But for people with limited mobility, or who use wheelchairs or other technology, the absence of curb cuts severely limits access. Because a basic component of oppression is segregation between the dominant and minoritized groups, people with disabilities were not “at the table” and therefore their perspectives and interests were missing from the city planning decisions that so profoundly affect their lives. For many cities, the incorporation of curb cuts into city planning became law only with the enactment of the Americans with Disabilities Act (ADA) of 1990. This simple change in structure opened the physical environment to people with disabilities in profound and life-changing ways. Yet it took decades of activism from people with disabilities and their allies to get the ADA passed. Since then, cities have come to see that curb cuts are beneficial not only to people with disabilities, but to the elderly, the very young, people pushing strollers, bicyclists, and many others (however, the ADA is not consistently enforced and many buildings remain inaccessible).

The construction of what's normal and abnormal by the dominant group. In Chapter 3 we introduced the concept of social construction using the example of sex and gender. In the context of ability, there is a similar process of social construction. For example, while it is true that biological variance among humans exists, the *meanings* of particular biological differences are socially constructed. Consider this question if you wear glasses: At what point in the spectrum does your weak vision move from being perceived as a relatively insignificant biological variance that requires the socially accepted technology of eyeglasses, to being a significant variance (a disability) that requires your segregation from other children in schools and legal policies to protect you from discrimination?

Now take a moment to imagine what you consider a normal body. Perhaps you could sketch it out on a piece of paper. Try to describe that body in detail:

- What gender is that body?
- What race?
- What is its age?
- How tall is it?
- What does it weigh in relation to its height?

- Can that body walk? Can that body swim? How does it walk or swim? And for how long, or for what distance?
- Can it see? To what degree? Does it use technology to see (glasses, or intraocular implants)?
- To what extent can it hear? Does it use technology to hear?
- What emotions does that body have? Under what conditions does it show these emotions? How does its presumed gender impact what emotions it shows and under what conditions? Does its race impact what emotions you attribute to it? What about its age?

As you think about these questions, decide at what point this body would no longer be normal. Where in its range of “doing” and “being” and “feeling” does this body cross the line from being a “normal” body to being an “abnormal” or disabled body? If the body can do all of the above, but does them “differently” than most people, do you still consider the body normal? If not, why not?

If you are having trouble pinning this point down, it is because “normal” itself is socially constructed (Campbell, 2012). Normal is the line drawn around an arbitrary set of ideas a group determines as acceptable in a given place and time. For example, in the early part of the 20th century in many parts of the United States and Canada some people were categorized as “feeble-minded.” This was a broad category that included many people considered “Other” including women who had children out of wedlock, vagrants, and immigrants. Those with this classification were in some cases forcibly (and in many cases without their knowledge and consent) sterilized to prevent them from passing on their feeble-mindedness (Grekul, Krahn, & Odynak, 2004; Kline, 2005). Today, a range of learning disabilities that are seen as normal (such as dyslexia) would have been included in the early-20th-century classification of abnormal (feeble-minded). Based on the socially constructed idea of what constituted normal, people’s lived experiences become profoundly different.

As you can see, these constructions are significant, because depending on whether we fall into the normal or abnormal social category, very real privileges are either granted or denied. These privileges are embedded in *definitions* (at what point does a characteristic move from normal to abnormal?), *language* (classifications such as feeble-minded versus dyslexic), *structures* (the way cities and buildings are built), and *systems* of society (legal policies such as forced sterilization or educational segregation).

A powerful yet subtle way dominant group members have received the message that people with disabilities are not important is through the ways these groups have been segregated in major social institutions like schooling, housing, and the workplace. For example, in schools this segregation has been rationalized as necessary because were students with disabilities to be in the main classroom, “normal” students would be slowed down and limited. This rationalization

conveys the powerful idea that the able-bodied have nothing to gain or learn from people with disabilities.

Consider the way classrooms are organized. A single teacher is expected to meet the needs of up to 40 students, often without supports such as classroom aides. This organization makes it virtually impossible to meet the needs of individual students. Therefore, the more alike and conforming students are, the easier it becomes to efficiently teach the group. Thus, with schooling organized in this way (out of the myriad ways it is possible to organize schooling), it becomes logical to remove children with disabilities from “regular” classrooms.

Even people who support mixed classes often do so in order to “help” children with disabilities, assuming that the flow of knowledge and benefit is always *from* the able-bodied *to* the disabled. This reveals one of the ironies of privilege: Because the dominant group does not see the minoritized group as valuable, the dominant group loses meaningful experiences and relationships. These rationalizations reinforce the idea that the “regular” classroom is a neutral space of equal opportunity, and that the students in this classroom are normal—obscuring the fact that schooling is constructed to accommodate the ways that certain children learn. Labels such as “regular,” “normal,” “gifted,” and “special” shape the policies that social institutions (like schools and medicine) create that maintain this privilege and segregation.

