COMMENTARY

Beyond the Binary: Rethinking the Social Model of Disabled Sexuality

Michael A. Rembis

Published online: 19 September 2009

© Springer Science+Business Media, LLC 2009

Abstract While the social model of disabled sexuality offers a fundamental and vitally important critique of ableist assumptions concerning disabled people's sexuality, it remains limited. This article offers a brief history and critical overview of the most recent scholarship emerging out of the social model of disabled sexuality; argues that the new scholarship, which is meant largely to challenge dominant ableist assumptions concerning disabled people's sexuality, actually serves to reinforce the heterosexual matrix; and provides both theoretical and practical means of transforming the future landscape of (dis/abled) human sexualities.

Keywords Ability · Disability · Sexuality · Social model

Binary oppositions between straight and gay, disabled and non-disabled are inaccurate and oppressive ideologies, which obscure the continuities of disability and sexuality.

Tom Shakespeare [1]

I think that disability is a breed on its own, neither masculine or feminine.

Jazz [2]

Sex and disability, disability and sex; the two words may seem incompatible. Practitioners, care-givers, family, friends, society—rooted in what Butler [3] has called the heterosexual matrix and what disability rights activists and scholars have called the medical model of disability—consider disabled people to be not only broken or damaged, but also incompetent, impotent, undesirable, or asexual. Their inability to perform gender and sexuality in a way that meets dominant societal expectations is seen as an intrinsic limitation, an 'unfortunate' but unavoidable consequence of inhabiting a disabled body. Many disabled people who have internalized dominant, ableist, heteronormative notions of

M. A. Rembis (\boxtimes)

Department of History and Disability Studies Initiative, University of Arizona,

215 Social Science Bldg., Tucson, AZ 85721, USA

e-mail: mrembis@email.arizona.edu



strength, beauty, sex, and sexuality continue to experience psychological insecurity and distress when confronted with their own sexuality. They may even recount feelings of anger and self-loathing when they ponder the frustration, humiliation, and hostility they face [4]. Yet there are many disabled people who consider themselves sexy and fully capable of a rich sex life, and many disabled people are in relationships that they find rewarding [4]. The complexity of disabled peoples' lives, however, remains largely unexplored and unintelligible to the nondisabled masses.

Excavating this seemingly perilous yet richly fertile terrain reveals a standpoint that has the potential to alter the future landscape of human sexualities. It is not possible to contemplate the positionality of disabled people without thinking about gender and sexuality and we cannot theorize about gender and sexuality without considering disability, or its conceptual opposite, "ability" [5]. The three identities are intimately bound up with one another, inextricably interwoven and embedded in systems of compulsory, yet unattainable, 'heterosexuality' and 'able-bodiedness.' Ultimately what becomes disabling for most people is a failure to perform gender and sexuality in a way that approximates what Butler [3] calls the "phantasmatic idealization" of heterosexuality.

In reflecting on the complexities of (dis/abled) sexualities, a series of questions posed by Butler in the anniversary edition of *Gender Trouble* become equally relevant to disability scholars:

what will and will not constitute an intelligible life, and how do presumptions about normative gender and sexuality determine in advance what will qualify as the "human" and the "livable"? In other words, how do normative gender presumptions work to delimit the very field of description that we have for the human? What is the means by which we come to see this delimiting power, and what are the means by which we transform it? [3]

In the end, the means through which we 'see' the delimiting power of normative gender presumptions are deeply rooted in dominant notions of 'ability' (or a lack thereof) and transforming the 'human' and the 'livable' therefore will require us to move beyond simple notions of 'disabled' and 'nondisabled.' We must move toward a standpoint that Davis has called "dismodernism" [6]. We must move beyond tolerance, beyond inclusion, beyond the acknowledgement of non-normative sex and sexuality, eroticism and desire, in short, beyond the binary. The future landscape of the 'human' and the 'livable' must be informed by a new discourse that resurfaces the intellectual field upon which gender, sexuality, and disability become politicized, materialized, knowable.

