

Interdependence, Body Empowerment and Self-Esteem From a Feminist (Dis) ability Perspective Juliana Buriticá ALZATE

Introduction

Feelings of isolation, loneliness and personal insecurity are closely related to contemporary ideas of success and myths of independence and self-sufficiency. It is also common to find evidence of both men's and women's dissatisfaction with their bodies or with who they are. How can we replace these feelings with a sense of togetherness and empowerment? Through an account of different representations of bodies and exploring the myriad of ways people can feel about their own bodies, this paper offers a possible path to embrace our bodily existence and its connection to self-esteem. The experiences of shame and pride are not mutually exclusive, instead they "dance, spar, sit at the same table" (Clare, 2012, pp. 461-462). Therefore, an openness to the nuances between shame and pride, and between. body hatred and body love, is required.

This paper explores the theme of interdependence in connection to body empowerment and self-esteem from a feminist disability perspective.¹ Instead of defining interdependence univocally, this paper takes in its multiple meanings within feminist disability scholarship. Feminists and scholars of gender, sexuality and disability have studied interdependence and caring from different angles. On the one hand, they offer critical views on dependency and independency issues, or problematize how caring for others has been considered an integral part of the social role of women, or stress the importance of including an ethics of care in conversations about social justice (Taylor, 2014, p.109). On the other hand, disability scholars have studied what it means to be cared for, how that care often becomes another form of oppression, and the importance of building an inclusive and accessible society (p.109). Feminism, gender,

sexuality and disability intersect, overlap and inform each other in several ways (McRuer, 2003, p.97). Therefore, when adopting a feminist disability perspective a particular view of interdependence and new possibilities for body empowerment and self-esteem emerge.

As an able-bodied researcher, I am confronted with the question of entitlement and what authority I have to write about the experience of disabled bodies from an outsider's point of view. In order to learn about disability and raise awareness of the multiple ways a feminist disability perspective enriches studies of embodiment and self-esteem, there is a need to listen to and engage directly with stories about living with disability and academic accounts on disability. Just as feminism, queer activism and a larger civil rights movement need all kinds of allies, disability scholarship and activism is certainly open to able-bodied allies. That being said, this paper takes interest in the experiences of physically disabled bodies, and argues that a feminist approach allows us to understand that we are all interdependent, and that this recognition can contribute to positively inform our body image and self-esteem.

Henrietta L. Moore's notion of "ethical imagination" is significant to this paper's approach. In her words, ethical imagination refers to "the forms and means through which individuals imagine relationships to themselves and others... the way in which technologies of the self, forms of subjectification and imagined relations with others lead to novel ways of approaching social transformation" (Moore, 2011, p.291). Basically, it is the recognition of the fact that we share this world with others, with all different kinds of others, who live a differently embodied life; and our awareness of others, and being different from them, is indispensable to our own sense of self.² In fact, according to Butler (2004), "my very formation implicates the other in me ... my own foreignness to myself is, paradoxically, the source of my ethical connection with others" (p.46). Moreover, there is a fundamental dependency on anonymous others; that is, there are people I do not know

or/and will never know on whom my life depends (p.xii). Hence, even when there is an issue that affects others and does not affect us directly, we have the capacity to engage with this issue, to put oneself in another's shoes, and connect with and learn from their experiences.

Society is not composed of two split groups; with self-sufficient, individual, able-bodied subjects on the one hand, and marginal, dependent, disabled subjects on the other. We are all dependent on each other, or rather, we are all interdependent (Taylor, 2014, p.111). Dependency is a basic human condition: "human beings begin life dependent on others and most of us will end life dependent on others" (p.112). In other words, "the body is itself — whatever else it is — a site of dependency. None of us come to the world independently" (Butler in Taylor, 2009, p. 210). Thinking about interdependence involves challenging the fiction of independence by simply acknowledging that "no one escapes dependency in a lifetime" and that "interdependence begins with dependence" (Kittay, 1998, pp.xii-xiii).