Categories of special education referred to as nonjudgmental include children who are deaf or blind, or who have significant physical or mental disabilities and who come to school with their status identified by medical professionals. Unlike nonjudgmental categories, judgmental categories are based on an individual teacher’s subjective assessments, such as “learning disabled” or “emotionally disturbed.” Consider the subjective nature of the assessment to place students in Special Education versus Advanced Placement or Gifted Education. Figure 6.1 illustrates how a particular characteristic (such as activity level) can be interpreted in very different ways with profoundly different consequences.

In the chart, notice how being perceived as hyperactive is aligned with negative characteristics that are poorly tolerated by the school, whereas being perceived as energetic is aligned with positive characteristics that are welcomed by the school. These judgmental categories are consistently found to have overrepresentation of minoritized students—most



STOP: Many teachers believe that they evaluate each child as a unique individual and that their assessments are independent of race, class, and gender. However, as explained in Chapters 3 and 4, it is not possible to assess anyone outside of our preconceived and often unconscious beliefs about them based upon the groups that they and we belong to. This does not mean that it is impossible to make fair assessments, but that we must not deny that these group relations play a powerful role in what we “see.”

Figure 6.1. Common Subjective Evaluations of Child Behavior

Negative and Abnormal	Positive and Normal
Hyperactive	Energetic
Impulsive	Spontaneous
Distractible	Creative
Daydreamer	Imaginative
Inattentive	Global thinker with a wide focus
Unpredictable	Flexible
Argumentative	Independent
Stubborn, irritable	Committed, sensitive
Aggressive	Assertive
Attention deficit disorder	Unique

Source: Thomas Armstrong as cited in Jawanza Kunjufu, *Keeping Black Boys Out of Special Education* (2005), p. 10.

significantly Black, Latino, and American Indian students (Adjei, 2016; Connor et. al., 2016; Gregory et. al., 2010)

Notice how one's preconceived attitudes toward the child shape which characteristics are attributed to him, and in turn, his schooling experiences and outcomes. Students of Color and Indigenous students are much more likely to be assessed by teachers as exhibiting problematic rather than desirable character traits (Gregory et. al., 2010; Harry, 2007; Harry & Klinger, 2006; Kunjufu, 2005). When you add the demographic of the teachers who make these assessments (the overwhelming majority of whom are White middle-class females) you can see how dominant culture determines what constitutes normal behavior.

The invisibility of privilege for the dominant group. Like the invisible current that is carrying us effortlessly forward, privilege is something we do not need to think about when we have it. Because those in dominant groups are not disadvantaged by the oppression, but in fact benefit from it, they find it fairly easy to dismiss the accounts of members of minoritized groups. Living lives that are segregated (in schools, neighborhoods, workplaces, and social circles), it's also easy to avoid seeing what minoritized group members experience. Further, we are not taught in schools and mainstream culture about the experiences of minoritized groups. This makes it difficult for dominant group members to see oppression, or to believe accounts of it happening to others. In addition to the structural barriers, there are psychological and social investments in not seeing oppression. To see and validate oppression requires that we question a system that benefits us where we are in dominant groups. These investments cause us to resist pressures to acknowledge oppression; where we are dominant, we generally don't like to have our

privilege pointed out (and many of us actively deny having any benefits beyond those equally available to others). Thus simply naming privilege typically causes defensiveness and avoidance. This, of course, is another way that oppression stays in place: dominant group resistance to acknowledging it, and the social penalties meted to those who try to bring it up (Kimmel & Ferber, 2016).

The following are examples of ability privileges that we can take for granted on a daily basis if we are able-bodied:

- There are thousands of recreation leagues specifically set up for us and rarely, if ever, any for people with disabilities. When they are, they are often segregated from the “regular” events.
- We can choose courses by their academic appeal rather than by the building they might be located in.
- We do not have to make extensive travel plans just to get groceries, attend an event at a colleague’s home, or go out to dinner with friends. We don’t need to consider whether the building has ramps, handrails, or adequate lighting.
- We aren’t labeled and segregated into “special” classes, schools, and buses.
- Our segregation isn’t rationalized as necessary in order to avoid “slowing down” people with disabilities. The social paradigm that values competition, individualism, and speed over collaboration, patience, and diversity elevates able-bodied people.

Those of us who are defined as nondisabled will likely not recognize advantages as privileges at all but as simply normal aspects of life. We have been socialized into our position of dominance since birth and have internalized this position as natural. Now let’s consider how the external and structural dimensions of privilege interact with internal and attitudinal elements.

