

## The Trouble with Disability in Shakespeare Studies

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### Abstract

*This article reviews some instances of disability in Shakespeare's works and some instances of Disability Studies in Shakespeare studies. Contrary to the claims of the Disabled Shakespeares project, there is no historical basis for the modern language of "disability" in Shakespeare's texts, as illustrated with a philology of the term; this does not, however, invalidate the viable uses of disability theory in Shakespeare studies. Developing a typology of these uses (historical, methodological, critical, theoretical), this article discusses the opportunities and liabilities of each approach but concludes that a better vocabulary can be found in Erving Goffman's theory of stigma (which inspired Disability Studies but, in many ways, is more conceptually and ethically buoyant). The main goal in this article is not to argue against a Disability Studies approach to Shakespeare but, instead, to use those readings as evidence of the imperfect even if well-intentioned ways we respond to the encounter with stigma in Shakespeare's works – a phenomenon of literary criticism that is remarkably resonant with the similarly imperfect even if well-intentioned ways we respond to the encounter with stigma in our everyday lives.*

"I have been thinking for a long time now about the proper way to write about the subject of these pages": this is the first sentence of one of the books that initiated Disability Studies as an academic field, Henri-Jacques Stiker's *A History of Disability* (1982).<sup>1</sup> Since Disability Studies has recently emerged as a viable theoretical lens for looking at William Shakespeare's works – beginning with the

2009 special edition of *Disability Studies Quarterly* titled *Disabled Shakespeares*, edited by Allison Hobgood and David Houston Wood, and extending to several subsequent publications, especially *Recovering Disability in Early Modern England* (edited by Hobgood and Wood) and *Disability, Health, and Happiness in the Shakespearean Body* (edited by Sujata Iyengar)<sup>2</sup> – it is time for a reflection on the status and the stakes of a Disability Studies approach to Shakespeare. The hotly contested terminology employed in these studies forces us, like Stiker, to interrogate our basic terminology: *How should we speak about disability when we encounter it in Shakespeare's texts?*

In this article, I identify the accomplishments and opportunities for future work created by the Disability Studies approach to Shakespeare, but also its limits and liabilities. I conclude that, on both historical and conceptual grounds, *stigma* provides a better vocabulary for addressing the abnormal body in Shakespeare's works than *disability*. We certainly encounter disability in Shakespeare's texts but – in terms of the behavior of Shakespeare's characters, the interactions among them, and our own relationship to his text – we also and more explicitly encounter stigma: the making of the meaning of disability and other abnormalities whether physical, mental, familial, racial, or ethical.

Even as I write this, however, I worry. I worry that I am part of what Wood has described as a "general, if not institutional, reluctance to engage disability as a theoretical model for early modern topics."<sup>3</sup> I worry that my reluctance to embrace *disability* as a useful vocabulary for Shakespeare studies will come across as ill-willed and mean-spirited or even biased, discriminatory, and oppressive. Rather than shy away from this argument because of its ethical fraughtness, however, I want to take seriously the fact that terminological nervousness is a central feature of stigma.<sup>4</sup> As suggested near the end of this article, stigma in Shakespeare's texts seems always to outmaneuver our attempts to understand and describe it, which needs to be a central aspect of those attempts.

## I. DISABILITY, DISABILITY STUDIES, *DISABLED* SHAKESPEARES

According to the *Oxford English Dictionary (OED)*, the word *disability* and its cognates (*disable*, *disabled*) were used in three senses during the early-modern era. First, there was the *legal* sense of "to disable": "to hinder or restrain (a person or class of persons) from performing acts or enjoying rights which would otherwise be open to them."<sup>5</sup> Second, there was the *medical* sense of having a "disability": "a physical or mental condition that limits a person's movements, senses, or activities."<sup>6</sup> Third, there was a *conceptual* sense of being "disabled" for any reason whatsoever: "rendered incapable of action or use."<sup>7</sup> There is no clear philological trajectory to the development of these senses. *Disable* the verb was first used in the legal sense in 1445 and in the medical sense around 1492, but then not in the conceptual sense until 1582. *Disability* the noun was used in the conceptual sense

in 1545, in the medical sense in 1561, and in the legal sense in 1579. *Disabled* the adjective was used in the conceptual sense in 1598, but not in the medical sense until 1633. Additionally, "the disabled" as an adjective with a definite article referring to a class or group of people did not appear until 1740 (in contrast, there are frequent references to "the lame," "the blind," and "the deformed" in Shakespeare's texts and elsewhere during his time).

This philology is derived from the *OED*, which is not always absolutely reliable in such matters. For example, I have seen a reference to "the disabled" as a social class as early as 1638 (102 years before the *OED*'s first recorded usage of "the disabled" in that sense), and Shakespeare himself used the participial adjective "disabled" in the medical sense in his *Sonnets* ("strength by limping sway disabled" [66.8]), published in 1609 though written even earlier (thus at least 24 years before the *OED*'s first recorded usage of the adjective "disabled" in the medical sense).<sup>8</sup> I want to insist, however, that the *OED*'s oversights do not diminish the clear and documented trends of the time: the prominent use of *disability* and its cognates in the general conceptual sense of the word ("rendered incapable of action or use") and the prominence of *deformity* over *disability*.

As leading disability theorist Lennard Davis has written, "Disability was not an operative category before the eighteenth century [...] Rather than disability, what is called to readers' attention before the eighteenth century is deformity."<sup>9</sup> For example, according to *Early English Books Online*, during Shakespeare's lifetime (1564-1616) there were 1,660 instances of the word *deformity* but only 214 of *disability*, and 2,797 instances of *deformed* but only 529 of *disabled*.<sup>10</sup> A close look at the instances of *disability* and *disabled* confirms that these words were overwhelmingly used in the general conceptual sense of an incapacity or inability to do something as opposed to the technical medical or legal senses. For instance, out of Shakespeare's seven uses of *disability* and its cognates, all but the one just noted ("strength by limping sway disabled") occur in the conceptual sense of a general incapacity for any reason whatsoever (e.g., Bassanio has "disabled" his estate by living beyond his means [*Merchant of Venice*, 1.1123]). As Sujata Iyengar concluded in her survey of Shakespeare's use of the word, "To be 'disabled' in Shakespeare is to experience a physical, moral, or economic slowdown, but the word is rarely used as a participial adjective or to connote a pre-existing or unchangeable or tragic condition; instead, the verbal form clarifies disability as a temporary state conferred upon one by another's – or by one's own – actions or prejudice."<sup>11</sup> In his own close reading of the word in Shakespeare's works, Vin Nardizzi noted that "'to be disabled' is, with one exception in [Shakespeare's] dramatic canon, a state that male characters willfully bring upon themselves."<sup>12</sup> In other words, Shakespeare did not use the word *disability* as we now commonly use it. He and other early-modern writers overwhelmingly used the word *disabled* to refer not to people whose physical impairments create functional and social disadvantages, but to people and things who are unable to perform the tasks such people and things usually perform.

If so, then there is a real basis for associating Shakespeare and his contemporaries with what has come to be called the "social model of disability," which similarly defines *disability* in a general conceptual sense (incapacity derived from any source whatsoever) rather than a technical medical sense (incapacity derived specifically from physical or mental impairment), but this association requires some context and some qualification. The "social model," which emerged in England in the 1970s, was proposed as an alternative to the "individual models" of disability, which had dominated Western culture since time immemorial. As disability emerged (in Davis's terms) as an "operative category" in the eighteenth and nineteenth centuries, a "medical model" emerged in fields such as teratology and orthopedics, which sought to understand, correct, cure, and eliminate disability (understood in the medical sense as an incapacitating physical or mental condition).<sup>13</sup> As these medical fields matured over the course of the twentieth century, psychologists such as Alfred Adler and Beatrice Wright turned their attention to the mental rather than physical features of disabled people.<sup>14</sup> There was a growing recognition that the mental and social life of people with disabilities was determined less by the physical realities of their disabilities and more by the (overwhelmingly negative) social attitudes, customs, and traditions they came into contact with. The American sociologist Erving Goffman was the first to argue this idea in full. His book, *Stigma: Notes on the Management of Spoiled Identity* (1963), claimed not only that stigma is best understood as a social process rather than an individual attribute, but also that the mental and social experiences of people with disabilities are comparable to the experiences of those who face social discrimination in relation to individual attributes other than disability (such as race, gender, and sexual orientation), a phenomenon later addressed under the rubric of "intersectionality."<sup>15</sup> Defining *stigma* as "the situation of the individual who is disqualified from full social acceptance," Goffman framed the issue – for the first time ever – as a fraught encounter in which meaning is socially constructed in the interaction between "the stigmatized" and "the normals."<sup>16</sup>

In the words of disability scholars Jeffrey Brune and Rosemarie Garland-Thomson, "The radical insights of social constructivism that emerged from sociology through the social interactionism Goffman initiated in the 1960s gave disability studies what we now understand as a founding concept of our field: the social model."<sup>17</sup> In the "medical model," it is an attribute of an individual such as deformity, disease, or illness which causes "disability," understood in the medical sense as an inability to perform certain tasks that a human being can usually perform due to a physical feature or condition of the body. In contrast, in the "social model," things like deformity, disease, and illness do not directly cause "disability"; instead, these "impairments" encounter negative social reactions such as prejudice, hostility, and discrimination, and it is these features of society which cause "disability," understood in the conceptual sense as an inability to perform certain tasks that a human being can usually perform due to a social limitation imposed upon an individual. In the 1980s and early 1990s, the social model was employed and refined by academics such as Mike Oliver, Vic Finkelstein, and Collin Barnes but,

starting in the 1990s and continuing to this day, the social model has been critiqued and rejected by Disability Studies scholars such as Liz Crow, Jenny Morris, Tom Shakespeare, and Nicholas Watson.<sup>18</sup> Three problems with the social model – one related to "reality," another to "charity," and a third to "intersectionality" – are especially relevant to the development of Disability Studies of Shakespeare.