Transforming the 'human' and the 'livable' depends upon nothing less than a reconceptualization and rearticulation of 'sex' itself. Sex as a physical, spiritual, emotional act; sex as signifier of bodies; and sex as the "requisite antecedent" [7] of the performance of gender must be refashioned in the popular mind. Disability, it seems, offers a perfect entry point into this discussion. In many ways, disability confounds the heterosexual matrix. As Jazz, a Jordanian woman, said in Shakespeare, Gillespie-Sells, and Davies' *The Sexual Politics of Disability*, disability is neither masculine nor feminine [2]. As such, it demands a new discourse of gender and human sexualities.

While the social model of disabled sexuality offers a fundamental and vitally important critique of ableist assumptions concerning disabled people's sexuality, it remains limited. Following a brief history and critical overview of the most recent scholarship emerging out the social model of disabled sexuality, the argument is made that this new scholarship which is meant largely to challenge dominant ableist assumptions concerning disabled people's sexuality actually serves to reinforce the heterosexual matrix. In the final section,



both theoretical and practical means of moving beyond the binary and transforming the future landscape of (dis/abled) human sexualities are discussed.

The Social Model of Disabled Sexuality

The (not unchallenged) institutionalization of disability studies and the proliferation of a vibrant and dynamic disability culture, both of which have their roots in disabled activism and the social model of disability [8], have given rise to a whole new sub-field, disability sexuality studies [9]. Beginning in the 1980s, feminist disability scholars and those researchers and activists committed to a social model of disability began to deconstruct dominant assumptions concerning disabled sexuality [10–16]. While still acknowledging the embodiment of disability, they began to highlight and analyze the social, cultural, ideological, and environmental barriers to disabled people's expression of their sexuality. A decade later, a significant body of scholarship had emerged, epitomized by Shakespeare, Gillespie-Sells, and Davies' foundational The Sexual Politics of Disability: Untold Desires [2].

Unlike previous research, which was conducted in a clinical setting by 'rehabilitation' specialists, medical professionals, and psychologists, the new disability and sexuality scholarship draws on the everyday lives of disabled people to, as Ora Prilleltensky argues "defy stereotypes" and "name their oppression" [17]. Rather than focus on the perceived 'trauma' caused by individual 'dysfunction' or an 'inability to perform,' the new research explores disabled peoples' sexual lives in their own words and on their own terms.

Though there is mounting evidence that shows that many people with disabilities lead positive and fulfilled sexual lives, theirs is a sexual history characterized largely by oppression and discrimination [2]. As Fiduccia [18] argues, sexuality and disability research has, for years, interrogated the high rates of divorce, neglect and sterilization, the lack of privacy, sexual knowledge and access to reproductive health services, and the low rates of marriage and domestic partnering experienced by most disabled people. Stories of abuse and rape, especially among institutionalized women and men, are quite common. Ubiquitous in the literature is also evidence that the larger nondisabled population perceives disabled people as either child-like, asexual and in need of 'protection,' or hypersexualized and in need of control [19].

Disabled people themselves have recounted numerous tales of exclusion and oppression [20–27]. A lack of access to public transport, inadequate economic resources, physical inaccessibility, and perhaps most importantly, attitudinal barriers, especially among family, friends, caregivers and healthcare providers, colleagues, close acquaintances, and prospective mates have kept many disabled people from experiencing and expressing their own sexuality. As Shakespeare, Gillespie-Sells, and Davies have commented, "For most disabled people, it's not how to do it which causes the main problems, it's finding someone to do it with" [2].

Despite a long history of exclusion and oppression, emerging evidence has shown that an increasing number of disabled people are leading satisfying sex lives. It seems that after a period of adjustment, or "coming out" [2] in which one embraces their own embodiment and forges a disability identity, many disabled people come to see themselves as sexual beings [28, 29]. Though their relationship with their own body and with lovers and partners may be fraught, many disabled people, as Guldin has found, note other qualities, both physical and non-physical that "negate, displace, or supersede" qualities seen as undesirable or lacking [28]. In the end, Guldin contends, "What is constructed—if not a sexy