Sunaura Taylor — artist, writer and activist whose research areas include animal rights and disability — points out that disabled people have been labeled as dependent and stigmatized as burdensome (Taylor, 2014). Moreover, able-bodied people often pose as if they have overcome this basic dependency and live in a delusion of independence (Taylor, 2014; Taylor, 2009). These ideas of self-sufficiency and independence are a kind of social myth that affects the image of disabled people. They are perceived as more dependent, when in reality "we are all interdependent, that is, dependent on different structures and on each other" (Taylor, 2009, p.187).

As Taylor (2014) emphasizes, the main issue here "is not that able-bodied people and disabled people are equally dependent, but rather that the dichotomy between independence and dependence is a false one" (p.113). Dependency is a real part of being alive in this world but manifests itself in varying degrees. An alternative to the dichotomy between independence

and dependence is interdependence. In fact, “the whole planet is interdependent” (p.113). The notion of interdependence will be further explored in three main sections about: 1) mending the gap between body and self and intersubjectivity, 2) reciprocity and care, and 3) body empowerment and self-esteem through experience-based accounts of disability.

1 Body, Self and Intersubjectivity

Action is anchored to our bodies, yet it is via our bodies that we become vulnerable to the actions of others. Butler (2004) stresses that “the skin and the flesh expose us to the gaze of others, but also to touch, and to violence, and bodies put us at risk of becoming the agency and instrument of all these as well” (p.26). In other words, the body implies vulnerability and agency, and it has both a material and personal dimension as well as a discursive and social one. In this way, the body is partly created within social life, which means that—without us wanting to, or even being aware of it—our bodies already connect us to others. To claim that the body is autonomous and independent is a denial of this social dimension, of this “primary and unwilling physical proximity to others” (p.26).

The idea that we possess a body is evidenced through the expression “my body,” which implies a division between our body and our mind or self. The dualism between body and mind plays a cognitive role in figures of speech; however, the myth of the supremacy of the mind over one’s body has been widely refuted.³ The lived experience of disability reshapes the relationship between body and self (Lindgren, 2004, p.148). For instance, “the notion of having a body implies that the self exercises control over and even ownership of the body. Illness and disability reveal that the body has a mind of its own” (Lindgren, 2004, p.152). Hence, the accounts of people with disabilities do not at all solidify the idea of the self as stable and unified—based on the mind/body dichotomy—but rather support ideas

of selfhood grounded in bodily experience (Lindgren, 2004, p.148).

This approach leads to incorporating difference and change into models of subjectivity and identity. Feminism, studies of gender, sexuality (especially queer theory) and disability converge in conceiving identity as being fluid, fractured and multiple.⁴ Similarly to gender and sexuality, disability also brings to light the dynamism of identity:

Disability is an identity category that anyone can enter at any time, and we will all join it if we live long enough. As such, disability reveals the essential dynamism of identity. Thus, disability attenuates the cherished cultural belief that the body is the unchanging anchor of identity. Moreover, it undermines our fantasies of stable, enduring identities in ways that may illuminate the fluidity of all identity... The body is dynamic, constantly interactive with history and environment. We evolve into disability. (Garland-Thomson, 2004, pp.267-268).

This insight blurs the boundaries between ability and disability, depicts identity as contextual and historic, and brings together embodiment and our sense of self. The links between body and self are also displayed in the phrase “our bodies, ourselves,” which was originally a slogan inspired by the women’s health movement in the 1960s and ’70s in the United States that spread globally.⁵ It fosters the recognition of the intimate connection between body, mind, self and subject:

However alienated male-dominated culture makes us from our bodies, however much it gives us instruments of self-hatred and oppression, still our bodies are ourselves. We move and act in this flesh and these sinews and live our pleasures and pains in our bodies. If we love ourselves at all, we love our bodies. (Young, 2005,

p.80)

Here Young (2005) asserts the connection between the social and personal dimensions of the body, as well as the vulnerability and agency entailed in our bodily existence. From this passage we can also infer that the connection between loving our bodies and loving ourselves can translate into a connection between body empowerment and self-esteem. When we understand our existence as “embodied selves” we can grasp how our body image affects our self-esteem and vice versa.