First, arguing for a "critical realist" model, Disability Studies scholars such as Tom Shakespeare (no relation to William) have pointed out that individual attributes such as deformity, disease, and illness quite obviously *do* directly cause people to be unable to perform certain tasks.<sup>19</sup> There are certainly unfortunate social customs concerning physical impairment, but that does not mean impairment is not "disabling" in and of itself, and it is also absurd to act as if medical solutions to impairment are *ipso facto* bad. This recognition that "disability" can derive from either one's body or one's society, and that it usually derives from both in overlapping ways, has produced the sensibility behind American Disability Studies since the mid-1990s (sometimes referred to as New Disability Studies), including the work of Lennard Davis, Rosemarie Garland-Thomson, Simi Linton, James Charleton, David Mitchell, Susan Snyder, Catherine Kudlick, and Tobin Siebers, among others.<sup>20</sup> Mitchell and Snyder have dubbed this more sensible, less political approach the "cultural model of disability": "the cultural model has an understanding that impairment is both human variation encountering environmental obstacles *and* socially mediated difference that lends group identity and phenomenological perspective."<sup>21</sup>

The second problem with the social model of disability is that it can actually reify the awkward dynamic of tragedy and charity it seeks to dislodge. Rather than the victims of nature, people with disabilities are presented as the victims of society, but victims nonetheless. This victimization prompts the social dynamic in which the normals feel pity for the stigmatized and express their good intentions and well wishes – in other words, their disavowal of stigma – through charity, or at least through a charitable attitude which often comes across as patronizing.

"Grievances" identified by Beatrice Wright as early as 1960 – "the problem of help" and "the problem of charity" – are not resolved but reconstituted by the social model.<sup>22</sup> Indeed Goffman, citing Wright, took the persistence of these problems in the face of attempts to approach disability humanely as his starting point.<sup>23</sup> In a sense, the social model of disability never caught up to Goffman.

Third, with respect to "intersectionality," it must be acknowledged that attributes of individuals unrelated to deformity, disease, and illness (e.g., factors of race, class, and gender) can also cause societal reactions such as prejudice, hostility, and discrimination which bring about what is called "disability" in the social model. To many people (including me) it feels terminologically imprecise and conceptually compromised to redefine "disability" as broadly as the social model does, especially because individual attributes related to race, class, and gender are hardly "impairments" that are "disabling" in and of themselves. In the words of Tom Shakespeare, "The social model's benefits as a slogan and political ideology are its

drawbacks as an academic account of disability."<sup>24</sup> The redefinition of "disability" in the social model ignores the way that negative social attitudes related to disability are part of the more general social phenomenon of stigma. In the vocabulary of stigma, individual attributes which can be collected under the category "abnormalities" – whether physical, mental, racial, familial, ethical, or sexual in nature – come into contact with social "norms" which define "normalcy," and from this encounter emerges "stigma," understood as the delegitimization of an identity due to some abnormality which is definitionally opposed to social normalcy. Like the cultural model of disability, the language of stigma provides a more satisfying account of disability than the social model because it acknowledges the reality of "impairments" which directly cause disabilities and of "disabilities" which stem from individual attributes other than impairment.

The "cultural model" which attends to both "disability" as a medical phenomenon and "stigma" as a social phenomenon is the version of Disability Studies underwriting the *Disabled Shakespeares* project (both Hobgood and Wood's introduction to *Recovering Disability in Early Modern England* and Iyengar's introduction to *Disability, Health, and Happiness in the Shakespearean Body* begin by narrating the shift from the medical model to the social and then cultural models of disability). But the *Disabled Shakespeares* project faces the same challenge that any theoretically inflected approach to literature faces: *Does disability theory illuminate Shakespeare's texts and contexts by enhancing our ability to understand and explain them, or does it distort them by projecting anachronistic ideas and preconceived notions onto the texts? Is this an application or an imposition of theory?*

These have been the questions asked and answered in different ways by the *Disabled Shakespeares* project and subsequent scholarship on disability in and around Shakespeare's texts.<sup>25</sup> In response, four distinct lines of argument have emerged – one historical, one methodological, one critical, and one theoretical. First, the historical argument has sought to establish "disabled" as an operational identity category in the Renaissance, a claim that, if true, would require a serious reconsideration of the widely held belief that "disability" as we now know it came into existence in the late eighteenth century. Second, the methodological argument has pointed out that modern theories of disability can be usefully (even if anachronistically) employed to understand and explain what disability is and how it works in Shakespeare's texts. Third, according to the critical argument, we can see something like the social and/or cultural model(s) of disability at work in Shakespeare's artistic vision. Fourth, the theoretical argument, instead of using disability theory to read Shakespeare, has suggested that Shakespeare's texts can be used to generate and support theories of disability.

In what follows, I address each of these arguments in turn. In brief, I reject the historical argument due to lack of evidence and imprecise argumentation. I embrace the methodological argument but draw attention to some shortcomings in its execution. I accept the critical argument but try to move beyond it. And I

celebrate the possibilities of the theoretical argument and offer my own examples of it. To be clear, however, I do not want to argue against the claims of the *Disabled Shakespeares* project as much as I want to use those readings as evidence of the imperfect ways we think and speak about the elusive problem of stigma when we encounter it in Shakespeare's texts.

## II. THE HISTORICAL ARGUMENT: "IDENTITY" OR "IDENTIFICATION"?

Shakespeare's first depiction of disability was also his funniest. It came in *2 Henry VI*, in an episode familiar from the English chronicles, the spurious miracle at St. Albans, which satirized the gullibility of a too superstitious King Henry, as Lindsey Row-Heyveld discussed in her contribution to *Disabled Shakespeares*.<sup>26</sup> A dope enters the scene hollering, "A miracle, a miracle" (2.1.59), rejoicing that today a blind man has received his sight at the shrine of St. Albans. It would be impossible for the actor playing King Henry to overplay the king's response, a sumptuous prayer glorifying the goodness of God. Named Saunder Simpcox, the blind man arrives and says that he was born blind, and moreover that his friends must now carry him around because he once fell from a tree and lost his ability to walk, one disability piled on top of another. Much more skeptical than King Henry, the Duke of Gloucester wants to know what a blind man was doing climbing trees. Then, as Simpcox vaunts his new eyesight, naming the colors he sees all around him, Gloucester points out that a man blind from birth would have no idea which color is red. Simpcox is, in Gloucester's words, "the lying'st knave / In Christendom" (2.1.123-24) and so – in a moment more Monty Python than William Shakespeare – Gloucester musters up his own miracle: he lashes Simpcox with a whip, causing the professedly lame man to jump straight to his feet and sprint off the stage, a crowd behind him crying, "A miracle!" (2.1.150sd). We laugh. We even laugh heartily, but our laughter is tinged with uneasiness when we acknowledge some of the sadly standard features of disability as it is represented in Western literature. In this scene, as in many societies, it is the "normals" who define, control, and manipulate what counts as disability; as in the New Testament of the Bible, disability is simply the platform for a display of God's power; as in modern medicine, the normal man believes it is his job to cure the disabled and eradicate disability from the earth; people are both deeply sympathetic with and deeply suspicious of someone's claim to be disabled; the disabled person meets both ridicule and violence; and, in the end, the disabled man is run off the stage and out of the sacred society of the normals.

In calling foul on a claim for the reality of disability in the Renaissance, I am doing in this section a version of what the Duke of Gloucester did to Simpcox in *2 Henry VI*, so I want to emphasize that Gloucester was right. The perpetuation of this scene, and the effect this perpetuation might have had on attitudes toward disability – including the likelihood that it legitimized or even cultivated suspicion and hostility toward persons with disabilities, as Row-Heyveld argued – is another

matter altogether. Our culture and history certainly exhibit highly undesirable traditions related to suspicion of the veracity of claims for disability and hostility toward those who are disabled but, in Shakespeare's scene, Gloucester is correct that Simpcox's disability is a forgery. I have no interest in Gloucester-like whipping anyone, of course, but I do want to exercise a little Gloucester-like circumspection regarding claims for the reality of disability in the Renaissance.

That is because the historical argument of the *Disabled Shakespeares* project is deeply flawed: it confuses the fact that we can identify examples of what we now call "disability" in Shakespeare's works with the claim that "'disabled' was an operational identity category in the Renaissance."<sup>27</sup> Hobgood and Wood have repeatedly presented this argument as a corrective to Davis, who (as noted) considers it anachronistic to talk about "disability" before the eighteenth century.<sup>28</sup> Hobgood and Wood (quoting Mitchell and Snyder) lay claim to "a new historicism of disability representations" based on the fact that "human variation, though imagined and responded to variably, has always existed," something no one can deny. They proceed to argue that "identifying disability in the Renaissance requires an acute sense of how, to echo Lois Bragg, it has been sequentially redefined over time."<sup>29</sup> Hobgood's own contribution to *Disabled Shakespeares* reiterates the importance of attending to the historically specific terms of discourse – "we need to search diligently and inventively for the terms and locations of disability in the sixteenth and seventeenth centuries"<sup>30</sup> – but Hobgood and Wood are under-diligent and over-inventive in their claim that "disabled" was an "operational identity category" in the Renaissance.