body—is nonetheless a sexy being" [28]. Some disabled people claim that disability has made them a *better* lover or partner [30]. Since sexual pleasure seems to be associated with psychosocial rather than strictly physical factors [31], some disabled people see disability as a vehicle for learning about and exploring their own sexuality, as well as that of their lover or partner, which they claim makes them a more sensitive and responsive, or in some cases, creative and courageous lover. As Guldin found, some disabled men assert that the disability has in a way been beneficial because they are no longer the 'stereotypical guy:' they claim to be better, more willing lovers, and indicate that they derive more pleasure from oral sex and 'going slow,' as well as other forms of eroticism and sexuality [28]. Richards, Tepper, Whipple, and Komisaruk found that after a period of adjustment, disabled women also developed a positive sense of self and they and their partners became more creative sexually, working with the disability [25]. As one disabled woman informed Shakespeare, Gillespie-Sells, and Davies:

I see my limitations as parameters; my normality, my sexuality, to be pushed right to the edge. If you are a sexually active disabled person, and comfortable with the sexual side of your life, it is remarkable how dull and unimaginative non-disabled people's sex lives can appear [2].

In what one researcher referred to as a "wonderful celebration of her sexual life," a female wheelchair user in a Gay Pride parade in Boston in the mid-1990s carried a sign that read, "Trached dykes eat pussy all night without coming up for air" [23].

Most disabled respondents root their willingness (some might say eagerness) to express and even celebrate their own sexuality in an increasingly visible disability culture and the burgeoning disability rights or 'disability pride' movements, which they argue are changing the way some individuals view disability. While much work remains to be done, it seems some headway is being made, albeit rather unequally. Despite changing views, some sexualities remain marginalized, both in the research literature and in life. Both straight women and lesbians, especially those with congenital—as opposed to acquired—disabilities, gay men, bisexuals, and racial/ethnic minorities continue to experience the most hostility and/or neglect [20–27]. This is because most disability research remains wedded to dominant heteronormative and ableist notions of gender and sexuality. Ironically, much of the social research on disabled sexuality and many of the pronouncements of disabled subjects, both of which have been concerned with 'defying sex/gender stereotypes' and challenging powerful cultural myths concerning disabled people, have served to reinforce, rather than challenge the heterosexual matrix.

The Heterosexual Matrix and the Limits of the Social Model of Disabled Sexuality

In their effort to empower themselves and their disabled subjects most disability activists and scholars fall short of challenging what Butler in her work on gender and sexuality has referred to as "the naturalized knowledge" that "operates as a preemptive and violent circumscription of reality" [3]. As other scholars have noted, the social model of disability, which emerged out of a highly politicized, male dominated, activist culture assumed a white, male, heterosexual norm that mirrored larger social norms [8]. As a result, much of the disability sexuality research has also assumed gender normative heterosexuality. This can be seen most readily in the research on disabled women, which tends to focus almost exclusively on 'dating,' marriage, reproduction, and parenting [17, 32, 33]. Though critically important, this research leaves unexplored the notion that these may not be desirable



life choices for many women. Nor does it examine the complex responses of disabled subjects that both reinforce and challenge normative sexual constructions. Guldin observes, for example, that while disabled men may take on a "more feminine model of sexuality," they continue to root their sexuality in their ability to please women, ultimately reinforcing their identity as a heterosexual "masculine man" [28]. Women, too, engage in seemingly contradictory behaviors. One of Guldin's participants made a point of stating that for a period of time, she had been a 'slut' [28]. While this confession challenges dominant views of disabled asexuality and undesirability, it simultaneously reinforces dominant assumptions about women's 'proper' roles, and sexual propriety more generally.

Though studies are scant, work in the intersection of lesbian and queer sexualities and disability are increasingly identifying the compulsory heterosexuality that dominates both disability research, and the lives of most disabled people. Whitney [27], for example, argues that although significant progress has been made towards the recognition of disabled sexuality, many of the studies remain limited. Most folks, Whitney contends "often assume heterosexuality" [27]. O'Toole is less optimistic, noting that disabled women are not just assumed to be heterosexual, but also, and perhaps more problematically, asexual [23]. O'Toole also highlights the dearth of literature on the intersection of various identities, writing that:

In general, issues for lesbians, issues for women, issues for disabled people and issues for women of color are acknowledged in the domains of gender, sexuality, disability, and race. Almost never is there discussion of how these differing issues impact a woman who has membership in multiple communities [23].

