

### Crippling Consent: A Note from the Guest Editor

This is a year of important anniversaries. July 26, 2025 will be the thirty-fifth anniversary of the signing of the Americans with Disabilities Act, and September 27 will mark ten years since Ali Stroker made her Broadway debut in Deaf West's revival of *Spring Awakening*. Five years ago, a group of disabled theatre scholars began discussing ideas for a new organization, one that would unite theatre scholars, educators, artists, and activists working at the intersections of disability and the performing arts. Those conversations led to the founding of the Disability, Theatre, and Performance (DTaP) focus group for Association for Theatre in Higher Education (ATHE), the first academic organization dedicated to this field in the United States. 2025 will be DTaP's third year participating in ATHE's annual conference, and as I write this introduction, we are working hard to finalize our application for 501c3 nonprofit status so we can expand our offerings to this active and growing community. Things are slowly getting better for disabled theatre workers, who have long been systematically excluded from the field as creators and barely tolerated as consumers. Only a tiny fraction, usually cited as 3%, of explicitly disabled characters are played by disabled performers; the rate at which disabled performers are hired for roles not explicitly described as disabled – not to mention the hiring rate of disabled directors, choreographers, designers, technicians, dramaturgs, teachers, researchers, and other workers in the field – is even more dire. As Ryan Donovan explains in his award-winning study *Broadway Bodies: A Critical History of Conformity*:

Performers with non-conforming bodies face the double bind of being expected to only be able to represent their own identity and then not even being considered for those roles...Lack of representation translated into different life outcomes for actors [and other theatre workers] denied work because of aesthetics; this lack means little or infrequent access to health care and insurance, reliance on low-wage and part-time jobs, and dreams deferred. (Donovan 2023, 11–12)

The advances of recent years, while real and significant, are just the beginning of the ways the industry needs to adapt in order to achieve disability justice.

These issues are further compounded by the ableist norms of the theatre and performance industry, as well as the broader dominance of ableist and eugenic ideologies and cultures in the US and beyond. These issues are multifaceted and mutually reinforcing via the interlocking bands of environmental, attitudinal, and systemic discrimination recognized by the Social Model of Disability, and are further complicated through the manifold intersections of disability discrimination with all other ideologies and systems of power and oppression, including but not limited to bigotry on the basis of race, ethnicity, and color; nationality

including post/colonial status of the nation of [family] origin, immigration status, language(s) spoken, and skill and style of speech in written and spoken English, including dialects, accents, and regionalisms; real or perceived gender or sexuality and obedience to patriarchal gender expectations; wealth, income, and class; education including length, degrees, and exclusivity of institutions; social group makeup and acceptance, club memberships, and other status markers; family structure and organization including definitions of core family members and approaches to housing; and so on. Even the exact forms of debility, the underlying diagnoses, causes, and real or perceived possibilities of “cure” shape the complex matrix of experiences unique to every disabled person and their interactions with cultural systems and opportunities for employment, and not just within the theatre industry. Fixing these issues will be slow and challenging, even where the will to change is strong and persistent.

That said, I’d like to offer two vital intercessions into this conversation. The first is simple and applies in all situations: listen to the experts. Specifically, begin by looking up the “disability justice-based movement building and performance project” Sins Invalid and their “10 Principles of Disability Justice,” and then implement these principles in your home institutions. However, do keep in mind that – to paraphrase and expand on the popular slogan – there must be no theatre and performance about us, the many brilliant and highly qualified disabled artists, scholars, educators, and other professionals within the field, without us there to guide the work. Without the academic *and* autobiographical insights of disabled experts, there is a significant risk that the best intended and best supported efforts to create a more inclusive future in the performing arts may end up reinscribing the same biases, stereotypes, and exclusionary systems that currently exist. This consideration is, of course, not unique to the work of Disability Justice, but it remains a mandatory part of changing the status quo. My second offering requires more explanation, but it is also specific to this journal, its readership, and this special issue on disability and consent. It is also worthy of particular attention here due to its direct impact on the education and employment conditions for disabled people.