As they themselves note (quoting from the definition of *disability* in the *OED*), "The term 'disability' did not circulate in England until as late as 1545, and even then, it most often intimated something more about an individual's general incapacity than the 'fact or state of having ... a physical or mental condition' that prompted said incapacity." From a philological perspective, we must reject the notion that Renaissance writers such as Shakespeare saw "disabled" as an identity, most obviously, because those writers did not use that word in that sense, while words such as "deformed," "monstrous," and "stigmatic" abound, as well as more specific terms for more specific conditions (e.g., "blind," "lame," "mad") that were not brought together under a single rubric. There are certainly patterns in Shakespeare's treatment of the blind – Old Gobbo in *The Merchant of Venice* and the Earl of Gloucester in *King Lear*, for example, are both blind men deceived by their sons<sup>31</sup> – and there are certainly patterns in Shakespeare's treatment of epileptics – Julius Caesar, Henry IV, Othello, and Macbeth<sup>32</sup> – but Shakespeare did nothing to bring the blind and the epileptic together under a single identity of "disabled." Given their own insistence on the need to attend to the historically specific "terms and locations of disability" and the ways that disability has been "sequentially redefined over time," it is difficult to see the basis of the heroism averred in Hobgood and Wood's pledge to "rescue early modern disability narratives out of critical conversation that has often overlooked or misidentified

non-standard bodies using the compelling but restrictive language of marvelousness, monstrosity, and deformity."

Davis's argument that disability was not an "operative category" in the Renaissance is an argument about the language historically used to discuss the abnormal body, the kind of argument Hobgood and Wood claim to be making, but not the kind of argument they actually make. In fact, a closer look reveals that Davis's position is not necessarily incompatible with Hobgood and Wood's claim that "disabled" was an "operational *identity* category" in the Renaissance: note the interpolation of "identity." Davis was writing about how language was used in the Renaissance, while Hobgood and Wood were addressing how identity was formed. I will admit that I am not totally certain what an "operational identity category" is, and the phrase is not explained. The criteria by which we can determine whether or not an identity is "operational" are also unclear. On the one hand, saying that "disabled" was an "operational identity category" could mean that someone was able to think or speak of "the disabled" in the same way that he or she could think or speak of "the English" or "the Catholic" or "the royalty." If so, I am not convinced for the reason already illustrated: there is no historical record of people saying such things. On the other hand, seeing disability as an "operational identity category" could simply mean that disability, while not an explicit part of the public discourse, did exert an influence upon identity formation in the Renaissance. If so, who could argue otherwise? But if *that* is the historical argument of the *Disabled Shakespeares* project, one wonders if and when disability was ever *not* an "operational identity category." Conceivably, both Davis on the one side and Hobgood and Wood on the other could be correct: disability could have been a psychologically influential factor in identity formation in the Renaissance (as it has been in all times and places) that then became an explicit discourse in the eighteenth century.

As I see it, you can claim that disability is a timeless universal and then look at the historically specific ways it was defined and described in the Renaissance, or you can demonstrate with evidence that the discourse of disability "operant" in the eighteenth century and forward was actually "operant" in the Renaissance, but the fact that disability is a timeless universal does not demonstrate that disability was an "operant" discourse in the Renaissance. For scholars concerned with the history of ideas and language, there is value in Davis's identification of the emergence of the discourse of "disability" in the eighteenth century. Thus, the central flaw in the historical argument of the *Disabled Shakespeares* project is that it promises to offer a look into the historically specific ways in which abnormal bodies and minds were represented in the Renaissance, but then it willfully ignores the historically specific language of the period in favor of anachronistic terminology.

This slippage brings to mind the funny little set piece about Deformed in *Much Ado About Nothing*. This passage, in which the Watches eavesdrop upon the criminals Conrade and Borachio, is not about deformity. It is initially about fashion, but it is really about confusion, and the word "deformed" is used rather casually:

*Con.* Yes, the fashion is the fashion.

*Bora.* Tush! I may as well say the fool's the fool. But seest thou not what a deformed thief this fashion is?

2. *Watch.* [*Aside*] I know that Deformed; a' has been a vile thief this seven year; a' goes up and down like a gentleman: I remember his name....

*Bora.* Seest thou not, I say, what a deformed thief this fashion is? how giddily a' turns about all the hot bloods between fourteen and five-and-thirty? sometimes fashioning them like Pharaoh's soldiers in the reeky painting, sometime like god Bel's priests in the old church-window, sometime like the shaven Hercules in the smirched worm-eaten tapestry, where his codpiece seems as massy as his club?...

2. *Watch.* We charge you, in the prince's name, stand!

1. *Watch.* Call up the right master constable. We have here recovered the most dangerous piece of lechery that ever was known in the commonwealth.

2. *Watch.* And one Deformed is one of them: I know him; a' wears a lock.

*Con.* Masters, masters –

2. *Watch.* You'll be made bring Deformed forth, I warrant you.

(3.3.122-73)

As a description of what kind of thief the thief in question is, Borachio's word "deformed" is nothing more than a vigorous synonym for "bad," "horrible," or some other adjective of approbation. In the ears of the inept Watches, however, the adjective "deformed" is mistaken for a noun, even a proper noun, effectively personifying the adjective as a substantive being. They believe there is a person named Deformed, but the characters in *Much Ado* cannot "bring Deformed forth," of course, because Deformed does not exist. He was invented by those who heard the word "deformed" and then confused the suggestion of something for the reality of that thing.

Theorizing outward from this passage (and here I am gesturing forward to the conclusion of this essay), the social phenomenon we might term *Knowing Deformed* involves a claim to have access to and knowledge of an identity which has actually been entirely invented by the person making the claim. To *Know Deformed* is to observe (through considerable obfuscation) the discourse of deformity and then to assert, quite mistakenly, not only the reality of a thing called "Deformed," but also one's ownership of the true meaning of that thing. What is actually happening here, however, is that the observer is laying claim to something he or she invented in the first place – truly *Much Ado About Nothing*.<sup>33</sup> "Deformed" is "nothing" – *not a thing* – but the thinglessness of Deformed, its inventedness, does not stop observers like the Watch from believing in its existence.

I fear that a similar dynamic is at work in the *Disabled Shakespeares* project. Those arguing for the existence of "disabled" as an operational identity category in

the Renaissance have been trying to "bring Disabled forth." They have not yet been able to do so, and the danger is that they have invented the reality of "disabled" in the Renaissance just as Shakespeare's characters invented the reality of Deformed. Scholars in the *Disabled Shakespeares* project seem to have mistaken their impression of a situation for some external reality, to have mistaken their own *identification* of examples of disability in Renaissance texts for the historically specific reality of disability as an *identity* category in the Renaissance.

### III. THE METHODOLOGICAL ARGUMENT: POSSIBILITIES AND LIABILITIES

Without getting into a historical debate about the status of "disability" as a discourse in the early-modern age, modern theories of disability can be usefully employed, as Katherine Schaap Williams put it in her contribution to *Disabled Shakespeares*, "with deliberate anachronism" to unpack Shakespeare's texts.<sup>34</sup> This observation, which can hardly be denied, has the potential to open up for us new and important readings of Shakespeare's texts, but it also has certain liabilities: there is a tendency when doing disability-inflected readings to both under-read and over-read Shakespeare's texts.

For example, consider Hobgood's contribution to *Disabled Shakespeares*, which used Davis's work in Disability Studies to discuss how, in *Julius Caesar*, "the body is never a single thing so much as a series of attitudes toward it."<sup>35</sup> Hobgood argued that epilepsy was problematic for Renaissance definitions of disability because epilepsy is not corporally visible, a cultural tension manifested in *Julius Caesar* through the multiplicity of meaning given to epilepsy as well as the absence of an actual epileptic fit on stage, such that – for Hobgood – *Julius Caesar* subverted the common Renaissance conception of disability (as always visible) and illustrated the fact that "disabled" was an operant identity distinct from "deformed." Curiously, Hobgood avoided a close reading of Caesar's epilepsy in light of its most obvious context, Plutarch's *Lives*, which was Shakespeare's main source for the play. As such, Hobgood overlooked the hugely important fact that, in Shakespeare's play, Caesar's epileptic fit is feigned, an innovation that departs significantly from the traditional treatment (and could be revealingly connected to Row-Heyveld's work on feigned disability). Historically speaking, Caesar had epilepsy, or at least Plutarch said he did, and Shakespeare's Caesar could conceivably have it too (Shakespeare's Cassius says he saw one of Caesar's epileptic fits [1.2.119-31], an event drawn from Plutarch).<sup>36</sup> But Shakespeare's Caesar is also an accomplished actor, one who can act epilepsy on cue.