Disability researchers and the larger society must adopt a broader view of human sexualities, one that more accurately reflects the lived experiences of most people, if we are going to move beyond the binaries that dominate many of our lives.

Although few in number, lesbian feminists and queer theorists have offered some of the most compelling challenges to gender normativity and compulsory heterosexuality. Lesbian communities are admittedly far from utopian and egalitarian. Disabled lesbians have reported feeling isolated and discriminated against within their own communities. Yet some lesbian writers proclaim that they are the "premier role models" for the "classic" sex advice to disabled people [23]. As one respondent has asserted, "Hell, lesbians should be teaching all those sex classes [for disabled people]" [23]. O'Toole argues that lesbians experience a tremendous sense of sexual freedom and that lesbian sex fosters communication and experimentation, all of which are critical to disabled sex. She writes that with lesbian sex, there is "little or no pressure" to have sex at the same time, and that lesbians are not as preoccupied with sexual positions as their heterosexual counterparts. There is no equivalent of the missionary position in lesbian sex. There also is no requirement that both partners have simultaneous orgasms during lesbian sex. As one respondent replied, "In fact, there is no requirement that both partners climax [at all]. One of the freedoms with lesbian sex is the removal of a huge 'duty to come'..." [23]. O'Toole has recognized and deconstructed the violent and constraining power of the heterosexual matrix and has offered a practical way of subverting it—teaching disabled people how to have a full (some might say 'lesbian') sex life. While extremely important and valuable, the emancipatory rhetoric of lesbian feminists such as O'Toole runs the risk of replacing one set of social hierarchies with another.

In searching for alternatives to heteronormativity, one must be careful not to idealize lesbian relationships; lesbians certainly do not have a monopoly on communication; and they, like any other social group, create their own hierarchies. Yet the larger point implicit



in O'Toole's work is a compelling one. Current disability sexuality researchers and activists define sexuality very narrowly, and in most cases concern themselves almost exclusively with the physical capacity of disabled people and their inability to perform gender and sexuality in a way that approximates dominant conceptions of normative heterosexuality. Whether this is seen as a 'challenge' to dominant social norms or simply as an individual 'failure' to meet those norms, it ultimately serves to reinforce the heterosexual matrix. The future of (dis/abled) sexualities depends not on disabled men's ability and willingness to 'challenge' dominant assumptions by admitting that they are more 'feminine' in their love making and that this can actually be 'positive.' Nor does it necessarily depend on disabled women who 'defy' stereotypes by marrying and bearing (or adopting) and raising children. Disability and gender and sexuality scholars, and society generally, must move beyond the binary, beyond male/female, masculine/feminine, adult/ child-like, independent/dependent, nondisabled/disabled, sexual/asexual, straight/gay toward a re-visioning of gender, sexuality, and disability that addresses the ways in which the maintenance of those categories works to delimit as Butler [3] puts it, "the very field of description that we have for the human". It is imperative that we reshape culture in a way that enables us all.

Transforming culture will most certainly be a long and difficult process. We can begin (and I think we have already begun) by viewing human sexualities from what Richards et. al. call "a holistic perspective." For them, sexuality "encompasses biological, psychological, emotional, social, cultural, and spiritual qualities, and individuals can express their sexuality in any and all of these areas" [25]. Thinking more broadly about sexuality will no doubt prove beneficial, but we must also work to reshape the very notion of gender, sex, sexuality, eroticism, desire, and disability, and to subvert the power relations and class structures that undergird the maintenance of these ideological constructions. Fundamentally altering the way we see the world ultimately will be much more difficult than simply being more 'inclusive'. In the last section, a means of transforming the future landscape of (dis/abled) sexualities is offered.