Internal and Attitudinal Dimensions of Privilege

Imagine that you have lived your life in a small, gated community. You are surrounded by family and friends and overall live a happy and healthy life. One day the gates open and you are told that you must venture out and make your way in the larger society. You are excited about the adventure that awaits you and all that you will see and discover.

On the way into the nearest city you stop at a café for lunch and notice people staring at you and whispering. A child points at your head while her mother shushes her, and another child begins to cry and hide behind his mother’s legs. Some people smile at you kindly and offer to help you sit down, while others turn away and ignore you. You ask for a menu and the waitress points it out on

the wall behind you, and with an irritated sigh asks you if you need her to read it to you. You turn around and tell her no, you can see it just fine. When you turn your body, people look away in pity and disgust. As the waitress walks away, you notice that she has a third eye on the back of her head. You are shocked and quickly look around to realize that everyone in the café has an “extra” eye on the back of their heads. Feeling very uncomfortable, you rush through your meal and pay your check. When the waitress returns your change, you hold out your hand but she places it on the counter to avoid touching you.

As you enter the city, the same dynamics occur. Although you occasionally see other two-eyed people, they are usually in service positions, working with their heads down. You begin to feel shame and dread as throughout the day it becomes clear that the three-eyed people see you as abnormal and beneath them. A doctor approaches you and offers to “fix” you. He adds that although the technology to implant a third eye is expensive and dangerous, you might be a good candidate to participate in a university study he is directing on two-eyed people post-implants. You don’t want a third eye; you have done just fine throughout your life and are not interested in becoming “normal” in their terms. You try to explain this to the doctor, but he insists that you would find more social acceptance, which would help you have a better quality of life. “Don’t you want to be normal?” he asks. “We have the technology, why suffer unnecessarily?”

You quickly leave the doctor and enter a sunglass store in the mall. Three teenagers are having fun trying on a range of trendy styles. Although the extra lens at the back isn’t necessary for you, you can still wear them like everyone else does, wrapped fully around your head. You smile, excited by what you see, but as you pick up a stylish “trio,” a saleswoman approaches, takes the glasses out of your hand, and offers you a choice between two “modified trios” while gently patting your arm.

The modified glasses are bulky and unattractive and you don’t want them. The girls stop talking and watch your interaction with the saleswoman. You overhear one of them say, “Oh my god, can you imagine being born like that?” Then one of them calls out across the store, “What happened to you?” At this point you have had enough, so you tell her that nothing happened to you and that she is being rude. Shocked, she replies, “Whatever. I was just asking.” And she says loudly to her friends, “Why are two-eyed people always so angry?” Her friends nod along in agreement. The saleswoman steps in and says, “Dear, maybe you should go,” as one of the teens snaps a picture of the back of your head with her phone, “oh my god this is going to be my costume this Halloween!” Frustrated and near tears, you walk out. The last thing you hear is the saleswoman say, “What on earth was she doing in here anyway?”

To avoid further interactions, you decide to take in a play at the theater, looking forward to the relief of sitting in the darkness. As you purchase your

ticket an usher hands you a white cane and tells you that you need the cane to get to your seat. You realize that although you don't actually need the cane, it does serve the purpose of alerting others to your difference. You sit down and try to read the program but it's written in a way that assumes a third eye; folded in order to be visible simultaneously to you and the person sitting in front of you. As you fumble with trying to figure out the sequence of the text, a three-eyed person sitting next to you glances over and speaking very loudly and slowly asks, "Do you need help?" Feeling insulted, you ignore her.

The play starts and you realize that it is a biographic drama. It takes place in a special community much like the one you grew up in. But although you loved your neighborhood, it is clear that from the perspective of the three-eyed people it is a sad and depressing place. The main actor is depicting a character who has lost his third eye in a tragic accident. The play tells the story of his struggle to come to terms with his "disfigurement." Once considered a handsome and talented young man with his life ahead of him, it is obvious to you that the three-eyed people now see him as ugly and his life as wasted. You begin to feel a sense of shame and sink lower in your seat, hoping others don't notice you only have two eyes. You see that the main actor is actually a three-eyed person concealing his third eye (you later learn that this actor wins an award for his "courageous and inspiring" portrayal of a two-eyed person).

When the play ends, you feel very self-conscious about what the three-eyed people who are the majority of the audience might be thinking about you, and quickly exit the theater. You walk home with your head down, feeling ugly, and begin to wonder if you are losing your mind.

While there is no "three-eyed society" that enacts its privileges in this way, we use this imaginary scenario to illustrate many very real dynamics minoritized groups must navigate every day. These dynamics include both the structural and institutional dimensions discussed earlier, as well as internal and attitudinal dimensions we will discuss below.