Mark Antony thrice offers Caesar the crown of Rome, and Caesar thrice refuses it, playing the coy mistress. To Caesar's surprise, however, his audience applauds his rejection of Roman rule. In response, like an indignant schoolgirl set to rob the world of the pleasure of her existence, Caesar offers to cut his own throat, but he then sees better means to his end. He feigns an epileptic fit, as Casca narrates:

Marry, before he fell down, when he perceived the common herd was glad he refused the crown, he plucked me ope his doublet and offered them his throat to cut. An I had been a man of any occupation, if I would not have taken him at a word, I would I might go to hell among the rogues. And so he fell. When he came to himself again, he said, If he had done or said any thing amiss, he desired their worships to think it was his infirmity. Three or four wenches, where I stood, cried 'Alas, good soul!' and forgave him with all their hearts: but there's no heed to be taken of them; if Caesar had stabbed their mothers, they would have done no less. (1.2.263-75)

Comparing Caesar to "the players in the theatre" (1.2.260-61), Shakespeare explicitly drew attention to the theatricality of the performance, after which the audience, overcome with pity, embraces the suffering Caesar. What Shakespeare showed in this episode is the remarkable malleability of the meaning of physical affliction, his play dramatizing the making of multiple meanings. For, in this episode, epilepsy has three meanings, maybe more, depending on who is making the meaning. To Caesar, his false epileptic fit is a sign of his strength, his political acumen, his ability to manufacture public sentiment about himself and control his own destiny. To the crowd, it is a sign of his weakness, of his humanity and mortality, and therefore his likeness to them. To Cassius, the falling Caesar is a sign of a falling Rome, on the order of the king's – or in this case the emperor's – two bodies: "No, Caesar hath it not; but you, and I, / And honest Casca, we have the falling sickness" (1.2.255-56). To us in the audience, Caesar's seizure is not a sign, as in a symbol with a static sense, but an empty marker, as in a placeholder for symbolization; it is a moment that collects the multiple meanings we make of disabilities, meaning-making that Shakespeare actually dramatized on stage.

From this perspective, *Julius Caesar* was not simply a manifestation of the competing cultural discourses that Hobgood, in typical new historicist fashion, emphasized: "Situated at the juncture of myriad disability discourses, the play is informed by Hippocratic pathology, medieval marvelousness, Renaissance monstrosity, Galenic humoralism, and seventeenth-century rationalism." A closer reading of Shakespeare's actual text would have revealed that he had a more active and meaningful role in the representation of Caesar's epilepsy than Hobgood allowed. The Plutarchan context helps us see that Shakespeare himself recognized, represented, and commented upon the making of the meaning of a disability like epilepsy by dramatizing the interpretation of it rather than the thing itself. Shakespeare, by filtering the off-stage episode through Casca's perspective and narration, literally did not represent disability. What Shakespeare actually represented was stigma, the making of the meaning of abnormality: not only Casca's interpretation of Caesar's epilepsy, but even Casca's interpretation of other interpretations of it. In other words, the making and remaking of the meanings of epilepsy in the period is not just something we can retroactively identify, as Hobgood did. It is something Shakespeare identified in the moment. *Julius Caesar*

does not attest to disability as an "operant identity category" as much as it illustrates that stigma – the creation of the meaning of abnormality – was an acute artistic concern for Shakespeare.

If there was a missed opportunity in Hobgood's reading of Caesar's disability, there was simply a misreading in Rachael Hile's contribution to *Disabled Shakespeares*, an account of Katherine in *The Taming of the Shrew*.<sup>37</sup> Hile suggested that Katherine is actually disabled, that her frustration with being disabled contributes to her shrewishness, that she should therefore be played as disabled in performance, and that any resistance to this reading stems from an outdated, oppressive, normative cultural aesthetic that basely values the physical over the mental, moral, and spiritual. Unfortunately, this suggestion mistakes a dubious for a necessary reading, disparages those who do not accept it, and is in fact a selective reading that can only be arrived at by willfully ignoring the evidence against it.

In *The Taming of the Shrew*, the lines about Katherine's limp come in the context of Petruchio's plainly professed attempt to confound Katherine by contravening the evident sense of things. Even though he has not, Petruchio claims that he has heard that Katherine is coarse, coy, and curt, while he finds her pleasant, playful, sweet, sincere, soft, affable, mild, kind, and courteous, a flattering description of Katherine that clearly contradicts the direct evidence we have of her character from earlier in the play. Then, even though (again) he has not, Petruchio claims he has heard that Katherine limps when she walks, while he finds her to stand straight and walk with a lovely gait:

Why does the world report that Kate doth limp?  
O sland'rous world! Kate like the hazel-twig  
Is straight and slender, and as brown in hue  
As hazel-nuts, and sweeter than the kernels.  
O, let me see thee walk. Thou dost not halt. (2.1.252-56)

Obviously, there is no way to confirm what Petruchio has previously heard about Katherine, or the accuracy of his statement about her body, but both are likely fabrications. Moreover, the reading that insists upon a disabled Katherine reveals a tendency in some Disability Studies scholarship to project disability upon someone who may not have, need, or want that identity, and to reduce that person to an extension of that disability, much like a single passage being plucked out of context and bullied into changing the entire meaning of a play. The Disability Studies reading of Katherine is certainly well-intentioned, coming as it does in a plea to reject the cultural aesthetic of *kalokagathia*, "the beautiful in the good," but in distorting the play to fit its polemic, this reading actually stigmatizes a character by performing the very error it complains of: allowing an ideological commitment to skew our image of the world we ought to interpret from the ground up.

Significantly, something similar happens in Hobgood's reading of Caesar's epilepsy. Once she has identified Caesar as disabled, Hobgood then locates disability as the

core of his identity and discusses how the disabled Caesar is able "to 'pass' as 'normal'."<sup>38</sup> It is tempting to say that the logic here is absurd: a character who has a hint of disability imagery attached to him, but for the majority of the play seems to be quite able-bodied is claimed, by a critic, actually to be a disabled person passing as normal. But this imaginative invention of the hidden backstory of a character vaguely associated with disability is precisely the interpretive game that Shakespeare's text requires, and here the theoretical resources of Disability Studies are valuable. The game is a dangerous one, however, precisely because it encourages the projection of our own perspective onto the text, which can lead us to confuse our interpretation of a disability for something inherent in the character we are interpreting. The game leads us to claim, *I know that Deformed* (or *I know that Disabled*), a claim we tend to make, of course, not only about literary characters, but also about actual people with disabilities.

In sum, the potentials of Disability Studies interpretations of Shakespeare's texts need to be measured alongside the pitfalls of that approach: the theoretical lens of disability can lead us to misread Shakespeare's texts, and it can bring us to see only part of the story. Obviously, misreadings and missed opportunities are issues that arise in any field of literary criticism but, in the case of the *Disabled Shakespeares* project, they are closely connected to the application of a theoretical model which does not fully accord with the texts in question. I hope this critique does not come across as a cranky historicism or old-fashioned new criticism which sees no virtue in theoretically juiced readings of Shakespeare, for I believe just the opposite. We don't need to get rid of theory; we just need better theory. We need to be both more rigorous and more ambitious in our search for the terms with which to account for the abnormal body in Shakespeare's drama.

#### IV. THE CRITICAL ARGUMENT: FROM *DISABILITY* TO *STIGMA*

The critical claims of the *Disabled Shakespeares* project have been largely exegetical (focused on single texts) and exploratory (interested more in questions than in answers), but there has been a strong suggestion that the constructivist models of disability (the social model and the cultural model) were at work in Shakespeare's dramatic vision. I have already mentioned Hobgood's argument that *Julius Caesar* "acknowledges, as Lennard Davis might suggest, that 'the body is never a single thing so much as a series of attitudes toward it'."<sup>39</sup> In a reading of *Henry VIII*, Mary Nelson similarly argued that Katherine of Aragon and Anne Boleyn do not have a disability as it is defined in the medical model, but they do have one as it is defined in the social model, "in keeping with many disability theorists' belief that disability is largely socially constructed."<sup>40</sup> In his reading of *Othello*, David Houston Wood capitalized upon the redefinition of "disability" in the social model in an effort to reconceptualize the play's "overt racism": "What is not so apparent is the way we might treat such concepts as, in any sense, *disability*."<sup>41</sup> In her reading of *Richard III*, Williams lamented the critical tendency to think that "'disability' signif[ies] bodily impairment and not a more complex relationship

between Richard's body and his audience within and outside the play."<sup>42</sup> Abigail Comber also exploited the distinction between impairment and disability for a reading of *Richard III*: "The field of disability studies shows us that people are never just physically impaired; they are always affected by and disabled by their societies and all the constructs which those societies create to prescribe meaning to difference"; as such, Comber argued, Shakespeare's Richard III is "disabled by an amalgamation of the religious, political, social and dramatic contexts and prejudices of society."<sup>43</sup> Sujata Iyengar drew upon the same distinction for a reading of Sonnet 66, which, she wrote, "alerts us to the complex negotiations among impairments and disabilities."<sup>44</sup> In their introduction to *Recovering Disability in Early Modern England*, Hobgood and Wood implied (though stopped short of explicitly arguing) that the nuance of the cultural model has more traction in the texts of Shakespeare and his contemporaries than the reactionary political radicalism of the social model.<sup>45</sup> Wood did the same (implying the virtue of the cultural model without arguing for it) in his 2013 reading of *Richard III*.<sup>46</sup>

It seems to me that, if you conduct a rhetorical analysis attending to the ways Shakespeare used the word *disability*, you can convincingly ascribe to his works a social model of disability, but (because of the redefinition of "disability" in the social model) that analysis won't tell you anything about Shakespeare's representation of physical and mental impairment. Consider the scare quotes in Iyengar's gloss on the Prince of Morocco: "He is 'disabled' in Portia's eyes" because she is "prejudiced against his dark skin."<sup>47</sup> Is that really "disability" in any meaningful sense? Meanwhile, if you conduct a literary analysis attending to the ways Shakespeare represented the disabled body, you can convincingly illustrate how his works exhibit a cultural model of disability, but (because disability did not become an "operant category" until the eighteenth century) Shakespeare did not think about such things in such terms. Moreover, if you end your analysis with either of those conclusions, you will miss what is most remarkable about Shakespeare's representation of disability. You will miss the invention of stigma. Shakespeare was the first writer in Western history to recognize that people who are marked off as inherently inferior, while they may be so marked for different reasons – variously related to physical deformity, racial minority, mental disability, radical criminality, bastardy, and idiocy – experience similar social and psychological situations in life.