Dis/ability and the Future of Sex

I envision a future in which there are no 'dis/abled sexualities,' only human sexualities; a world in which difference is what we have in common; a world where limitation, interdependence, and reliance on technology are the norm; where technology is not separate from, but rather part of the body; where both the body and identity are not fixed but malleable [6]. Davis [6] calls this "dismodernism." Put simply, it is a world in which we move beyond the rigid humanistic ideals of the Enlightenment and the equally constraining identity politics of the postmodern era. Like Davis [6], I seek to usher in a new era and a new "ethics of the body" that begins with disability rather than ends with it. The goal is not the erasure of dis/abled bodies and sexualities, nor is it the incorporation of the disabled 'other' into a humanistic ideal of the separate and independent yet 'equal' self. We need a sweeping reclamation of dis/abled bodies that enables us to reconfigure the 'human' and the 'livable' in a way that makes limitation and what Davis [6] calls "cosmopolitanism" the rule.

Transforming the future of (dis/abled) sexualities hinges on the notion that sex and disability—in all of their various materializations—are malleable, pliable, and quite often multifarious. They are not fixed or rigid, and they are not rooted in our biology. The work of Tremain [7, 34] is useful in this regard. Drawing primarily on Foucault and Butler, she



argues, in different settings, that sex and disability (or more accurately impairment) are socially constructed; neither is prediscursive, natural, or transhistorical. The body, moreover, is not 'sexed' or 'disabled' in any significant way prior to its signification as such within a discourse on sexuality or impairment. The materiality or embodiment of 'sex' or 'disability' is thereby marked or formed by discursive practices, which, if we agree with McRuer [5], ultimately have their roots in competing notions of gender, sexuality, and compulsory able-bodiedness. 'Sex' and 'disability' become politicized, naturalized, and knowable through the performance of gender and sexuality. Coming to terms with the idea that sex, gender, sexuality, and disability are discrete yet interrelated socially constructed identities embedded within larger ableist systems of knowledge and power will help us move beyond the binary and challenge the ways in which the 'human' and the 'livable' are conceived, expressed, and constrained in modern societies.

To affect change, (dis/abled) sexualities must become intelligible through a 'dismodernist' discourse that emerges organically, from the 'bottom up'. By incorporating the voices and actions of social actors, who historically have been silenced, we can move beyond what might be considered a strictly Foucauldian formation of the 'human' and the 'livable.' As scholars writing in other contexts have shown, Foucault's work can be helpful in elucidating the complex relationship between knowledge and power and the historically situated sets of practices that restrict the actions of humans generally and of disabled people in particular [7, 34, 35]. Recent feminist and disability studies scholars have, however, raised considerable and important criticisms concerning the extent to which Foucault recognized and appreciated what social philosopher Hughes [35] refers to as, "the ways in which practical sensuous activities constitute social life." Hughes argues that Foucault's notion of the body as a docile locus of power underestimates the subject's role as an agent of self- and social transformation. For Foucault, the body is a medium upon which history is written; it is monitored into existence; it is molded by "a great many distinct regimes" [35]. The body is "a product of the play of power; ...power 'reaches into the very grain of individuals, touches their bodies and inserts itself into their actions and attitudes, their discourses, learning processes and everyday lives" [35]. Hughes [35] contends that the "active or creative subject is invisible" in Foucault's work. "The subject," for Foucault, "is a product of expert classification and regulatory techniques." Hughes [35] argues that unlike Foucault, who makes only a "post hoc case for agency," and even then considers it "a discursive product of new reflexive technologies of power," disability scholars—and I would add scholars of gender and sexuality—must recognize that "various forms of embodied praxis" have allowed disabled people to claim the "status of subjects with agency." The new 'dismodernist' discourse would recognize that agency, would enable (dis/abled) people to deploy that power in transforming human sexualities.

If disabled people are going to have power, they must have access in its very broadest sense: physical and social access, access to their own bodies, and access into the consciousness of those individuals currently considered 'nondisabled.' The 'dismodernist' revolution is largely a cultural and ideological endeavor. As Davis [6] argues, it uses culture and symbolic production to create an "ethic of liberation." Consciousness raising, tolerance, and inclusion must be rearticulated as consciousness altering, empowerment, and equity. Transforming minds, and ultimately the future landscape of (dis/abled) sexualities, can only be accomplished through research, scholarship, education, and a judicious use of media that engages in both a thick description of disabled peoples' rich, rewarding, and quite diverse lives, histories, and cultures, and a social critique that originates with disabled people themselves. The 'counter-narrative' must become the dominant narrative.