Reiterating the social dimension of the embodied-self, a subject is always caught up in relationships with other subjects. Following Butler’s (1990) postulates regarding gender, no one gets to have a gender on their own. We need recognition for one’s gender identification, which in turn, requires a supporting response from the surrounding context (Taylor. 2009, p.208). Similarly, nobody (or no body) gets to understand their own place in the social order without the recognition of others, hence the importance of addressing the notion of intersubjectivity.

Intersubjectivity evokes “a performance and its reception, the origination of an idea and its recognition. Because of the indeterminacy of the body and its variable relation to gender, gender is an interdependent phenomenon” (Abrams, 2011, p.78). This suggests a connection between intersubjectivity and interdependence, and how both phenomena shape our subjectivity and identity (Butler, 1990; 2004). For instance, gender, sexuality and disability are constructed through intersubjective and interdependent relationships and shape our subjectivity and sense of identity. Therefore, the processes towards body empowerment and self-esteem can also be thought of as interdependent, intersubjective and with a direct impact on our identity and subjectivity. We are all entangled in interdependent relationships with others and the environments that surround us; which require a positive take on dependency, vulnerability

and agency.

2 Reciprocity and Care

Intersubjectivity not only entails interdependent relationships but also subject-subject relations. The main issue here is how we can recognize the other as someone “with whom it is possible to have a dialogue based on mutual recognition” (Moore, 2007, p.72). This subject-subject model requires recognizing others as both “like” and “other than” me; thus, it incorporates ideas of equality and difference.

Following Nussbaum (2001), a model that conceives citizens as “rough equals,” who cooperate with each other only through supply-and-demand relationships, needs to be revised because it “effaces the more asymmetrical forms of dependency that human life contains: the need for care in infancy, extreme age, and periods of severe illness or a lifetime of severe disability” (B9). There is a need to create a new model in which the needs of the cared for are met with dignity, without exploiting the providers of care (who are largely women — putting the equality of women at stake) (B9). In other words, “instead of picturing one another as rough equals making a bargain, we may be better off thinking of one another as people with varying degrees of capacity and disability, in a variety of different relationships of interdependency with one another” (B9). This position is also supported by Kittay (1998) who proposes the development of “an equality wherein the condition of its possibility is the inevitability of human interdependence: the interdependence which is featured both literally and metaphorically in the aphorism that we are all some mother’s child” (p.50). The notion of interdependence needs an extended notion of reciprocity that recognizes relations of nested dependencies, and the ethics behind the colloquial phrase “what comes round comes round”; so that “if someone helps another in her need, someone, in turn, will help the helper when she is needy” (p.107).

Taking this into account, reciprocity does not necessarily mean equality but rather mutual dependency. A feminist disability perspective emphasizes the need for mutual care as well as an awareness of the asymmetries of care relations between givers and receivers of care. However, this type of reciprocity is threatened by ideas of independence that feed notions of inequality within these relationships. For example, inequality emerges when there are cases of economic dependence, helplessness and subordination (Morris, 1991; Wendell, 2004). In this case, when we prize individualistic autonomy and independence, we fail to notice that we all need care and assistance to live (Garland-Thomson, 2004, p.268).

Interdependence implies dependence. However, the word "dependence" has both negative and positive meanings; it can be associated with helplessness and subordination, or with reliability and trust (p.268). In order to have a positive view on interdependence we must overcome the negative connotations of dependence and embrace its positive aspects; that is, to move closer to a model of reciprocity and mutual trust.

One of the effects of negatively judging dependency, or preferring independence over dependence, is that asking for help becomes a sign of weakness (Taylor, 2009, p.196). Therefore, help is associated with embarrassment and insufficiency (p.196). As Wendell (2006) writes, "dependence on the help of others is humiliating in a society which prizes independence" (p.252). Yet, whether disabled or nondisabled, everybody needs help. In this context, the very act of asking for and providing help or assistance is already a way of challenging the type of individualism that is based upon an ideal of independence.