Privilege has the following invisible *internal and attitudinal* effects:

- The belief that your group has the right to its position
- The internalization of messages of your group's superiority
- The lack of humility that results from your limited knowledge of the minoritized group
- The invisibility of your privilege to you

Many educators use Peggy McIntosh's (1989) seminal "invisible knapsack" article to explain privilege. In this article, McIntosh lists 46 privileges she takes for granted on a daily basis because she is White. McIntosh's privilege inventory is useful for revealing the invisibility of White privilege for many White people and

captures some of the important layers of internal and attitudinal effects of privilege. In the story of the three-eyed people above, we can see the following internal and attitudinal elements of privilege playing out:

- The privileged group feels comfortable invading the space of minoritized persons.
- The privileged group feels qualified to represent the experiences of minoritized persons.
- Members of the privileged group see themselves as superior and believe that the minoritized person could and should be “fixed” or otherwise assimilate to be like them.
- The privileged group prefers to live segregated from the minoritized group.

The belief that your group has the right to its position. Ideology is a powerful way to support the dominant group’s position. There are several key interrelated ideologies that rationalize the concentration of dominant group members at the top of society and their right to rule.

One is the ideology of meritocracy. *Meritocracy* is the belief that people’s achievements are based solely on their own efforts, abilities, or merits. Meritocracy posits that social positionality doesn’t matter and that the son of a day-laborer has as much chance of “making it” as the son of Bill Gates or the daughter of Donald Trump, as long as they work hard. Canada and the United States are presented in dominant culture as meritocratic systems. From this perspective, those who do not succeed are simply not as capable or don’t try as hard as those who do.

A second related ideology is that of *equal opportunity*. This is the idea that in today’s world, people are no longer prejudiced, social injustice is in the past, and everyone has the same opportunities. In fact, many dominant group members believe that society has swung the needle past center to the opposite end and now unfairly privileges minoritized groups through “special” rights and programs that are denied dominant group members. From this perspective, there may occasionally be isolated cases of injustices, but these are explained away with the “bootstraps” myth—that anyone can pull themselves up by their bootstraps or improve their lot in life by working harder and having the right attitude.

A third related ideology supporting the dominant group’s right to its position is *individualism*—the belief that we are each unique and outside the forces of socialization. Under individualism, group memberships are irrelevant and the social groups to which we belong don’t provide us with any more or fewer benefits. The ideology of individualism explains gaps between dominant and minoritized groups (in education, health, income, and net worth) as the result of individual strength or weakness. Therefore, those at the top are there because they are the best, brightest, and hardest working.

A fourth related ideology is the ideology of *human nature*. This ideology rationalizes privilege as natural—“it’s just human nature; *someone* has to be on top . . .”—and underpins ideas about civilized versus uncivilized societies. Through this ideology, some societies are seen as more “advanced” due to genetic superiority, cultural superiority (holding values and characteristics such as innovation and tenacity), and/or divine forces (such as Manifest Destiny or the Protestant work ethic). Because they are “advanced” societies, they often “help” less advanced societies. Concepts such as “First World versus Third World” illustrate how human societies are ranked and how these rankings are rationalized. Science and religion have historically been used to support this ideology. For example, science has been used to argue that it is biologically natural for women to be second to men, while religion has been used to argue that it is “God’s will.”

Ideologies such as “Someone has to be on top” further support these hierarchies—consider who is more likely to believe that someone has to be on top: those on the bottom or those on the top? Thus for scholars of critical social justice, because it is so difficult to separate ideas about nature from culture, the question moves from “Is this true?” to “Whom does this belief serve?”

With privilege rationalized through ideology, it follows that dominant groups are socialized to see their dominance as normal and/or earned.

The internalization of messages of superiority. In the story, it was clear that the three-eyed people believed that their bodies were better, more attractive, and more *normal* than yours. As was evident in the interactions, they set every aspect of what was considered normal in that society. These norms not only included the layout and organization of physical space, but also included *values* such as which kind of bodies were beautiful and preferable.

As members of the dominant group—in this case people defined as able-bodied—seeing how our privileges manifest can be extremely challenging because everything in our environment is constructed to enable us to take our privileges for granted. The story illustrates the following manifestations of internalized superiority:

- There is no value in the experiences of people with disabilities and nothing to gain or learn from their experiences. (The three-eyed people believed that it was better to be three-eyed, and wanted to “fix” you as a two-eyed person. Even though you told them you liked yourself the way you were, they felt entitled to tell you that it was better to be like them.)
- Able-bodied people are capable of understanding the experiences, representing, and speaking on behalf of people with disabilities. (The play’s writers and producers were the ones to represent two-eyed people and believed that all a three-eyed person had to do was “pretend” to be two-eyed in order to understand and represent their experiences. This was reinforced

through the award granted to the actor by other three-eyed people, even though the script reinforced negative stereotypes.)