My second call is for the end of Forced Intimacy in the theatre – and by that I mean all theatres, whether community, educational, pre-professional, or professional, from the tiniest local space to the heights of Broadway or the West End. Forced Intimacy, a term first used by disability rights advocate and writer Mia Mingus, describes an ideology of disability, disability access and accommodations, and disabled people that is innately hostile to justice, to consent, and to the core humanity of those living with disabilities. As Mingus describes, this term:

Refers to the common, daily experience of disabled people being expected to share personal parts of ourselves to survive in an ableist world. This often takes the form of being expected to share (very) personal information with able bodied people to get *basic* access, but it also includes forced physical intimacy, especially for those of us who need physical help that often requires touching of our bodies. Forced intimacy can also include the ways that disabled people have to build and sustain emotional intimacy and relationships with someone in order to get access—to get safe, appropriate and good access. (Mingus 2017)

The widespread, entirely normalized culture of Forced Intimacy demands disabled people surrender all boundaries, continuously and cheerfully, always prepared “to do the work of opening [themselves] up for others’ benefit, education, curiosity, or benevolent oppression” (Mingus 2017).

Perhaps its most visible manifestation is the ideology is the expectation of adversarial approaches to students and professionals who dare request accommodations. As ableist ideology claims that adaptive resources are special privileges exploited by those unwilling to work hard rather than morally neutral adjustments necessary to allow the work to be done, it is common to demand detailed revelation, extensive documentation, and “proof” of need before allowing – much less providing – appropriate accommodations. This enculturated impulse to interrogation innately positions disabled students and workers as suspect; it interpolates the abled into acting as agents of the eugenic biomedical order of diagnosis and treatment, applying carceral discipline to the unruly bodyminds arrayed for judgment of legitimacy and worthiness:

Forced intimacy is a cornerstone of how ableism functions in an able bodied supremacist world. Disabled people are expected to “strip down” and “show all our cards” metaphorically in order to get the basic access we need in order to survive...People are allowed to ask me intrusive questions about my body, make me “prove” my disability or expect me to share with them every aspect of my accessibility needs. I learned how to simultaneously shrink myself and nonconsensually open myself up as a disabled girl of color every damn day. (Mingus 2017)

After all of this, once the trial is over and the verdict is rendered, Forced Intimacy says that the disabled aspirant must accept whatever insufficient crumbs of support are offered – if any accommodations are offered at all – with a performance of gratitude for the “gifts” granted. To resist any element of this daily violation is to invite ableist retaliation, from loss of vital opportunity to outright violence, and those experiencing multiple intersecting marginalizations are subject to the most intense scrutiny and the most explosive backlash when resisting this policing of their debilities.

The near-universal prevalence of Forced Intimacy makes changing the paradigm deeply challenging, but it can be done. It requires building an approach to making theatre with disabled people that assumes the work is better because of our inclusion, and that treats accommodations as the reasonable cost of ensuring our participation. It means assuming good faith and expertise in our own needs, rather than demanding the “objective” assessment of medical or legal notions of disability. Most of all, it demands an approach to access built on creating a welcoming space where all are safe to take the risks innate to artistic work supported through the knowledge that their needs will be met without resistance or resentment, rather than through checking off the minimum requirements to avoid violating the ADA. In short, it means embracing what Mingus calls Access Intimacy as both ideal and praxis:

Access intimacy at once recognizes and understands the relational and human quality of access, while simultaneously deepening the relationships involved. It moves the work of access out of the realm of only logistics and into the realm of relationships and understanding disabled people as humans, not burdens. Disabled people’s liberation cannot be boiled down to logistics...It demands that the responsibility for access shifts from being an individual responsibility to a collective responsibility. That access shifts from being silencing to freeing; from being isolating to connecting; from hidden and invisible to visible; from burdensome to valuable; from a resentful obligation to an opportunity; from shameful to powerful; from ridged to creative. (Mingus 2017b)

Changing the ableist expectations of profession and culture will not be easy, but it is absolutely necessary; consent is an access issue, there can be not Disability Justice without it.

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## References

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