In addition, there are particular groups of people who need constant help from others to survive, and as long as independence is considered a strength and a necessary condition for respect and self-esteem, these groups are doomed to be devalued (p.252). Consequently, when people

living with disabilities see the possibility of living independently (as any other able-bodied person is pretending to) they will likely pursue it. In a way, the pressure and oppression attached to the ideal of independence can be diminished if we embraced dependence instead. In other words, “acceptance of dependency may fit the needs of some much better than the struggle against it” (Miller & Gwynne, 1972, p.88, quoted in Morris, 1991, p.131).

Embracing our mutual dependencies points to simultaneously “caring” and being “cared for,” to both asking for and providing help. According to Wendell (2006), women who became disabled as adults experience a transformation from being “carers” (taking physical care of others, often husbands and children) to being “cared for” (p.252). Wendell (2006) also points out that when looking at the stories of recently disabled adult women, it is possible to identify their struggle with shame and loss of self-esteem, which suggests that there is indeed a cultural correlation between independence, pride and self-esteem (p.252).⁶ It is thus pertinent to question individualistic discourses that entrench normative prejudices related to ability, sexuality and embodiment.

Eli Clare (2012) — poet, essayist and speaker about disability, queer and trans identities, and social justice — explains how this theme belongs to a broader discussion about gender roles and disability:

To be female and disabled is to be seen as not quite a woman; to be male and disabled is to be seen as not quite a man. The mannerisms that help define gender — the ways in which people walk, swing their hips, gesture with their hands, move their mouths and eyes as they talk, take up space with their bodies — are all based upon how nondisabled people move … The construction of gender depends not only upon the male body and the female body but also upon the nondisabled body. (Clare, 1999, p.112)

The intimate relationship between gender identity and ability often leads to misconceiving disabled people as genderless, or less female or less male, and by extension, sexless (p.112). However, gender categories are fabrications that rely on heterosexual and able-bodied assumptions (Butler, 1990). To be aware of how ideals regarding gender, ability and independence are interrelated and socioculturally constructed, is a necessary step towards moving away from trying to fit these impossible ideals, but rather accept and affirm gender, sexual and bodily diversity together with interdependence.

“To be caring” has been considered a quality generally assigned to (able-bodied) women. Yet, we all need to be caring and cared for in multiple ways throughout our lives. In this way, “care and needing care are sites that rather than trying to avoid, we need to be radically attentive to” (Taylor, 2014, p. 124). Interdependence and reciprocity are ways of paying attention to care and the need for it.

Wendell (2006) points out that women with disabilities often interact with their care-givers through models of reciprocity (p.252). Reciprocity is an attempt to recognize each other’s needs and build relationships in which we can rely on each other, ask for, receive and provide help, cultivate feelings of empathy and trust and respect each other’s boundaries (p.252). This model of reciprocity is a concrete example of how a positive view on interdependence and an abandonment of our cultural obsession with independence and gender roles can benefit all of us.

3 Body Empowerment and Self-Esteem

Disability is often regarded as a private matter, a personal or family issue, rather than a matter of social responsibility (Wendell, 2006, p. 246). However, from a feminist disability perspective, the well-known expression “the personal is political” can be extended into the notion that disability is socially constructed. This posture aligns with the so-called social model of

disability, which “views the restrictions in the lives of disabled people as a result of environmental, behavioral and institutional structures in society” (Inahara, 2009, p.9).⁷ This model claims that people are being disabled not only by their bodily conditions or medical diagnoses, but also by society itself. Therefore, disability is not only an individual or personal issue but also a social and political one.

Experiences of disability are available to us through literature—fictional, nonfictional and academic. It is through authors with disability and their account of their bodily experience that we can access their personal and social realities and reflect about them as well. This section looks at different accounts from four disabled authors (Inahara Minae, Ototake Hirohada, Eli Clare and Sunaura Taylor) through the lenses of interdependence, body empowerment and self-esteem.

Firstly, we will look at Inahara Minae’s story—professor and researcher on feminist psychoanalysis, disability theory and philosophy of the body. For Inahara (2009) the search of an image of physical disability that she can identify with is crucial: “an image that does not suggest pity or misfortune, but one that reflects the complexity, fluidity, multiplicity, and vulnerability of all modes of embodiment” (p.3). This suggests that rather than considering disability—or any other mode of embodiment—negatively, we must recognize that all bodily life brings in vulnerability, change and diversity.