In ways such as these, those in dominant positions tend to see themselves as superior and tell stories that affirm and support that superiority. They tend to lack interest in the perspectives of the minoritized group except in limited and controlled situations such as writing and producing inspirational stories from the dominant perspective.

In an attempt to draw attention to the narrow “inspirational” stories that are often told by nondisabled people, essayist and blogger Haddayr Copley-Woods (2010) created “disability bingo” (Figure 6.2). This bingo card holds up a mirror for dominant culture to gain a rare glimpse of these stories through the eyes of people with disabilities.

An example of the “inspiration story” about people with disabilities was repeatedly told during the 2010 Olympic Games in Vancouver, British Columbia. The Canadian gold medal mogul skier Alexandre Bilodeau and his brother Frédéric, who has cerebral palsy, were prominently featured in stories about how Alexandre gets his “inspiration” from his big brother Frédéric. This story worked to make Alexandre appear heroic and even more talented and special than he already was as an Olympic-level athlete. The story also served to invest the crowd in his success; to root for Alexandre was to indirectly root for his brother Frédéric and in so doing demonstrate our sympathy for people with disabilities. The brother with cerebral palsy is only mentioned in order to further the story of the heroic Olympian brother. The “inspiration” we draw from this story reinforces the notion of the superiority of the able-bodied while denying Frédéric personhood; Frédéric becomes a prop to advance the story and privilege of Alexandre. This story of course does not stand alone; inspirational stories about people with disabilities are told and retold in mainstream culture in ways that uphold the superiority of those defined as normal.

Consider the idea of inspiration itself. Why are stories about people with disabilities so inspirational to able-bodied people? Notice how they can only be inspirational if the person is presented as overcoming the tragedy and suffering that the able-bodied believe to be inherent to having a disability. If we are telling a story of someone who cannot overcome their disability, then we draw our inspiration from their determination and courage to simply live. These narratives communicate and reinforce the idea that body diversity (anything beyond what is socially constructed as normal) is undesirable; a terrible and tragic medical condition that no one would ever choose and that, if possible, must at all costs be fixed. If the condition cannot be fixed, then it is perceived as a terrible waste of life. Thus the only way to “overcome” the condition is to “put a positive face on it” and struggle to be pleasant. If you have ever thought (or been reminded by others) how “fortunate” you were not to have a disability, consider what ideas about disabilities are being conveyed.

Figure 6.2. Disability Bingo

We hear so many annoying and unpleasant things as physically disabled people. Wouldn't it be nice if we could leap to our feet (or fall out of our chairs) and yell: 'BINGO!' This body of literature is so vast and rich, we decided to divide it into categories for easy reference:

General Annoying Ignorance	Smug Superiority/Condescension	Astoundingly Stupid Advice	More Annoying Ignorance	Outraged Hatred
You're too young to have that problem/use that mobility device/need those painkillers!	Must be nice not to have to walk everywhere/work!	My [acquaintance] had that! She used [panpipes/pesto/aromatherapy/reiki/satanic chants] and is better now!	What's wrong with you? Why are you wearing/using those?	Being fat isn't a disability!
You don't look/act disabled!	Well, I just don't <i>do</i> sick.	Maybe if you'd exercise more, you'd get better!	Your spouse/parent/roommate must be a SAINT!	These parking spaces are for old people!
Are you sure you have [condition]? Do you really need that [mobility device/hearing aid/service dog]?	[Talking v-e-r-y s-l-o-w-l-y]	Free Space YOU'RE SO BRAVE!	Everyone has SOME sort of disability!	If you really had X then there's no way you'd be able to do Y.
But you speak/walk/write/think so well!	Careful you don't get a speeding ticket on that scooter! Heh, heh, heh.	If you'd stop being so negative/gave it over to God, you'd be cured!	How do you have SEX?	People with [your disease] are a burden and the reason the government had to raise taxes.
I should totally get my pet a vest like that; then I could take him with me everywhere!	I wish I could sit down all the time!	You don't really have to take those medications. Big Pharma has just convinced you that you do.	Oh yeah; I have [totally unrelated thing], so I know how hard it is!	By using [mobility device], you're just letting the illness win!

Source: haddayr.livejournal.com/604179.html

These discourses of overcoming disability obscure the nature of disability itself. Disability isn't a condition external to a person that can be discarded with a cure and left behind. People with disabilities must navigate structures of privilege, definitions of normalcy, and the internalized superiority of the able-bodied every day. Their development is profoundly shaped by this navigation. Thus disability is a central (although certainly not the only) part of the experience and identity of a person with a disability. Many people with disabilities embrace them because it gives them an outsider's vantage point and generates innovative perspectives, insights, and opportunities.