In fact, attempts to locate the social model of disability in Shakespeare's drama can distort both the concept of disability and the content of Shakespeare's plays. Consider Hobgood and Wood's conclusion to *Recovering Disability in Early Modern England*, which finds disability in Shakespeare's text where there is none, "exploring, for example, how Aaron's blackness in *Titus Andronicus* could be 'disabling' yet was not 'disability,'" or "positing Edmund's illegitimacy as a very broad form of impairment."<sup>48</sup> From the perspective of rigor and accuracy, it is, of course, worrisome to call things that aren't disabilities "disabilities" (this is the common-sense critique of the social model of disability). But I also worry that using

the terms of disability studies to describe things that aren't disabilities – like Aaron's race and Edmund's bastardy – turns the concept of disability into what disability scholars themselves call a *narrative prosthesis*, a metaphor that aids one's agenda by exploiting the emotional and conceptual grip that disability exerts upon us without attending to the actual realities of disability.[49](#)

To be sure, it is important to observe that the treatment of an Aaron or an Edmund resembles that of a disabled character like Richard III, but we should not project the language of disability outward from Richard to Aaron and Edmund. Instead, we need to change the terms of our discussion, for the field of Disability Studies, in and of itself, cannot account for the fact that Richard III (a physically marked character), Aaron the Moor (a racially marked character), and Edmund the Bastard (a hereditarily marked character) all belong to the same representational system. A better vocabulary presents itself in Erving Goffman's theory of *stigma*, which influenced the development of Disability Studies but is more far-reaching because it attends to all manner of discredited differences. Indeed, by using the same system to represent a Richard, an Aaron, and an Edmund, Shakespeare anticipated by nearly 400 years what Goffman argued in his book *Stigma*: "Stigmatized persons have enough of their situations in life in common to warrant classifying all these persons together for purposes of analysis" (146-47). For his part, Goffman identified three kinds of stigma – physical ("abominations of the body"), behavioral ("blemishes of individual character"), and racial ("the tribal stigma of race, nation, and religion" [4]). But Goffman only detailed these different kinds of stigma in order to suggest that, while they are distinct in their origin and presentation, there exists a single system that governs them all because the stigmatized acquire meaning not from what they *are* but from what they are *not*, namely normal. Shakespeare's list of the different kinds of stigma is slightly different than Goffman's but, like Goffman, Shakespeare used a single system to think about and represent different kinds of differentness: physical deformity (as in the examples of Richard III, Falstaff, and Caliban), racial minority (as with Aaron the Moor and Shylock the Jew), and bastardy (as with Don John and Edmund).

As Jeffrey Brune has pointed out, one limitation in Goffman's study is that he wrote from the perspective of the "normals."[50](#) Goffman's repeated phrase "we normals" rubs a lot of people (including me) the wrong way, especially in our age of nothing-about-us-without-us Disability Studies. This limitation in Goffman's study, however, could actually be a virtue when marshalling Goffman's theory in an attempt to approximate Shakespeare's attitude toward stigma: both Shakespeare and Goffman addressed the problem of stigma from the self-appointed perspective of the "normals." On the whole, because Goffman's theory of stigma is inextricable from his dramaturgical approach to sociology, and because the discourse of Disability Studies is limited in the account of Shakespeare that it can provide, the vocabulary of *stigma* is better suited than that of *disability* to elucidating the ways Shakespeare dramatized his characters making meaning of abnormality.[51](#)

## V. THE THEORETICAL ARGUMENT: KNOWING DEFORMED

The theoretical argument of *Disabled Shakespeares* – which to me is the most exciting and promising aspect of the project, but also the most elusive – observes that, rather than using disability theory to read Shakespeare's texts, we can use Shakespeare's texts to generate and support theories of disability that have the potential to illuminate and influence our lived experience with disability. The model for this approach would have to be Sigmund Freud's groundbreaking theory of "the exceptions" – those who rationalize crime as their right given the crime nature committed against them at birth – which grew out of a reading of Shakespeare's *Richard III*.<sup>52</sup> More recently, Robert McRuer has used *Richard III* to theorize the way we "take pleasure in representations of any and every normal body's undoing"; that is a remarkable idea.<sup>53</sup> Taking a similar approach in a pair of essays about *Richard III*, Williams has argued, in the first, that the play shows "the possibility that bodily difference may actually be enabling" (although I find it bizarre to hold up a homicidal maniac as a model citizen) and, in the second, that the play "reworks early modern 'disability' from fixity to indeterminacy" and "indistinction" such that "we must rethink disability around the slipperiness and incoherence – rather than fixity – of the concept of deformity."<sup>54</sup> Williams has also pointed to *Richard III* as evidence that disability can be a "theatrical asset" for a play because of the heightened performance it necessarily requires (in both physical and emotional terms) from an actor.<sup>55</sup> Citing Williams, Tobin Siebers theorized that "disability studies takes Richard III as its standard-bearer" because "many critics in disability studies are eager to embrace a standard-bearer who suggests that power lies within the grasp of disabled people."<sup>56</sup>

For their part, in their introduction to *Recovering Disability in Early Modern England*, Hobgood and Wood (drawing upon the work of disability theorist Rosemarie Garland-Thomson, who was herself working off of theories developed by Susan Sontag and Elaine Scarry) call for "ethical staring" at early-modern disability: "We have not been staring hard or well enough at representations of disability right beneath our noses," Hobgood and Wood write: "The encounters we have had with those representations – the ways we stared upon finally recognizing them – should better reflect efforts toward ethical beholding."<sup>57</sup> Clearly influenced by the activist edge of the social model of disability, they feel that "ethical staring" can "subvert" the "compulsory able-bodiedness that insidiously excludes, stigmatizes, and devalues difference" in the Western tradition (3). Because "normativity requires and rewards the repression or forgetting of disability difference" (3), they argue, we need to acknowledge both the prominence of disability in society and the exclusion of disability in both politics and academia. As a part of this acknowledgement, we need to recognize the extent of disability representations in the early-modern age because, if we stare ethically, we can "make the unknown known" (2). In other words, we can cultivate a "transformative scholarship" (1) in which our search for truth in an academic setting is politically efficacious.

Hobgood and Wood's "ethical staring" comes into conflict with my own version of the theoretical approach to disability in Shakespeare's text, the notion of *Knowing Deformed*. I submit that, while ethical staring is better than both unethical staring and willful disregard of disability, it needs to be acknowledged that ethical staring is not the end but the beginning of the problem of stigma. In modern life and in Shakespeare studies alike, stigma is an acute and intractable problem precisely because it is approached ethically – i.e., with sensitivity, thoughtfulness, and good intentions. The fraughtness of the situation stems from the fact that interactions between individuals inevitably carry the weight of imagined interactions between stereotypes ("the stigmatized," "the normals"), including imputed motives both malignant and beneficent, such that expectations on both sides of the interaction preclude and condition direct experience. Ethical staring is certainly a noble pursuit, but even our finest ethical impulses can be thwarted when we get up close and personal (too close for comfort?) with Shakespeare's representations of disability. In other words, the obstinence and power of stigma can trump even the best intentions of ethical staring.

If we shift from an ethical to an analytical stance, we can observe that we encounter the hints of disability in Shakespeare's texts much as we encounter the hints of disability out on the street. Both situations are often defined by efforts to determine if disability is in fact present and, if so, how it has affected someone's life and how we should act. Is there really a disability at hand? Should an acknowledgement be made? I want to do the right thing, but I don't want to assume too much. There is a suggestion of disability in many of Shakespeare's texts, but only a suggestion, and I worry that making too much out of disability is a projection of what I know about how disability works in the modern world onto an early-modern character who neither calls nor needs to be understood as "disabled." I worry that placing too much emphasis on disability forces Shakespeare's characters to be something they are not and that the author did not want them to be. Labeling a given character who has (or seems to have) an impairment as "disabled" could illuminate hidden aspects of that character's backstory and help us elucidate his or her actions, but doing so could also lead to over-readings that assume too much.

It is a matter of "identification," to quote Goffman, "in the criminological and not the psychological sense."<sup>58</sup> The trouble with disability in Shakespeare's texts involves the extent to which we can jump from an observation of another's behavior ("he seems to have a disability") to a knowledge of that person's identity ("he is disabled"). Once an identification has been made, we both lay claim to the hidden backstory of another and adjust the way we interact with that person, but there is, of course, the danger of misidentification and, moreover, the inescapable fraughtness and uncertainty of the interaction. I would add that this phenomenon is remarkably resonant with what has been called the central problem of modern philosophy, "the problem of the other," as well as what the philosopher Stanley Cavell has identified as a central concern in Shakespearean drama, the problem of

knowing others' minds.[59](#)

In Shakespeare's plays, as in life, it is often difficult if not impossible to gain intimate, particular, personal information about a seemingly disabled character. Even in the case of Richard III, where we get an information overload, we usually encounter disability in Shakespeare's text as hints and suggestions, possible signs of disability that confirm neither what is true nor how we should act. "A hunchback, the text tells us, yes; but a disability, the text tells us, no," as Abigail Comber has written of the possibility of Richard's disability.[60](#) The same could be said of Caliban. What follows from these hints and suggestions is guesswork about the identity of the disabled other.