As previously mentioned, we share this world with all kinds of others, so intersubjectivity/inter-corporeality is a main aspect of our bodily life. Inahara (2009) embraces intersubjectivity and interdependence in terms of love and connection: “love becomes an expansive feeling for the connection to others that is vital to all of us” (p.164). In fact, she proposes that our images of embodiment are deeply related to connection and love:

Love operates to connect others together. Love is, to me, crucial in

the experience of othering the self and in the process of undoing that otherness. Thus, the process of undoing this otherness is to return the self-love; this functions to encourage us to accept the "Other." I love my body with a nostalgia for the pre-symbolic stage, when my body was not distinguished as the disabled "Other." I keep loving my body rather than forcing myself to distinguish it as the "Other" — the lack of able-bodiedness. (p.163)

This is the conclusion of Inahara's last chapter in her book, *Abject Love*, in which she explores the shift from self-denial to self-acceptance of her own physical disability through an account of the movie *E.T. The Extra Terrestrial*, while also addressing Julia Kristeva's (1982) theory of abjection and her notion of being a stranger to oneself (Inahara, 2009, pp.133-134).⁸ Inahara accounts the process of re-signifying the "Other" through returning to self-love at the moment where society and language had not yet turned her into the "Other." Inahara (2009) undergoes a process of expelling everything that is not the subject, expelling the negativity and embracing the fluidity — the changing nature — of her body (p.134). She is following personally and theoretically Kristeva's (1982) ideas on abjection and subjectivity: "I expel myself, I spit myself out, I abject myself within the same motion through which "I" claim to establish myself" (p.3). Hence, abjection is necessary to the formation of the subject. The impact of Kristeva's theory in Inahara's process of achieving self-esteem is contained in the following statement:

Without imaginary abjection, the image of *E.T.* would have left me with a negative image of physical otherness. When I watched this film, I reconstituted the images of both *E.T.* and myself as "lovable" and acceptable, and I started loving my embodied self. (Inahara, 2009, p.159)

This passage shows how Inahara managed to see otherness within herself and develop a positive image of physical otherness in order to love and accept her embodied self. The process of loving our bodies, accepting ourselves and developing self-esteem is difficult. There are two reasons—the first being the need to go through a process of re-signifying otherness and difference, and the second having to face the pressure imposed by the ideal of the able-bodied independent subject. Along these lines, in an interview for the Japan Times, Inahara observes that:

Thinking about disability equals contemplating ability. It questions human existence. “Be normal!” we are told. But what does that mean? We have to free ourselves from the archetypes of what a human being is. I want to share my perspective that every disabled and every abled person has a different view on life. All are worth looking at and all are beautiful. (Kawaguchi, 2012, para. 3)

This insight also brings together disability and ability, and serves as an invitation to recognize and celebrate body diversity. This may result in the proliferation of alternative visions of beauty and the deconstruction of normalcy. The very notions of a normal and ideal body are herein challenged.

Next, we will look at Ototake Hirotada’s story—he is a sports journalist, a primary school teacher, and has published several books about his own experience that are widely read in Japan. In Ototake’s autobiography *Gotaifumanzoku* 五体不満足 *No One’s Perfect* (1998/2003), we find clues on how interdependence is a key element in developing body empowerment and self-esteem. It is a narrative about acceptance, on personal and societal levels, and it is also a tale about care and interdependence. For Ototake (1998/2003), the support of his family, friends and teachers was very important to his development and self-esteem. He learned the importance

of interdependence and assistance at a very early age. In his own words:

In today's competitive society where one is always expected to excel, we're losing sight of what's obvious — when you see someone having trouble, you lend a hand. We've been hearing for a long time now about the breakdown of communities whose members used to help one another. It could be that the people who come to the rescue, the people who can rebuild a more fully human society, will be people with disabilities. (Ototake, 1998/2003, p.81)

Ototake (1998/2003) puts forward a model of interdependence and reciprocity, of "doing something for other people, for society. Living in a caring way. Understanding and being understood by as many people as possible" (p.169). In other words, we could say that both assistance and care are at the heart of all human connectivity, which can be understood as a fundamentally human feature: "connection is why we are here. It's what gives purpose and meaning to our lives" (Brown, 2010).