In addition to how the inspiration story positions the person with disabilities, notice what the story of inspiration does for the storyteller, for example, when we glorify people who are “willing” to work with special needs kids. For able-bodied people, the telling and retelling of the inspiration story affirms *our* goodness, benevolence, and superiority. Unfortunately, this sense of superiority results in an arrogance and ignorance that limits our understanding of ourselves and others.

The lack of humility that results from your limited view of others. The dominant group, while the least likely to understand oppression and the most likely to be invested in holding it in place, is the group in the position to write the rules. Thus the rules will continue to benefit them. In addition, the minoritized group is rarely at the table in any numbers significant enough to challenge the dominant group or provide another perspective, even when the intentions of the rules are to prevent oppression. One of the outcomes of unearned privilege—arrogance—causes the dominant group to feel capable of representing the interests of the minoritized group (if they consider them at all), regardless of whether they have consulted with them. In fact, the dominant group members may be seen as more legitimate to represent minoritized group interests since they will see themselves as “objective” and not furthering a “special interest agenda.”

In Chapter 3’s discussion of socialization, we introduced the concept of code switching, explaining how our relationships to others are so deeply internalized that we shift effortlessly back and forth between them. For example, we know that when we are talking to our supervisor we need a level of deference that is not necessary when we are talking to our friends. We may also reveal secrets to a significant other that we would never share with coworkers. Adding the dimension of social power, we can think about internalized dominance as the default mode for engaging with the minoritized group. Because we have internalized our position in relation to theirs, we automatically interact with them from a position of unconscious superiority. We are seldom aware of this, because the messages of superiority have been planted and reinforced since birth. Further, because we have been taught that it is wrong to treat others differently, we would likely deny our sense of superiority.

Yet research shows that dominant-group interactions with minoritized groups are based in a sense of internalized superiority and are different from interactions with other dominant group members (Bonilla-Silva, 2006; Myers, 2003; Picca & Feagin, 2007). Again and again, studies have shown that *actual* behavior toward minoritized groups does not line up with dominant group beliefs about these interactions—recall the resume study described in Chapter 3 (Dovidio, Glick, & Rudman, 2005; Greenwald & Krieger, 2006). Our lack of awareness or denial of our behavior does not lessen the reality of its impact. In fact, our unawareness and denial makes it more likely that we will continue.

The invisibility of privilege for the dominant group member. While many of the dynamics discussed above make privilege invisible to the dominant group, there is also a phenomenon that scholars describe as “sanctioned not-knowing” or “willful ignorance” (Dei, Karumanchery, & Karumanchery-Luik, 2004). These terms attempt to describe dynamics that allow dominant group members to remain ignorant of the overwhelming evidence of injustice in society. While many dominant group members claim that they simply don’t know about the minoritized group, invoking a sense of innocence, the information is easily available. Thus we use the phrase “willful ignorance” because minoritized groups have always tried to get dominant groups to see and understand their experiences, but dominant group members often aggressively resist this information. These forms of denial and resistance include:

- Demanding more data to prove the injustice (“When were these statistics published? I think things have changed in the last 10 years.”)
- Feeling qualified, without any study of the issue, to argue with people who experience the oppression and with experts in the field (“I disagree that disability is socially constructed.”)
- Giving counter examples or exceptions to the rule (“But Roosevelt had a disability and he was president!”)
- Channel switching (“The true oppression is class. If you eliminate classism all other oppressions will disappear.”)
- Intimidation (“You might advance more if you were a team player.”)
- Defensiveness (“Are you calling me ableist? I have an aunt with a disability!”)
- Negating research and explaining away injustice by giving personal and anecdotal stories (“There was a kid in a wheelchair in our class. Everybody loved him and no one even noticed his wheelchair.”)
- Emotional fragility (“It hurts my feelings that you think I would say something ableist.”)

All the dominant ideologies in society support willful ignorance. The ideologies of meritocracy, equal opportunity, individualism, and human nature we described above play a powerful role in denying the current of privilege and insisting that society is just.

Perhaps the most subtle yet powerful way we resist knowing is by simply being uninterested. Internalized superiority makes us indifferent to learning about the minoritized group because we don’t see them as valuable. If we did see them as valuable, we would seek them out. For example, we might not know much about what it means to be rich and famous, but many of us spend a lot of time reading about their lives because they are important to us.

Common Dominant Group Misconceptions About Privilege

As you read through these common misconceptions, it might be helpful to identify a group that you are dominant in and through which you experience privilege. Apply the dynamics discussed here to your experience as a member of that group.