Although they have made tremendous gains in all areas of access, disabled people still haunt the margins of the popular imagination. If all humans are going to occupy a 'dismodern' world equally, people with a broad range of cognitive, emotional, physical, and sensory disabilities must be able to live freely. They must have full access to employment, education, transportation, entertainment, valuable resources, and perhaps most importantly to their own bodies and experiences. In many ways, disabled peoples' bodies are not their own, their very existence is at best constrained by 'well-meaning' but often misguided family, friends, caregivers, colleagues, healthcare professionals, and politicians, and at worst directly violated by those who have power over them. Disabled bodies must cease being the objects of abuse and neglect, or of pity, sorrow, and charity, so that they might become the objects of desire and eroticism. In a 'dismodern' world we all will have the freedom and the power to be sexy—or not.

In a 'dismodern' world, celibacy and intimate (but 'platonic') friendships or partnerships will be equally 'legitimate' and 'acceptable' life choices. Any astute observer will quickly recognize that our modern culture is saturated with sex; it is omnipresent. In our modern lives, bodily maintenance and bodily pleasures are central to our socialization into an image conscious, youth obsessed capitalist consumer culture. Most of us demand the right to be sexual. As Shakespeare [9] has noted, we vigorously defend "our right to choose whatever form of sexual expression or fulfillment we can find. We live in the 'market of free emotions". Potential sexuality is everywhere. But do we really want more sex? Popular media would make it seem as though we do. Shakespeare has referred to this as the "Cosmo conspiracy" [9]. The reality is that most people are not having that much sex, let alone 'great' sex. Australian women in relationships are having sex 1-3 times per week, with the majority of women having it closer to once a week. Sex is an even less frequent occurrence for women who are not in relationships [36]. American men age 30-44 reported in a 2002 national survey that they had had an average (median) of 6-8 female sexual partners during their lifetime. For women, the number of male sexual partners was only about four [37]. Some surveys in Britain have found that more women preferred gardening to sex [9]. 'Sex' as it is currently conceived by most people is not as important as our modern culture would have us believe and it is not critical to happiness. Most people, as Shakespeare has mentioned, "are not looking for sex itself, they are searching out intimacy, warmth, validation, connection" [9]. In a 'dismodern' world free of compulsory able-bodiedness and heterosexuality such relationships will be a valued part of the 'human' and the 'livable.'

Disabled people cannot, must not, create a 'dismodern' world on their own. They must continue to build coalitions, coalitions across disability, across various sexual and racial/ethnic minorities, and with their (often) privileged 'nondisabled' allies. Like Butler, I "hope for a coalition of sexual minorities that will transcend the simple categories of identity, that will refuse the erasure of bisexuality, that will counter and dissipate the violence imposed by restrictive bodily norms" [5]. A multiplicity of voices will be needed to rearticulate and reconceptualize (dis/abled) human sexualities.

Researchers, activists, and artists need to work together to dispel powerful myths about the dominant arenas in which sexuality is performed, most notably interpersonal relationships. In a 'dismodern' world, relationships that do not 'conform' will be the norm. There are roughly eight million families in the United States with children under the age of eighteen, where one or both parents are disabled. Yet there is little research on these families and a general lack of acknowledgement of these families from the larger society [24]. This is a direct violence committed upon these families, upon all disabled people. It is critical that we learn more about these families, but I would like to go one step further and