Body empowerment and self-esteem boil down to having a deep sense of worthiness — being worthy of love, belonging and connection — to being able to say, without hesitation: "I'm good enough" (Brown, 2010). This is needed to strengthen human relations and put in practice interdependence with reciprocity. Ototake's story exemplifies this feeling of "being enough," of loving oneself in a fully comprehensive way. An example of positive reaffirmation in his life is the way he appreciates the scars on his back due to several operations he underwent when he was growing up. His physical scars are not a source of shame or disgust, but rather, of pride. As he himself said, they became his medals: "V" for victory (Ototake, 1998/2003, p.54). Clearly, he incorporates all of his physical traits into a positive discourse of himself. Ototake (2013) declares that, "I am by no means a perfect person. Even so, I like myself. Everything about me,

including all my incompetence, my faults, my weaknesses and the fact that I don't have arms or legs; I am Ototake Hirotsada, and I'm a lovely person" (p.238).⁹ In this process of loving himself, Ototake also thanks all of those who helped him, in particular, his parents. He extends his sense of gratefulness by addressing, in general, parents who raised children who can practice positive self-affirmation (p.238).

We can also find the importance of connection, interdependence and pride in Eli Clare's story — previously introduced as a poet and writer on disability and queer issues. Clare (1999) points out that "*queer* and *cripple* are cousins: words to shock, words to infuse with pride and self-love, words to resist internalized hatred, words to help forge politics. They have been gladly chosen — *queer* by many gay, lesbian, bi, and trans peoples, *cripple* or *crip*, by many disabled people" (p.84). Accordingly, one path towards empowerment is re-signifying language that has been used to reproduce shame and oppression.

Clare (2012) also tackles the ways in which shame inhabits our bodies and how to resist its habitation. According to Clare (2012) "shame lives in the mirror and the camera, and its impact is huge, ranging from low self-esteem to addiction, from infrequent healthcare to suicide" (p.456). Due to its impact, dealing with body shame is a priority, and one way of doing it is by making our bodies home (p.464). The process of re-signifying the body into a positive experience requires personal commitment:

In the mirrors, I would see *ugly, stupid, wrong*. And I would say back, "Beautiful, strong, right"... Sometimes I would believe myself, other times not... Slowly one by one, I unpacked the lies that backed my shame. I sat in community. I pounded words out onto paper. I read disability politics. I cannot say I am done; I doubt there is one definite end to this struggle, one complete passage between shame and pride. (Clare, 2012, p. 463)

As we can elicit from this passage, making our bodies our home is a constant challenge and dealing with shame, a daily effort. Yet, it is through interacting and sharing his experience with others, reading and writing that Clare (2012) manages to articulate his bodily experience and embrace his embodied self. He also turns to interdependence and the importance of being part of a supporting network of care in order to be able to build a positive body image. Addressing the providers of assistance, Clare (2012) writes:

We need services that are nonjudgmental, that partner with us as we work to make our bodies home, that grant us self-determination, that frame trans-ness not as a pathology but as a human variation, that give us resources and tools in resistance to shame. Sometimes our lives depend on it. (p.463)

This passage highlights the importance of interacting with providers of care on a reciprocal level together with an appreciation of body and gender diversity. From this account we can learn that the task of making our bodies home — of accepting our bodies — is both personal and political; making it a matter of social responsibility. As Clare (2012) puts it: “if we are to make a sustaining community that profoundly challenges shame, we need to acknowledge the collective and political implications that trail our personal, individual decisions” (p.464).