“If we haven’t personally discriminated, we are not benefitting.” Some dominant group members can admit that the minoritized group is oppressed, but still have a limited view of oppression. We don’t realize that we are looking at the minoritized group from a specific position—one that is elevated. Instead, we see ourselves as *neutral*, perhaps recognizing that they are below us, but seeing ourselves as on level ground. It follows that if we could just pull them up to where we are, their lot would improve. What we don’t recognize is that their oppression *lifts us up*; because the minoritized group has *less*, we necessarily have *more*. The concept of privilege challenges this perceived-neutral reference point by revealing that the dominant group is actually elevated by virtue of the oppression of the minoritized group. Language helps illustrate this point: While we refer to the minoritized group as *underprivileged* or *disadvantaged*, we rarely talk about the dominant group as *overprivileged* or *overadvantaged*.

“If we can’t feel our social and institutional power, we don’t have it.” Dominant group members do not have to feel powerful in order to have privilege. The social and institutional power and privilege of dominant groups is so normalized that it is outside of conscious awareness. Yet we often expect that power is something that one can feel, rather than something one takes for granted. For example, in the case of race privilege, a struggle in one aspect of a White person’s life often becomes confused with a lack of racial privilege. In discussions on race we often hear White working-class men protest that they don’t have any social power. They work long and grueling hours, often in jobs in which they have no long-term security, and come home feeling beaten and quite disempowered. These men often cannot relate to the concept of holding social power. The key to recognizing group-level power is recognizing *normalcy*—what can be taken for granted. These men are indeed struggling against classism, but they are not struggling against racism. A man of Color in the same job would be dealing with both classism and racism. Indeed, men (and women) of Color have traditionally been kept out of these jobs. Thus, our own sense of power is not necessarily aligned with how others perceive or respond to us, nor our relationship to social and institutional networks.

“If a minoritized person is in charge, there is no oppression.” In our work we are often asked questions such as, “But our dean is a woman so how can there

be sexism in our department?” In thinking about numbers, there is an important distinction between *rank* and *status* (Nieto et al., 2010). *Rank* refers to social membership (such as race, class, gender, sexual orientation, ability, age), and thus rank is not temporary and impacts all aspects of one’s life. *Status* refers to a temporary position/job and is contextual (e.g., the infamous story of Oprah Winfrey, one of the richest women in the world, unable to hail a cab once outside her workplace). Your dean may be a woman but she will have to enact male norms and values to keep her position and will still deal with unaware sexism from the men she supervises.

A Latino manager, while holding status over a White person he supervises, will still have to deal with the racism of his employees. Research shows that women and peoples of Color in positions of leadership are scrutinized more closely and judged more harshly than White men (Elsass & Graves, 1997). Peoples of Color are often assumed to be the recipients of special programs rather than to have earned their positions, and are often perceived as being biased, having special interests, and being “troublemakers” (Bonilla-Silva, 2006; Calliste, 1996; Duncan, 2014). Conversely, one of the privileges of being in the dominant group is that you are perceived to be “just human” and thus neutral and unbiased in your viewpoint.

“If we are oppressed in one social group membership, we can’t be privileged in another.” Remember that we occupy multiple social groups. One may be oppressed as a female but elevated as White; oppressed as a person with a disability but elevated as male; and so on. Consider the oppression of sexism. While all women experience sexism, they experience it differently based on its interaction with their other social group identities.

The experiences of a woman will vary greatly if she is heterosexual or a lesbian. Further, imagine this woman is heterosexual and has a disability. Perhaps she is living with a disability and is Muslim; or living with a disability and is Asian, Muslim, and a nonnative English speaker. In these ways, her experiences are determined not simply by her gender, but also by her ability status and racial, religious, and sexual identity. Thus we can be oppressed in one axis of life and still experience privilege in another. Intersectional analysis requires that we consider how these various social group identities interact with one another.

Forms of oppression can overlap and compound the experience of minoritized groups. Notice how in the examples below, adapted from the work of Zeus Leonardo (2004, 2009), racism intersects with ableism to produce the following manifestations of oppression:

- Women of Color, Indigenous women, and women with disabilities have been forcibly sterilized, denying them agency over their own bodies.

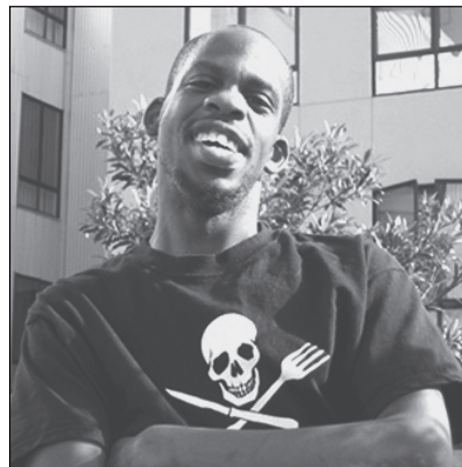
- Intelligence testing and eugenics (selective breeding of humans) construct the idea of the genetic inferiority of Blacks, Latinos, and Indigenous peoples.
- Beliefs that Asian-heritage people are smarter than other groups of Color sets up a competitive hierarchy and reinforces racist concepts of intelligence as genetic.