Consider how some critics think that Shakespeare was himself disabled based on a brazenly literal reading of some fairly fleeting lines in the *Sonnets*.[61](#) In one sonnet, Shakespeare says he was "made lame by fortune's dearest spite" (37.3), suggesting a disability derived from some birth defect, or perhaps an accident, and elsewhere Shakespeare vows, "Speak of my lameness, and I straight wilt halt" (89.3). To say that the argument for a disabled Shakespeare is guilty of the biographical fallacy is merely to state the obvious; all we can say with certainty about the author is that he was keenly interested in the abnormal body. To note, however, that the persona created by the author, not Shakespeare but his speaker, is disabled is to entertain an observation that could radically alter our reading of the *Sonnets*. The perennial problem of these poems – the extent to which each sonnet participates in a sequence[62](#) – is a matter of literary criticism, but it is also remarkably resonant with an issue that arises in our examination of stigma: is a difference from some cultural norm an isolated aspect of an individual's identity, or does it define that individual? When we come across the lines about lameness in the *Sonnets*, we are reluctant to sweep aside what may be a considerable source of pain, suffering, and identity for the speaker, but we also worry that we might impute an inaccurate mental history on this individual if we emphasize his disability too much. If Shakespeare meant for his sonneteer to have a disability, even though it is only acknowledged obliquely, we are likely to make major mistakes in our analysis of this character if we overlook this fact. If, however, we assume that the speaker is disabled, and realign our entire understanding of the sonnets on that assumption, we risk reducing that character to an extension of that disability in a way that clearly does not capture the complexity of the character that Shakespeare created.

As another example, consider that in Italian, the word *gobbo* means "hunchbacked," and some scholars have squeezed this term to suggest that the Launcelot Gobbo of *The Merchant of Venice* is, like Richard III and Caliban, physically deformed.[63](#) It must be said that this reading receives no support from the text; Shakespeare did not thematize deformity with Gobbo as he did with Richard and Caliban, although, formally speaking, Gobbo does occupy a place in the structure of the play similar to that of Shakespeare's stigmatized characters, not only Richard and Caliban, but indeed Shylock himself. Like Shylock, who may

or may not have been stigmatized with an artificial nose on the Elizabethan stage – we don't know<sup>64</sup> – Gobbo may or may not have been played as a hunchback: the keynote of stigma in *The Merchant of Venice* is uncertainty. Because Shylock and Gobbo mirror each other, and each is possibly but not certainly stigmatized in his body, it is tempting to think that Shakespeare did indeed have the concept of stigma in mind as he was crafting these characters, though we have no stable footing on this issue, which is exactly the point. Gobbo's hunchback and Shylock's nose are both question marks. In *The Merchant of Venice*, as in life, the presence of stigma is beset with uncertainty, its operation with uneasiness, and its outcome with a mixture of happiness and sadness.

These examples attest to the difficulty of determining if disability is even present in Shakespeare's texts, but the dynamics of stigma persist even when we know for a fact that it is. Consider, as one final example, the fact that there are six fully cogent readings of Old Gobbo's blindness. The first is the most literal, but perhaps also the most overlooked: old age is disabling.<sup>65</sup> If we consider Old Gobbo as a blind man, and nothing more, his exchange with his son is remarkably unsettling. It is hard to imagine a greater cruelty than the confusions which Launcelot uses to ensnare his disabled father and the blindness exploited to affect them. Our readiness to laugh along with Launcelot relates to a second reading of Old Gobbo's blindness, one which also comes from the perspective of Disability Studies, specifically from the notion of disability as a "narrative prosthesis." Without really representing the personal or social reality of disability, Shakespeare used Old Gobbo's blindness as an easy way to characterize Launcelot as a clown. Alongside these readings that take disability at face value, and critique the trappings of our failures to do so, are some (more traditional) readings that trek beyond the literal to the figurative meanings of Old Gobbo's blindness.<sup>66</sup> A third reading personifies the proverb that "love is blind," revealing a surprising parallel between Old Gobbo and the blinded Earl of Gloucester in *King Lear*.<sup>67</sup> There are a couple of lines in *Merchant* that suggest Launcelot may be a bastard son of Old Gobbo's (3.5.7 and 13), just as Edmund in *King Lear* is the bastard son of Gloucester, who later becomes blind, like Old Gobbo, partly to symbolize the random, unreasoned, reckless, blind lust of the adulterer. The fourth reading of Gobbo's blindness refers to another proverb, "Fortune is blind," perhaps alluding to Launcelot's future having just decided to flee from Shylock's service.<sup>68</sup> In a fifth reading, it is neither love nor fortune but justice that is blind, specifically the justice of the Old Testament that Old Gobbo represents (as does "Old Shylock," as he is called in the text [2.5.2]) in contrast to the mercy of the New Testament for which Launcelot stands (alongside his new Christian masters). As several critics have noted, this allegory of justice and mercy – the Old and the New, the elderly and the young – operates (in a sixth possible reading) with reference to the Biblical story of Esau, Jacob, and their blind father, Issac. Like Launcelot, Jacob deceives his blind father, an event that is read typologically in Renaissance Bible commentaries: just as Israel (Jacob) supplanted the Edomites (Esau), the Christians supplanted the Jews. As rich or open as Old Gobbo's blindness is, nothing prevents us from believing Shakespeare had all or none of

these meanings in mind as he worked out this fleeting scene. In other words, we as an audience experience Old Gobbo's blindness as we as humans experience anyone's blindness: it comes to us as both a visceral, creaturely disability and an unintentional, unwitting metaphor laden with meaning, and we do not know whether to announce ourselves and our good intentions or to step aside and stand in silence as the blind person passes us by.

There is generalizable phenomenon at work here, one which relates to the philosophical problem of the other, understood as that which is not oneself, as well as the social problem of others, understood as those whose bodies and backgrounds are tagged as different and deviant from cultural norms. The awkward ways in which we encounter disability in Shakespeare's texts – the psychological, social, and ethical guesswork we enter into – appear in our day-to-day encounters. Shakespeare's texts, and specifically the stigmatized characters in them, reveal that the problem of the other is intricately bound up with the problem of the self.

The trouble with disability in Shakespeare's drama and in society is a first-order problem of knowledge and certainty: we often cannot know the identity of the characters and people we identify as disabled. There is an irresolvable tension between *identification* and *identity*. We can only observe those characters. We can look at them and listen to them – even ethically stare – but we cannot talk *with* Shakespeare's characters. When we try to, we are only talking with ourselves, which means that we are always speaking for them. The other that we seek to understand is and always will remain a mystery, while the other that we lay claim to is and always will be our own invention. *Knowing Deformed*, we should remember, is something Shakespeare satirized because it is *Much Ado About Nothing*. Claiming knowledge of the identity of another is a psychological game we play with ourselves in an effort to assert access to something that quite plainly does not exist – the identity of the other – except that, of course, the identity of the other does exist, only not as we would like. The identity of the other exists in two senses: (1) as the reality of the other to which we never have access, and (2) as the impression of the other to which we always have access but only because it is our own invention in the first place. What follows is the endless conversation we have in our own minds between ourselves-as-ourselves and ourselves-as-others. True knowledge of the other logically cannot emerge from this inner dialogue, which is not to say that the dialogue is totally pointless. A better, more thoughtful, more humane ethic of action can and almost inevitably does emerge from our inner conversation, but so does uncertainty, anxiety, and miscalculation. The frustration we inevitably feel when we cannot lay claim to knowledge of another always cycles back into our actions and demeanor, which in turn make the situation fraught, awkward, tense, and uncomfortable.<sup>69</sup>

Thus, the encounter with disability in Shakespeare's works is not only analogous to the same encounter in our daily lives; it is representative of the problems of knowledge, certainty, and intersubjectivity that have been central to modern thought and life since Enlightenment philosophers first wrestled with the problem of

the other. And the encounter with disability in Shakespeare's works prompts both very current social questions about the place of those who are different from the norm, and very ancient philosophical questions about the difficulty knowing who or what someone is. The reciprocity between the philosophical problem of the other and the social problem of others is focused in Shakespeare's texts which – part philosophical reflection (i.e., meditation), part social reflection (i.e., mirroring) – allow us to witness and discuss the slippery conceptual issues implicated by our most routine social interactions.

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## Endnotes

1. Henri-Jacques Stiker, *A History of Disability* (1982), trans. William Sayers (Ann Arbor, MI: University of Michigan Press, 1999), 1.  
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2. See *Disabled Shakespeares*, ed. Allison P. Hobgood and David Houston Wood, a special section of *Disability Studies Quarterly* 29.4 (2009), <https://doi.org/10.18061/dsq.v29i4>; *Recovering Disability in Early Modern England*, ed. Hobgood and Wood (Columbus: Ohio State University Press, 2013); and *Disability, Health, and Happiness in the Shakespearean Body*, ed.

Sujata Iyengar (New York, NY: Routledge, 2015).

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3. David Houston Wood, "Shakespeare and Disability Studies," *Literature Compass* 8.5 (2011), 280. <https://doi.org/10.1111/j.1741-4113.2011.00803.x>

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4. On the relationship between disability and anxiety, see Ato Quayson, *Aesthetic Nervousness: Disability and the Crisis of Representation* (New York, NY: Columbia University Press, 2007).