ask why disabled individuals—or anyone for that matter—would want to 'marry' at all (in the strict legal sense). What compels people to marry? What stakes do the interested parties, the state, and society have in legalized marriage and what one scholar has called "compulsory monogamy" [38]. Why are issues such as gay marriage and polygamy or polyamory so controversial? Despite the tenacious grip with which many folks cling to idyllic notions of monogamy and family, households may well be more diverse now than at any point in the past—in the Western world, at least. Gay male and lesbian couples are increasingly asserting their right to marry and have children. The number of children raised in single-parent households continues to rise. Household diversity will continue to increase as reproductive technologies that enable women to have babies on their own or with a same-sex partner, and at an older age, continue to become more available and reliable. In 1995, 30% of births in the U.S. were to unmarried women [39]. Despite the myth of selfreliance that continues to dominate much of western discourse, all parents are increasingly relying on a broad range of supports to raise their children. In 1996, more than half, 54.3% of mothers returned to work before their child's first birthday [39]. Whether we like to admit it or not, most people—disabled and 'nondisabled'—are dependent, and most people simply fail at performing the 'phantasmatic idealization' of not only heterosexuality, but also marriage and monogamy. As legal scholar, Elizabeth Emens points out, "many people practice alternatives to lifelong monogamy either secretly (adultery) or serially (divorce and remarriage)" [38]. Forty percent of marriages end in divorce and 50% of Americans between the ages of 16-45 admit to having been sexually unfaithful. Yet 70% of those individuals who divorce remarry, only to 'fail' again (in most cases) [38]. In a 'dismodern' world, we'll no longer see these seemingly disparate sexualities, partnerships, marriages, and family forms as 'deviant.' They will be equally valued parts of a broad social and cultural mosaic. They will define the 'human' and the 'livable.'

By loosening the conceptual ties that bind our perception of 'normal' relationships, we in turn open up new ways of thinking about sex and beauty. 'Dismodernism' has the potential to transform a society where people are expected to live a life free of pain and discomfort, a society where strict social norms concerning beauty and physical fitness compel people to alter their bodies in drastic, often violent ways, through surgery, dieting, exercise, and other 'cosmetic' procedures, a society where youth, physical prowess and a very narrow idealization of heteronormative sexual allure are highly valued and sexual performance is wedded to one's physicality. Sex, eroticism, and desire, will look very different in a 'dismodern' world where 'cosmopolitanism,' interdependence and a reliance on technology are the 'norm.' In a 'dismodern' world, dis/abled bodies will become 'sexy' bodies.

References

- 1. Shakespeare, T.: The sexual politics of disabled masculinity. Sex. Disabil. 17(1), 53-64 (1999)
- Shakespeare, T., Gillespie-Sells, K., Davies, D.: The Sexual Politics of Disability: Untold Desires, p. 60. Cassell, London and New York (1996)
- 3. Butler, J.: Gender Trouble: Feminism and the Subversion of Identity. Routledge, New York (1999)
- Taleporos, G., McCabe, M.P.: Physical disability and sexual esteem. Sex. Disabil. 19(2), 131–148 (2001)
- 5. McRuer, R.: We were never identified: feminism, queer theory, and a disabled world. Radic. Hist. Rev. **94**, 148–154 (2006)
- Davis, L.J.: The end of identity politics and the beginning of dismodernism. In: Davis, L.J. (ed.) The Disability Studies Reader, 2nd edn, pp. 231–242. Routledge, New York (2006)



