Medieval Disability Sourcebook

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Published by Punctum Books

McNabb, Cameron Hunt, et al.
Medieval Disability Sourcebook: Western Europe.

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Introduction

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The medieval biblical play “The Cure of the Blind Man” stages the popular healing of the blind man episode from John 9. In the biblical telling, the disciples ask Jesus, “who hath sinned, this man, or his parents, that he should be born blind?” Jesus replies, “Neither hath this man sinned, nor his parents; but that the works of God should be made manifest in him.” This short passage illustrates common misconceptions about disability—namely that it results from sin and needs remedy—but also upends them by calling disability a redeeming “work of God.” Yet, even while seeking to redeem disability, the passage ignores the difficulties that people with some disabilities experience and ascribes the source of the impairment to God rather than to the dynamic physical, mental, and social impairments and constructs that shape what we call “disability.” Neither of the passage’s interpretations of the man’s blindness capture the complex and nuanced category disability represents.

In contrast, “The Cure of the Blind Man” play digs deeper in unpacking disability by informing the audience that the blind man “is your owne neighbour and of your owne kind” (l. 39). Instead of emphasizing either the disciples’ misconceptions or Jesus’ words of redemption, the play focuses on disability as part of our humanity, part of our neighbors and our own kind. Although how people interpret and ascribe meaning to disability changes across time and cultures, disability is a universal human experience. It is the condition of our historical neighbors. And of ourselves.

In the Book of John and in the biblical play, the blind man narrates his own story of his healing and interprets it for himself and the Pharisees who question him. But the biblical play also asks the disciples, and by extension the audience, to listen, interpret, and ultimately “remember” (l. 37) the blind man. For figures marginalized by bodily, social, and mental difference, medieval disability studies seeks to do precisely that, and this volume provides a starting point to do so.

Medieval Disability Studies

Medieval texts and Medieval Studies have garnered increased attention recently, partly motivated by medieval-adjacent popular media, like Lord of the Rings and Game of Thrones, and partly by appropriations of the field by modern movements, including white nationalism. But these representations of the period—and the assumptions they generate—drastically oversimplify the complex and varied Middle Ages. In fact, as medieval scholars often point out, using the definite article “the” to describe the Middle Ages fails to capture the period’s diversity, as if we can make any definitive statements about a term that spans almost a thousand years.

Disability studies, too, is burgeoning, moving perhaps from infancy to adolescence as a field. It began as a modern social justice movement advocating for those with disabilities, but scholars have expanded its inquiries to history and literature. The term “disability” presents complexities similar to “the Middle Ages,” including under its umbrella disabilities marked as physical, emotional, and mental; chronic and acute; visible and invisible. There is no singular understanding
or experience of “disability,” nor a definitive representation of it. This volume provides a more nuanced, but certainly not exhaustive, look.

In short, there is no single concept of “medieval disability,” nor a single response to the empirical existence of disability within the period. The sources collected here serve as testaments to the complex and wide-reaching realm of disability in medieval Western Europe. Ultimately, it is up to readers to listen, interpret, and remember what they encounter.

Key Terms and Concepts

Although medieval languages have many terms for specific impairments, most work on medieval disability studies opens with an acknowledgment that the period did not have the term disability nor even a comparable term in Latin or the extant vernacular languages. The term disability, like the terms race, gender, and sexuality, is a modern construct that we use to talk about the texts of the past. However, the absence of a term does not mean the absence of a concept, and while we should use our modern terms conscientiously and cautiously, we can use and benefit from them nonetheless.

Medieval scholar Tory V. Pearman notes that modern discussions of medieval disability have sometimes congregated around “a monolithic view of the Middle Ages as intolerant” or “an equally monolithic view that borders on nostalgic.” However, as Irina Metzler demonstrates in her highly influential Disability in Medieval Europe: Thinking about Physical Impairment during the High Middle Ages, c. 1100–1400, disability was pervasive in the period and attitudes toward it ranged from “intolerant” and associated with sin to ameliorate and apologetic, as seen in the perspectives in “The Cure of the Blind Man.” As Metzler notes, “no discussion of medieval bodies could be complete without reference to sin,” and the relationship between sin and disability is crucial in the period. The treatment of disability in medieval Europe is heavily linked to the Christus medicus (“Christ the Physician”) tradition, which positioned all disease as a manifestation of sin, for which Christ’s redemption was the cure. However, Metzler examines both Old and New Testament treatments of impairment, including the John 9 passage discussed above, and notes they are “not of a uniformed nature”: “Some Old Testament references link sin and physical ‘blemishes,’ one very specific occupation (the priesthood) is barred to some impaired people, and some instances of impairment are mentioned without any qualifying moral overtones. In the New Testament, on the whole, the emphasis is on healing, and, with two exceptions, the spiritual condition of the healed person is not of importance. Faith of the supplicant is of far greater consequence for a successful healing than their sin.” Metzler’s work emphasizes the spectrum of interpretations on disability found in medieval Europe.