This posture aligns with the task of thinking of body empowerment, self-esteem and connection in political terms. For Sunaura Taylor — previously introduced as an artist and scholar on disability and animal rights — the moment when she went from body shaming to body acceptance was when she realized her issues were not only personal, but also involved others around her, triggering a new connection within her. Taylor (2009) remarks that:

I think all the feelings that I had grown up with — that my body was abnormal, that I was deformed, that it was a tragedy — all these sorts of things that I'd really sort of internalized as being my own personal problem suddenly blasted open and then I just realized how much they're political and they're civil rights issues, so it made me more determined to figure out a way of interacting physically with the world. (in Taylor, 2009, p.196)

Stressing the theme of interdependence in political action, Taylor highlights that disability is not personal, but social and we can identify the ways in which empowerment is involved in that very recognition. We cannot find solutions to problems of ability, disability and gender normativity on our own (Butler in Taylor, 2009, p.209). There is a limit to individualism because we are part of a social space, we need different kinds of recognition and also, it is only in joint action with others that we can change what is normative and ideal and what is not (p.209). Therefore, "underlying all this is the idea that we are interdependent as we try and attract certain social transformations that affect us at very personal levels" (p.209).

For Taylor, art is a fundamental part of who she is, and has played a significant role in her way of viewing and understanding both herself and the world around her. Amongst Taylor's paintings, we find several self-portraits that articulate her disability, illustrate ways of building positive body images, and link art to self-empowerment. In her own words, "my paintings are not at all only about the body, but the body is inevitably an aspect of my relationship with whatever it is that I am seeing" (Taylor, 2006). Taylor's works are not only personal and emotional portraits but also political statements on war, ideas of normalcy, and issues of identity (Taylor, 2004). Hence, her art and exhibitions serve as a platform to activism. Both Taylor's art and scholarship show consistently the links

between the personal, social and political.

Finally, Taylor (2014) goes straight to the point when she writes that “vulnerability and dependence can be unsettling as they are states that require intimacy, empathy, and self-reflection, but they also hold the potential for new ways of being, supporting and communicating — new ways of creating meaning across differences” (p.124). Based on this assertion, both vulnerability and dependence are key elements of interdependence, and once we embrace them we will be able to re-signify our body image and self-esteem.

Conclusion

This paper explored the theme of interdependence while drawing on personal and theoretical accounts from authors with/on disabilities. Interdependence is a basic condition shared by all human beings, and it is a key term that dismantles the myths of independence and self-sufficiency. From a feminist disability perspective — by bringing together aspects of disability studies and gender and sexuality studies including queer theory — we are encouraged to challenge ideals of normalcy and re-examine the notion of independence as a sign of liberation and a condition to self-respect and self-esteem. Interdependence is featured as a way to approach body empowerment and self-esteem. Coming to terms with interdependence implies embracing our mutual dependencies, vulnerabilities and adopting relationships of reciprocity and mutual care. Through four stories of body empowerment and self-esteem, taken from testimonies by a few selected authors with disability on disability, we can understand that there is not just one magic formula to achieve body empowerment and self-esteem; rather, these processes emphasize fluidity, multiplicity and fragmentation.

The word “body empowerment” involves thinking of the body in terms of ability, in terms of the power of action, as a bundle of different

capacities. Also, the word “self-esteem” highlights the importance of respect of one’s own body. It also indicates love, appreciation and gratefulness for being who we are.

We are all wired to be interdependent, to both give and receive, to ask for and provide help, to mutually depend on each other. Yet, interdependence does not deny multiple modes of embodiment or particular experiences; on the contrary, it affirms fluidity and diversity. In short, interdependence is about acknowledging that inherent vulnerability and dependency, and how it connects us with each other.