The life and work of Leroy Moore (Figure 6.3) illustrate these intersections of oppression.

Dynamics of privilege are deeply embedded into our socialization and thus into our psyches. Ending a system of privilege is not as simple as identifying their external manifestations and “stopping them” or “giving them away.” We may be able to do this with some types of privileges, such as changing the way we design buildings in order to make them more accessible, or challenging our assumptions about who is more or less likely to engage in criminal activity (i.e., reduce racial

Figure 6.3. Leroy Moore Jr. (b. 1967)

Writer and activist Leroy Moore lectures throughout the United States and Canada, as well as other parts of the world, on topics including the intersections of disability, race, and sexuality, as well as police brutality against people with disabilities. He has written extensively on the history of Black artists and musicians with disabilities in popular culture. Moore was the founder of Disability Advocates of Minorities Organization and a member of the U.S. National Minorities with Disabilities Coalition. He is a regular contributor to *Poor Magazine*, a webzine for community activism. He is also the cofounder of an arts performance series in San Francisco called *Sins Invalid: An Unshamed Claim to Beauty in the Face of Invisibility*. The project serves as a dialogue space where artists with disabilities examine and challenge normative conceptions of beauty and sexuality. Moore was also a founding member of the disability radio collective, *Pushing Limits* at KPFA 94.1 FM in Berkeley, CA and is the founder of Krip-Hop Nation, an international project bringing together and disseminating the work of hip-hop artists from around the world. Moore is currently writing a book about Krip-Hop Nation and, in collaboration with Emmitt Thrower, working on a film documentary about police brutality against people with disabilities that will complement the Krip-Hop mixtape CD on the same issue.



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Source: <https://disabilityrightnow.wordpress.com/2012/05/14/interview-with-leroy-moore-2/>

profiling). But many aspects of our privilege are intertwined into our very identities and personalities—how we see ourselves in relation to those around us and thus how we interact with them.

Returning to our opening vignette concerning the prime minister and her cabinet, we can see some of these deeply internalized manifestations. The men assume that it is women whose movements will be restricted. They also assume it is their right to walk freely wherever and whenever they choose. They take offence at the suggestion that their rights should be restricted, even though it is their group that is causing the problem. They appear to be unaware that women must monitor and restrict their movements on a daily basis. Ironically, women as a group must do this monitoring because of the patterns of men as a group. In this situation, it isn't as simple as suggesting that the men "give away" their privilege to women so that women can move more freely. There are many complex dynamics involved that make this not only challenging, but also highly unlikely. The very idea of men giving up their privilege is foreign to them, even though it makes sense—or is rational—that it should be *their* movements that are restricted under these conditions, not the women's. Due to internalized dominance, we can be confident that they will vigorously resist the prime minister's proposal. The prime minister also now risks being seen as seeking "special rights" for women and of having a biased perspective. In other words, she now becomes a *woman* prime minister who is no longer seen as representing everyone or playing by the rules. Deep-level ideological, institutional, and behavioral shifts would need to occur in order to challenge the male cabinet members' privileges.

Discussion Questions

1. The authors argue that privilege is not the product of luck, happenstance, or natural occurrence. If it is not these things, then what is it?
2. What are the "external and structural" dimensions of ableism? Identify some specific examples beyond those the authors provide. What are the "internal and attitudinal" dimensions of ableism? Identify some specific examples.
3. Identify the external/structural and internal/attitudinal dimensions of another form of oppression (such as sexism, heterosexism, classism, or racism).

Extension Activities

1. Identify an aspect of privilege that makes you uncomfortable to think about. Write a short letter to yourself explaining why you are uncomfortable thinking about this privilege.
2. a. Review the Disability Bingo card (Figure 6.2). Working with other members of a minoritized group that you belong to, create a bingo card of the assumptions that the dominant group has about your group (if you don't

- belong to any minoritized group, explore the attitudes and assumptions you have been taught about people with disabilities).
- b. For homework, watch a movie, television show, or commercials on mainstream TV and, focusing on the representation of the group you chose, record how many of the bingo squares you can mark.
 - c. Back in the classroom, share your findings from your homework. What patterns do you notice? Were there any groups that were virtually (or perhaps totally) invisible? If so, how is that also significant?
3. Research the writing, poetry, and performance art of Leroy Moore, Jr. (see Figure 6.3). Write an essay that examines how his work illustrates the concept of intersectionality.

Patterns to Practice Seeing:

1. Practice identifying the physical accessibility of your work or school structure (the external dimensions of ability privilege).
2. How many people who have clearly identifiable physical or cognitive disabilities (and who are not family members) have come to your home? If few or none, why do you think that is?