The texts in this volume span that spectrum, with significant range and conflict often existing within a single text. For instance, the miracle accounts included in this volume rely on a framework that presents disability as something that needs to be cured (by the saint or shrine in question), but the very saint responsible for the miracles can often do so only because of his or her own disability, itself interpreted as a sign of holiness. Further, the miracles’ narratives simultaneously—and perhaps inadvertently—testify to the community’s aid and support for individuals with disabilities, all while attempting to solidify the Church’s monopoly on cures.

The critical lens of disability studies evokes a number of helpful terms for readers to use while wrestling with these sources. At some points, the European Middle Ages are particularly conducive to the lines of inquiry already established by the field, but in other cases, these theoretical tools need to be adapted in order to accommodate this period and these cultures. I discuss some of the field’s major terms and concepts below and
explore ways in which they can—or cannot—be applied to the sources in this volume.

One of the earliest approaches to disability, termed the medical model, attempts to diagnose and cure impairments. Predicated on disability as bodily or mental difference that is considered “abnormal” and in need of “repair,” such a model always presents those with disabilities as deviant and subordinate, with medicine as the “fix” needed to “correct” the impairment. Medieval scholar Edward Wheatley expands and adapts this framework to discuss how the European Middle Ages has a similar religious model, because “the church’s control over discourse related to disability [is] in a manner analogous to the way modern medicine attempts to maintain control over it now.” He cites the pervasive role of the Bible and religious literature in shaping the medieval West’s views on disability. By investigating the Church’s control over miraculous “cures,” the practice of confession, almsgiving and charity, and the Eucharist, Wheatley’s model examines how the Church controlled the bodies of those with impairments and framed the culture’s interpretation of disabilities. The religious orientation of numerous texts in this volume demonstrates Wheatley’s theory well, while other entries provide nuance and even resistance to his claims.

Other scholars have explored disability as a social rather than medical phenomenon. The social model first argued for the distinction between the terms impairment and disability. Within disability studies, “impairment” is often used to describe mental or physical functions that impair the daily lives of the individuals who have them. For instance, blindness, deafness, and mobility restriction are impairments. In contrast, “disability” is often defined as a cultural or social construct that limits an individual’s access due to impairment. In the cases listed above, an environment that lacks braille, close-captioning or sign language interpreters, and elevators (just to name a few accommodations) would cast those impairments as disabilities. According to the social model, as expressed by the Union of the Physically Impaired Against Segregation, “it is society which disables physically impaired people. Disability is something imposed on top of our impairments, by the way we are unnecessarily isolated and excluded from full participation in society.” The texts in this volume document both the impairments of medieval people as well as the ways in which those impairments became or did not become disabilities.

While the social model’s terms “impairment” and “disability” are helpful in teasing out some of disability studies’ distinctions and subtleties, Joshua R. Eyler notes, “the [social] model forces the binary opposition of ‘impairment’ and ‘disability’ in ways that at times seem rather misleading.” Eyler prefers the cultural model, proposed by David T. Mitchell and Sharon Snyder, which argues that “[e]nvironment and bodily variation (particularly those traits experienced as socially stigmatized differences) inevitably impinge upon each other.” Tom Shakespeare’s critical realist model is similar in its emphasis on disability as “the whole interplay of different factors that make up the experience of people with impairments,” including “the independent existence of bodies which sometimes hurt, regardless of what we may think or say about those bodies.” Shakespeare’s model provides a framework for analyzing the disciples’ and Jesus’ interpretations of the man’s blindness in John 9: the disciples stigmatize blindness by associating it with sin, while Jesus’ response overlooks the blind man’s physical experiences resulting from his impairment.