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5. "disable, v.," in *Oxford English Dictionary*, second ed. (Oxford: Oxford University Press, 1989), *OED Online*, def. 1.

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6. "disability, n.," in *Oxford English Dictionary*, def. 2.

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7. "disabled, adj. and n.," in *Oxford English Dictionary*, def. 1.

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8. For the seventeenth-century instance of "the disabled," see Philip Vincent, *The Lamentations of Germany* (London: E. G. for Iohn Rothwell, 1638), 51. For Shakespeare's use of "disabled" in the medical sense, see *Sonnets*, 66.8. All references to Shakespeare's works are to *The Riverside Shakespeare*, second edition, ed. G. Blakemore Evans and J. J. M. Tobin (Boston: Houghton Mifflin, 1997).

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9. Lennard J. Davis, *Bending over Backwards: Disability, Dismodernism, and Other Difficult Positions* (New York: New York UP, 2002), 50-52. See also Davis, *Enforcing Normalcy: Disability, Deafness, and the Body* (London: Verso, 1995): "Disability, as we know the concept, is really a socially driven relation to the body that became relatively organized in the eighteenth and nineteenth centuries" (3).

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10. These data points come from *Early English Books Online* ([eebo.chadwyck.com](http://eebo.chadwyck.com)), where I did a keyword search for *deformity*, *disability*, *deformed*, and *disabled* with the date limited to 1564-1616 (*EEBO* automatically searches for variant spellings, e.g. *defourmed* or *deformyd*).

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11. Sujata Iyengar, "Shakespeare's 'Discourse of Disability'," in *Disability, Health, and Happiness in the Shakespearean Body*, 9.

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12. Vin Nardizzi, "Disability Figures in Shakespeare," in *The Oxford Handbook of Shakespeare and Embodiment: Gender, Sexuality, and Race*, ed. Valerie Traub (Oxford: Oxford University Press, 2016), 458.

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13. See Josef Warkany, "History of Teratology," in *Handbook of Teratology*, ed. J. S. Wilson and F. Clarke Fraser (New York, 1975): 3-45; Leonard F. Peltier, "The Origin of Orthopedics," in *Orthopedics: A History and Iconography* (San Francisco, CA: Norman Publishing, 1993): 20-40.

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14. See Alfred Adler, *Study of Organ Inferiority and its Psychological Compensation* (1907), trans. Smith Ely Jelliffe (New York, NY: The Nervous and Mental Disease Publishing Company, 1917), <https://doi.org/10.1037/10734-000>; Beatrice A. Wright, *Physical Disability: A Psychological Approach* (New York, NY: Harper & Brothers, Publishers, 1960), <https://doi.org/10.1037/10038-000>.

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15. See Erving Goffman, *Stigma: Notes on the Management of Spoiled Identity* (New York, NY: Simon & Schuster, 1963). The term *intersectionality* (referring to the convergence of systems of discrimination directed toward different identities) was coined by Kimberlé Crenshaw, "Mapping the Margins: Intersectionality, Identity Politics, and Violence Against Women of Color," *Stanford Law Review* 43.6 (1991): 1241-99, <https://doi.org/10.2307/1229039>. The most recent edition of the *Disability Studies Reader*, ed. Lennard J. Davis, 4<sup>th</sup> ed. (New York, NY: Routledge, 2013) was revised to include an entire section on "Identities and Intersectionalities" (263-380).

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16. Goffman, *Stigma*, preface.

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17. Jeffrey A. Brune and Rosemarie Garland-Thomson, "Reflections on the Fiftieth Anniversary of Erving Goffman's *Stigma*," *Disability Studies Quarterly* 34.1 (2014), <https://doi.org/10.18061/dsq.v34i1.4014>

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18. For this story and the critique, see Tom Shakespeare, "The Social Model of Disability," in *The Disability Studies Reader*, 214-21.

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19. See Shakespeare, "The Social Model of Disability."

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20. See Lennard J. Davis, *Enforcing Normalcy: Disability, Deafness, and the Body* (London: Verso, 1995); Rosemarie Garland-Thomson, *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature* (New York, NY: Columbia University Press, 1997); Simi Linton, *Claiming Disability: Knowledge and Identity* (New York, NY: New York University Press, 1998); James I. Charlton, *Nothing About Us Without Us: Disability Oppression and Empowerment* (Berkeley: University of California Press, 1998), <https://doi.org/10.1525/california/9780520207950.001.0001>; David Mitchell and Sharon Snyder, *Narrative Prosthesis: Disability and the Dependencies of Discourse* (Ann Arbor: University of Michigan Press, 2000); Catherine J. Kudlick, "Disability History: Why We Need Another 'Other'," *The American Historical Review* 108.3 (June, 2003): 763-93, <https://doi.org/10.1086/529597>; and Tobin Siebers, *Disability Theory* (Ann Arbor: University of Michigan Press, 2008), <https://doi.org/10.3998/mpub.309723>.

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21. Sharon L. Snyder and David T. Mitchell, introduction to *Cultural Locations of Disability* (Chicago: University of Chicago Press, 2006), 10. Snyder and Mitchell introduce the cultural model by noting that "Goffman's theory of stigma and [Judith] Butler's deconstruction of sex/gender binaries have been influential to cultural model discourses because they formulate theories of passing, psychic formation, and materiality as social process" (7).

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22. See Wright, *Physical Disability*, Chapter 9 (208-50), <https://doi.org/10.1037/10038-000>.

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23. Wright is cited approvingly in the first footnote in the preface to Goffman's *Stigma* and many times throughout the book.

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24. Shakespeare, "The Social Model of Disability," 217.

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25. Disability Studies has also started to surface in readings of non-Shakespearean Renaissance drama, for example Katherine Williams Schaap, "'More legs than nature gave thee': Performing the Cripple in *The Fair Maid of the Exchange*," *English Literary History* 82.2 (2015): 491-519, <https://doi.org/10.1353/elh.2015.0019>; and Lauren Coker, "Boy Actors and Early Modern Disability Comedy in *The Knight of the Burning Pestle and Epicoene*," *Journal of Dramatic Theory and Criticism* 31.1 (2016): 5-21, <https://doi.org/10.1353/dtc.2016.0019>.

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26. See Lindsey Row-Heyveld, "'The lying'st knave in Christendom': The Development of Disability in the False Miracle of St. Alban's," *Disability Studies Quarterly* 29.4 (Fall 2009), <https://doi.org/10.18061/dsq.v29i4.994>: "Unlike the previous authors who took up the false miracle of St. Alban's to glorify the person of the Duke of Gloucester (for various purposes), Shakespeare takes up this incident to disparage the person of Henry VI."

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27. Hobgood and Wood, Introduction to *Disabled Shakespeares*, <https://doi.org/10.18061/dsq.v29i4.991>. This notion is repeated (in various ways) in Hobgood's contribution to *Disabled Shakespeares*, "Caesar Hath the Falling Sickness: The Legibility of Early Modern Disability in Shakespearean Drama," <https://doi.org/10.18061/dsq.v29i4.993> which reiterates that "'disabled' was an operational identity category in the early modern period"; in Row-Heyveld's contribution, "The Lying'st Knave in Christendom," <https://doi.org/10.18061/dsq.v29i4.994> which quibbles slightly with the idea ("while disability did emerge as a strictly defined and thoroughly policed category in the early modern era, perhaps it was not as contained an identity as was hoped"); in Wood's contribution, "'Fluster'd with flowing cups': Alcoholism, Humoralism, and the Prosthetic Narrative in *Othello*," <https://doi.org/10.18061/dsq.v29i4.998> which concludes, "as for Lennard Davis, there does indeed seem to be an early modern category for the disabled drunkard"; in Wood's later essay, "Shakespeare and Disability Studies," which hedges slightly when speaking of "disability identity-categories with origins in the 16th and 17th centuries" (280); in Wood and Hobgood's introduction to *Recovering Disability in Early Modern England*, which reasserts that "'disabled' was indeed an operational identity category in the English Renaissance, though it continues to be misidentified, or at the very least underexplored, in early modern scholarship" (7). Katherine Schaap Williams, "Performing Disability and Theorizing Deformity," *English Studies* 94.7 (2013), <https://doi.org/10.1080/0013838X.2013.840125> discusses how Shakespeare's Richard III has been cited "as evidence... for the development of disability as an identity category" but also "as, crucially, *not* an example of disabled identity... [because] what we call disability comes later" (759).

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28. Hobgood and Wood, Introduction to *Disabled Shakespeares*, <https://doi.org/10.18061/dsq.v29i4.991>, citing Lennard J. Davis, "Dr. Johnson, Amelia, and the Discourse of Disability," in *Defect: Engendering Disability in the Eighteenth Century*, ed. Felicity Nussbaum and Helen Deutsch (Ann Arbor: University of Michigan Press, 2000): 54-74, reprinted in Davis, *Bending over Backwards*, 47-67. Davis's position is straw-manned in both Hobgood and Wood's individual contributions to *Disabled Shakespeares*; in contrast, Davis is given his due, to productive ends, in Katherine Schaap Williams's contribution.

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29. Hobgood and Wood, Introduction to *Disabled Shakespeares*, <https://doi.org/10.18061/dsq.v29i4.991>, citing Lois Bragg, *Oedipus Borealis: The Aberrant Body in Old Icelandic Myth and Saga* (Madison, NJ: Fairleigh Dickinson University Press, 2004).