Footnotes

- ¹ Morris (1991), Wendell (2004) and Garland-Thomson (2004; 2005) have worked extensively on feminist theorizing from a disability perspective. For more on feminist disability studies see Silvers (2013). Also, feminist philosophers such as Annette Baier (1987), Eva Kittay (1998), Martha Nussbaum (2001), and Iris Marion Young (1990) have worked on theories of inclusion that have been both influenced by and influential to disability studies. Their works address ethics of trust, care, virtues of dependency and equality. Specifically, Baier and Nussbaum address the theme of interdependency.
- ² Intersectional identity has been theorized extensively within feminist scholarship (see Butler, 1990; Bordo, 1993; Clare, 1999; Smith, B.G. & Hutchison, B, 2004). On the difference between identity and identification, see Butler, 1990.
- ³ For theories challenging the Cartesian mind-body split, particularly, the primacy of mind over body, see feminist philosophy and/or post-structuralist thought. For example: Irigaray, 1985; Deleuze & Guattari, 2004; Grosz, 1994.
- ⁴ The fluidity of identity and subjectivity has been theorized within gender and sexuality studies, queer theory and disability studies. (See Grosz, 1994; Butler, 1990, Bordo, 1993; Garland-Thomson, 2004; Davis, 2006)
- ⁵ Our Bodies, Ourselves (OBOS) also known as the Boston Women's Health Book Collective, is a non-for-profit organization promoting girls' and women's reproductive health and sexuality. "Our Bodies, Ourselves" is their landmark publication and has been translated into 25 different languages. The first edition was published in 1970. This best-seller has also been translated into Japanese as *からだ・私たち自身 karada watashitachi jishin*. OBOS coined and spread this slogan globally for the body politics movement.
- ⁶ This loss of self-esteem and experiences of shame are not exclusive to recently disabled adult women, but also to adult men. For example, newly disabled athletes (either men or women) would find it particularly challenging to embrace their new life with disability.
- ⁷ Within disability studies there is an important distinction between the medical model of disability and the social model of disability, as well as between impairment (biological) and disability (social). Inahara (2009) explains: "the

medical model finds the problem with disabled individuals rather than with society and it suggests that the way in which we solve the problem is to change the disabled individual to fit into society, rather than improve social conditions to accommodate the disabled individual" (p.8).

⁸ According to Kristeva (1982) what causes abjection is "what disturbs identity, system, order. What does not respect borders, positions, rules. The in-between, the ambiguous, the composite" (p.4). For more on theory of abjection see Kristeva, 1982; Kristeva, 1991.

⁹ The English is my own translation from the original text in Japanese:

「僕は、けっして完璧な人間などではない。それでも、自分が好き。至らない自分、欠点だらけの自分、弱い自分、手足のない自分——そんなあれやこれやを全部ひっくるめて、僕は乙武洋匡という人間を、いとおしく思っている」(Ototake, 2013, p. 238).

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フェミニスト障害学の視点からみる相互信頼、身体肯定、自己肯定 フリアナ・ブリティカ・アルサテ

この論文は、フェミニスト障害学を通して、身体肯定と自己肯定の関連における相互信頼（interdependence）の問題について論じる。著者は「倫理の想像力」の概念に目を向けつつ、障害のある身体の実験に対して関心を持っており、このアプローチが、身体を恥じることから身体を肯定することへの文化的態度の変化という提案して大きく寄与することを論じる。

相互依存に対する肯定的な視点は、身体についての肯定的なイメージと自己肯定のより高い感覚を明るみに出す。相互依存の概念は次の三つのセクションで論じる。第一のセクションでは、間主観性の概念について明らかにし、身体と自己の間に生じる断裂を修復することに焦点を当てる。第二のセクションでは互惠関係とケアの概念について論じ、自立という理想に挑む。第三のセクションでは、自らの身体を肯定することおよび自尊心の観念と照らし合わせ、相互依存の概念について論じる。

相互依存は、障害者にも健常者にも影響を与えるもので、自立と自己充足の神話を解体する鍵となる語である。フェミニズムの障害学的視点からすると、我々は自由のしるしとしての自立の概念について再検討することが推奨される。相互依存は、自らの身体を肯定することと自尊心に対する一つのアプローチとして考えられる。相互依存を受け入れることは自分の弱さを受け入れることである。

身体障害者の経験から得られる重要な教訓とは、自己受容、ケア、そして他者の受容という三者の関係性や、身体は決して単独で存在しないという事実を含んでいる。つまり、相互に信頼しあうこととは、我々が関わりあう主体としての他者のことを慮るよう我々に促すものである。他者と関わりあうという行為は、団結と互惠モデルにとって決定的なものである。ゆえに、相互依存は我々を身体肯定と自己肯定に近づける。

Keywords:

相互信頼、身体肯定、自己肯定、フェミニズム、障害