Shakespeare complicates his own model to include a concept of universal impairment, noting that “impairment is a universal phenomenon, in the sense that every human has limitations and vulnerabilities, and ultimately is mortal”; or, in the words of “The Cure of the Blind Man,” disability is our “owne neighbour and of [our] owne kind” (l. 39). Advocating the understanding that all humans will experience impairment at one
time or another is useful in demonstrating disability’s ubiquity, but it also underscores the wide-ranging, varied, and difficult to define spectrum the term encompasses. I have argued elsewhere that universal impairment is crucial for the medieval West’s Christian framework: if impairment is (sometimes) caused by sin, and according to the doctrine of original sin, all are sinners, then all are also impaired.\textsuperscript{13} The concept of universal impairment, in “The Cure of the Blind Man” or in Tom Shakespeare’s work, can and should be an avenue of empathy for all our neighbors.

These various disability models have in turn fostered discussion about what language is appropriate for talking about persons with disabilities. Different groups and even individuals within those groups have explored what language best captures their experiences with physical, emotional, or mental disability. Two main lines of thought—and thus language—have emerged from these discussions. The first employs \textit{person-first language}, which refers to individuals with disabilities as people first and “with disabilities” second, such as a “person in a wheelchair” or a “person with dementia.” This type of language foregrounds commonality (we are all people) and only qualifies that commonality based on disability as a secondary consideration. Person-first language has been employed throughout this entire introduction thus far, and it is the preferred, but not the only, language of the volume.

However, some people with disabilities find that their disability is integral to their identity, not secondary to it. They feel they are not a person first and a disability second but rather the disability so constitutes part of their being that the two cannot be separated. In these cases, people prefer \textit{identity-first language}, which, as the term suggests, foregrounds a specific social, physical, or religious characteristic that a person presents as an essential component of personhood. This type of language is common in other descriptors—one usually identifies as “Muslim,” “female,” or “African American,” rather than a “person of Islam,” “person who is female,” or a “person who is African American.” Identity-first language is more common in some disability groups than others, and within some communities, preference is split.\textsuperscript{14}

With either approach, the important point to note is who is wielding the language about whom. Ultimately, whatever term or identity an individual prefers is what others should use to refer to that individual. Unfortunately, in the medieval texts that follow, the voices of those with disabilities are often silenced, by the authors and recorders of the texts; by the social restrictions of the disabilities themselves; and by their distance from us in time, space, and language. In some instances in this volume, people with disabilities speak for themselves, such as in Margery’s \textit{Book} or Hoccleve’s \textit{Complaint}, but in most cases, they are spoken about by others. Readers must be critically aware of the voices that shape their stories, particularly when those voices are not their own.

Another crucial concept in disability studies is the idea of the \textit{normate body}. Rosemarie Garland Thomson coins this term in her work \textit{Extraordinary Bodies} to refer to the “normal” body from which all “disabled” bodies deviate: “Normate, then, is the constructed identity of those who, by way of the bodily configurations and cultural capital they assume, can step into a position of authority and wield the power it grants them.”\textsuperscript{15} Mitchell and Snyder extend this concept and argue that “[a] normal body...is a theoretical premise from which all bodies must, by definition, fall short...a body divorced of time and space.”\textsuperscript{16} The fiction of the normate becomes apparent when certain questions are raised: What height is the normate body? How much does it weigh? How well can it see and hear? In medieval Western Europe, the religious culture once again brought these questions to bear through the lens of Christianity. I have argued elsewhere that for the Christian medieval, Christ is the normate body, although it is unclear precisely what that body is like.\textsuperscript{17} Augustine posits that each individual’s resur-
rected body will be perfected, although he admits that he is also unclear on what that might mean. In both constructs, however, the normate body (either Christ’s or the resurrected body) is defined by its lack of sin, a connection that is, as Wheatley, Metzler, and others suggest, problematic.

Disability studies’ roots in activism can be seen in the concepts and approaches outlined above, but theorists have also extended its tenets to history and literature. Two central terms, coined by Mitchell and Snyder, analyze disability’s role in narrative texts: narrative prosthesis and the materiality of metaphor. They argue that “disability pervades literary narrative, first, as a stock feature of characterization, and second, as an opportunistic metaphorical device.” Their concept of narrative prosthesis refers to this “stock feature” of characterization or plot in order to signal a conflict or difference that is ultimately cured or resolved. Thus disability serves as a prosthesis for characterization and plot and fails to be authentically represented in the narrative. Similarly, Mitchell and Snyder point out the frequency with which disability is used as an “opportunistic metaphorical device,” an observation crucial to understanding Christian culture in the Middle Ages, which frequently deployed biblical metaphors about blindness, deafness, and lameness, such as in the tales of Constance and Aelfric’s sermon. Mitchell and Snyder’s frameworks call on us to distinguish between exploited uses of disability and authentic representations of lived experiences in the narratives we encounter.