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30. Hobgood, "Caesar Hath the Falling Sickness", <https://doi.org/10.18061/dsq.v29i4.993>.

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31. See *The Merchant of Venice* (2.2.35-74) and *King Lear* (3.7.67-94).

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32. See *Julius Caesar* (1.2.119-31 and 232-75), *2 Henry IV* (1.2.107-19 and 4.4.102-30), *Othello* (4.1.35-55), and *Macbeth* (3.4.37-86).

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33. On the connection between the Deformed passage and the theme/title of the play, see David Lucking, "Bringing Deformed Forth: Engendering Meaning in *Much Ado About Nothing*," *Renaissance Forum* 2.1 (Spring 1997),

<http://www.hull.ac.uk/renforum/v2no1/lucking.htm>.

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34. Katherine Schaap Williams, "Enabling Richard: The Rhetoric of Disability in Richard III," *Disability Studies Quarterly* 29.4 (2009),

<https://doi.org/10.18061/dsq.v29i4.997>.

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35. Hobgood, "Caesar Hath the Falling Sickness,"

<https://doi.org/10.18061/dsq.v29i4.993>, quoting Davis, *Bending Over Backwards*, 22.

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36. See Plutarch, "The Life of Iulius Caesar," in *The Lives of the Noble Grecians and Romanes Compared Together* (late 1st c.), trans. Thomas North (London: Thomas Vautroullier and John Wight, 1579), 771 and 788. Cf. Pierre de la Primaudaye, "Of Fortitude," in *The French Academie* (1577), trans. Thomas Bowes (London: Edmund Bollifant for G. Bishop and Ralph Newbery, 1586), 271. Caesar was one of three classical figures often associated with epilepsy; see Thomas Drant, *Two Sermons* (London: John Daye, 1570): "Iulius Caesar, Hercules, and Mahomet haue the falling sicknesse" (H4).

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37. See Rachael Hile, "Disability and the Characterization of Katherine in *The Taming of the Shrew*," *Disability Studies Quarterly* 29.4 (Fall 2009), <https://doi.org/10.18061/dsq.v29i4.996>.

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38. Hobgood, "Caesar Hath the Falling Sickness," <https://doi.org/10.18061/dsq.v29i4.993>.

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39. Hobgood, "Caesar Hath the Falling Sickness," <https://doi.org/10.18061/dsq.v29i4.993>, slightly misquoting Davis, *Bending Over Backwards*, 22.

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40. Mary K. Nelson, "Shakespeare's *Henry VIII*: Stigmatizing the 'Disabled' Womb," *Disability Studies Quarterly* 29.4 (2009), <https://doi.org/10.18061/dsq.v29i4.995>.

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41. Wood, "Fluster'd with flowing cups," <https://doi.org/10.18061/dsq.v29i4.998>.

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42. Williams, "Enabling Richard," <https://doi.org/10.18061/dsq.v29i4.997>.

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43. Abigail Elizabeth Comber, "A Medieval King 'Disabled' by an Early Modern Construct: A Contextual Examination of *Richard III*," in *Disability in the Middle Ages: Reconsiderations and Reverberations*, ed. Joshua Eyler (Burlington,

VT: Ashgate, 2010), 184.

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44. Iyengar, "Shakespeare's 'Discourse of Disability'," 12.

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45. See Wood and Hobgood, Introduction to *Recovering Disability in Early Modern England*, 8.

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46. See David Houston Wood, "'Some tardy cripple': Timing Disability in *Richard III*," in *Richard III: A Critical Reader*, ed. Annaliese Connolly (London: Bloomsbury, 2013), 135.

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47. Iyengar, "Shakespeare's 'Discourse of Disability'," 9.

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48. Hobgood and Wood, "Shakespearean Disability Pedagogy," in *Recovering Disability in Early Modern England*, 188 and 190.

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49. For the concept of "narrative prosthesis," see Mitchell and Snyder, *Narrative Prosthesis*, 47-48.

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50. Jeffrey A. Brune, "In Defense of *Stigma*, or at Least Its Adaptations," in "Reflections on the Fiftieth Anniversary of Erving Goffman's *Stigma*."

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51. It would take much more space than I have available here to unpack fully the philological and philosophical connections between William Shakespeare — who was one of the first to use the word *stigma* in the English language (see "stigmatic, adj. and n.," in *Oxford English Dictionary*, def. B2), and who was also obsessed with the social phenomena of discrimination, prejudice, and otherness — and Erving Goffman, who was the first writer in the Western tradition to develop a serious theory of stigma. Doing just that is one of the aims of my manuscript in progress, titled *Stigma in Shakespeare*.

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52. See Sigmund Freud, "Some Character-Types Met with in Psycho-Analytic Work: The 'Exceptions' " (1916), in vol. 14 of *Standard Edition of the*

*Complete Psychological Works of Sigmund Freud*, ed. James Strachey  
(London: Hogarth Press and The Institute of Psycho-Analysis, 1958): 311-15.

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53. Robert McRuer, "Richard III: Fuck the Disabled: The Prequel," in *Shakespeare: A Queer Companion to the Complete Works of Shakespeare*, ed. Madhavi Menon (Durham, NC: Duke University Press, 2011), 298.

<https://doi.org/10.1215/9780822393337-034>

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54. Williams, "Enabling Richard" <https://doi.org/10.18061/dsq.v29i4.997>;  
Williams, "Performing Disability and Theorizing Deformity," 759-60.

<https://doi.org/10.1080/0013838X.2013.840125>

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55. Williams, "Performing Disability and Theorizing Deformity," 759.

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56. Tobin Siebers, "Shakespeare Differently Disabled," in *The Oxford Handbook of Shakespeare and Embodiment: Gender, Sexuality, and Race*, ed. Valerie Traub (Oxford: Oxford University Press, 2016), 451-52.

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57. Wood and Hobgood, Introduction to *Recovering Disability in Early Modern England*, 2.

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58. Goffman, *Stigma*, 51. Goffman was alluding here to what has been called the "labeling theory" of criminology advanced by the likes of Frank Tannenbaum, Edwin Lemert, and Howard Becker, themselves (like Goffman) sociologists from the Chicago school. See Ross L. Matsueda "The Natural History of Labeling Theory," in *Labeling Theory: Empirical Tests*, ed. David P. Farrington and Joseph Murray (New Brunswick, NJ: Transaction Publishers, 2014): 13-44.

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59. On the problem of the other, see Michael Theunissen, *The Other: Studies in the Social Ontology of Husserl, Heidegger, Sartre and Buber* (Cambridge, MA: MIT Press, 1984). On the problem of knowing others' minds in Shakespeare's works, see Stanley Cavall, *Disowning Knowledge in Seven Plays of Shakespeare*, updated ed. (Cambridge: Cambridge University Press, 2003).

<https://doi.org/10.1017/CBO9781139165129>

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60. Comber, "A Medieval King 'Disabled'," 191.

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61. See, for example, René Weis, "A Will 'Made Lame by Fortune's Blows'," in *Shakespeare Unbound: Decoding a Hidden Life* (New York, NY: Henry Holt, 2007): 185-98.

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62. See, for example, Heather Dubrow, "'Incertainties now crown themselves assur'd': The Politics of Plotting Shakespeare's *Sonnets*," *Shakespeare Quarterly* 47.3 (1996): 291-305. <https://doi.org/10.2307/2871379>

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63. See John Drakakis, "Present Text: Editing *The Merchant of Venice*," in *Presentist Shakespeares*, ed. Hugh Grady and Terence Hawkes (Abington: Routledge, 2007): 79-95.

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64. See Jeffrey R. Wilson, "Hath Not a Jew a Nose? Or, the Danger of Deformity in Comedy," in *New Readings of the Merchant of Venice*, ed. Horacio Sierra (Newcastle upon Tyne: Cambridge Scholars Publishing, 2013): 131-61.

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65. See, for example, Herbert Covey, "Shakespeare on Old Age and Disability," *The International Journal of Aging and Human Development* 50.3 (2000): 169-83. <https://doi.org/10.2190/JAUT-1A0G-77F6-W78G>

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66. See René E. Fortin, "Launcelot and the Uses of Allegory in *The Merchant of Venice*," *Studies in English Literature, 1500-1900* 14.2 (Spring, 1974): 259-70; Raymond B. Waddington, "Blind Gods: Fortune, Justice, and Cupid in *The Merchant of Venice*," *English Literary History* 44.3 (Autumn, 1977): 458-77, <https://doi.org/10.2307/2872568>; John Scott Colley, "Launcelot, Jacob, and Esau: Old and New Law in 'The Merchant of Venice'." *The Yearbook of English Studies* 10 (1980): 181-89, <https://doi.org/10.2307/3506941>.

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67. In *As You Like It*, Rosaline calls Cupid a "blind rascally boy" (4.1.213), and in the *Sonnets* Shakespeare laments, "Thou blind fool, Love" (137.1)

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68. In *Henry V*, Fluellen remarks, "Fortune is painted blind, with a muffler afore her eyes, to signify to you that Fortune is blind" (3.6.30-32).

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69. This narrative of the encounter with disability in Shakespearean drama has been influenced by the treatment of the self-other relationship in both German idealism (e.g. Johann Gottlieb Fichte, *Foundations of Transcendental Philosophy* [1798-99], ed. and trans. Daniel Breazeale [Ithica, NY: Cornell University Press, 1992]) and the Chicago school (e.g. Charles Horton Cooley, *Human Nature and the Social Order* [New York, NY: Charles Scribner's Sons, 1902]).

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