- 7. Tremain, S.: Queering disabled sexuality studies. Sex. Disabil. 18(4), 291–299 (2000)
- 8. Shakespeare, T.: The social model of disability. In: Davis, L.J. (ed.) The Disability Studies Reader, 2nd edn, pp. 197–204. Routledge, New York (2006)
- 9. Shakespeare, T.: Disabled sexuality: toward rights and recognition. Sex. Disabil. 18(3), 159-166 (2000)
- Fine, M., Asch, A.: Disability beyond stigma: social interaction, discrimination and activism. J. Soc. Issues 44(1), 3–22 (1988)
- 11. Fine, M., Asch, A.: Disabled women: sexism without the pedestal. J. Sociol. Soc. Welf. 6, 233–248 (1981)
- 12. Finger, A.: Forbidden fruit. New Int. 233, 8-10 (1992)
- 13. Garland-Thomson, R.: Extraordinary Bodies, Columbia University Press, New York (1997)
- 14. Hahn, H.: "Can disability be beautiful?" Soc. Policy 26–32 (Winter 1988)
- Hahn, H.: The politics of physical differences: disability and discrimination. J. Soc. Issues 44, 39–47 (1988)
- Hahn, H.: The social component of sexuality, disability: some problems and proposals. Sex. Disabil. 4(4), 220–233 (1981)
- Prilleltensky, O.: Motherhood and Disability: Children and Choices, p. 45. Palgrave Macmillan, New York (2004)
- 18. Fiduccia, B.W.: Current issues in sexuality and the disability movement, Sex. Disabil. 18(3), 167–174 (2000)
- Milligan, M.S., Neufeldt, A.H.: The myth of asexuality: a survey of social and empirical evidence. Sex. Disabil. 19(2), 91–109 (2001)
- Howland, C.A., Rintala, D.H.: Dating behaviors of women with physical disabilities. Sex. Disabil. 19(1), 41–70 (2001)
- Karellou, J.: Laypeople's attitudes towards the sexuality of people with learning disabilities in Greece. Sex. Disabil. 21, 64–84 (2003)
- Kef, S., Bos, H.: Is love blind? Sexual behavior and psychological adjustment of adolescents with blindness. Sex. Disabil. 24, 89–100 (2006)
- O'Toole, C.J.: The view from below: developing a knowledge base about an unknown population. Sex. Disabil. 18(3), 207–224 (2000)
- Prilleltensky, O.: A ramp to motherhood: the experiences of mothers with physical disabilities. Sex. Disabil. 21(1), 21–47 (2003)
- Richards, E., Tepper, M., Whipple, B., Komisaruk, B.R.: Women with complete spinal cord injury: a phenomenological study of sexuality and relationship experiences. Sex. Disabil. 15(4), 271–283 (1997)
- Rintala, D.H., Howland, C.A., Nosek, M.A., Bennett, J.L., Young, M.E., Foley, C.C., Donald Rossi, C., Chanpong, G.: Dating issues for women with physical disabilities. Sex. Disabil. 15(4), 219–242 (1997)
- Whitney, C.: Intersections in identity-identity development among queer women with disabilities. Sex. Disabil. 24, 39–52 (2006)
- Guldin, A.: Self-claiming sexuality: mobility impaired people and American culture. Sex. Disabil. 18(4), 233–238 (2000)
- 29. Potgeiter, C.-A., Khan, G.: Sexual self-esteem and body image of South African spinal cord injured adolescents. Sex. Disabil. 23(1), 1–20 (2005)
- Karlen, A.: Positive sexual effects of chronic illness: case studies of women with lupus (SLE). Sex. Disabil. 20(3), 191–208 (2002)
- 31. Sakellariou, D.: If not the disability, then what? Barriers to reclaiming sexuality following spinal chord injury. Sex. Disabil. 24, 101–111 (2006)
- 32. Barron, K.: The bumpy road to womanhood. Disabil. Soc. 12(2), 223-240 (1997)
- Buzzanell, P.M.: A feminist standpoint analysis of maternity and maternity leave for women with disabilities. Women Lang. 26(2), 53–65 (2003)
- Tremain, S.: On the government of disability: foucault, power, and the subject of impairment. In: Davis,
 L.J. (ed.) The Disability Studies Reader, 2nd edn, pp. 185–196. Routledge, London (2006)
- 35. Hughes, B.: What can a foucauldian analysis contribute to disability theory? In: Tremain, S. (ed.) Foucault and the Government of Disability, pp. 78–92. The University of Michigan Press, Ann Arbor (2005)
- 36. Allen, J.S.: Unpublished paper presented at the international congress on women's mental health in Melbourne. 20 March 2008 (forthcoming in the British Medical Journal)
- 37. Mosher, W., Chandra, A., Jones, J.: "Sexual behavior and selected health measures: men and women 15–44 years of age, United States, 2002." Advance Data From Vital and Health Statistics. 362 (September 15, 2005). U.S. Department of Health and Human Services: Centers for Disease Control and Prevention: National Center for Health Statistics. 1–56
- 38. Emens, E.F.: Monogamy's law: compulsory monogamy and polyamorous existence. NY. Univ. Rev. Law Soc. Change 29, 277–376 (2004)
- Coontz, S.: The Way We Never Were: American Families and the Nostalgia Trap. Basic Books, New York (2000)