Intersections at the Margins

If disability is part of the universal human experience, then it is not surprising that disability studies intersects with other avenues of inquiry both within the period and now. Far from being a niche field, its project of listening, interpreting, and remembering those in the margins is wide-reaching. Mitchell and Snyder recount that their interest in how “disability fit on the map of marginality and identity” began when they considered how disability marks bodies as Other, just as race, gender, and sexuality do. For medieval people, disability was connected to issues of the Self and the Other, and often persons with disabilities were also members of marginalized gender, racial, or economic groups. While some medieval persons with disabilities also appear in the dominant majority, such as Hoccleve, and some do not experience marginalization but rather veneration, such as in many saints’ lives, many are Othered on multiple fronts, such as the Jews in the Croxton Play of the Sacrament or the Wife of Bath in The Canterbury Tales. These figures demonstrate how disability contributes to a variety of intersectional identities in the period.

The social, cultural, and critical realist models described above also have much in common with other critical fields, making interdisciplinary intersections fruitful. In particular, drawing on Women’s and Gender Studies, Pearman has developed a gendered model to medieval disability in Western Europe. She argues that “[w]hen biblical, medical, and literary representations of the female body merge with the Aristotelian construction of the female body as a deformed male body, a web of Otherness begins to surface, demonstrating the intricate bonds between discursive notions of embodied identity categories.” This “web of Otherness” pervades the texts in this volume: when the person with a disability is female, such as Chaucer’s Wife of Bath or Dame Sirith, the gendered model reminds us that these figures are doubly disabled and doubly marginalized. More fundamentally, discussions of disability in the European Middle Ages asked what it means to be human. As discussed above, rather than viewing disability as an identity marker for those with specific physical, mental, or emotional impairments, the concept of universal disability calls for disability to be seen as an aspect of everyone’s identity. Texts in the period intrinsically interrogate not only what is the normate self
but what is the human self. In the physical sense, some sources connect persons with disabilities to non-human entities, like changelings in The Man of Law’s Tale and A Miracle of Thomas Becket, fairies in Evadear, or animal images in Bisclavret. In a spiritual sense, saints with disabled bodies, like St. Margaret and St. Cuthbert, seem to transcend the traditional bounds of humanity and border on the divine. These associations—both positive and negative—demonstrate an uneasiness about what constitutes a human body and more importantly what it means to be human. Disability and disability studies provide spaces for texts and readers to explore with these issues.

The Medieval Disability Sourcebook: Western Europe

As far back as 2012, the Society for the Study of Disability in the Middle Ages (SSDMA) desired to create a sourcebook of medieval texts that deal with disability for use in the classroom. At that time, medieval disability studies was a relatively small field and its scholarship was mostly limited to academic conferences and university presses. The SSDMA felt it imperative the field be explored in classrooms and be accessible to students.

Such a desire for accessibility, a central tenet in disability studies itself, has guided all of the major decisions of this project. The press, punctum books, was chosen for its support for burgeoning, interdisciplinary scholarship and its open access model. Most of the texts presented here were taken from the public domain, which means that they are older editions but are free from copyright, making the sourcebook affordable for students.

The texts have been translated from or edited in their original languages in order to be accessible to a modern English-speaking audience. These considerations, though, have yielded a collection of texts that represent Western Europe, only a narrow slice of a global Middle Ages. They are bounded by a specific geography and time period and most are marked by the period’s and culture’s engagement with Christianity. Likewise, the disability theories used to explore them are rooted in the Western tradition. Therefore, although this volume provides a nuanced look at disability the period, it is by no means representative or exhaustive. Moreover, while these texts may provide a starting point for thinking about disability and the medieval West’s global neighbors, those traditions deserve their own volumes for us to listen, interpret, and remember. We hope that this volume will be just one of many and that more diverse sourcebooks on disability will be forthcoming.

The volume’s contents have been organized by genre, beginning with historical and medical documents that provide crucial insights into how physicians, politicians, judges, and citizens viewed a variety of impairments. The second section focuses on religious texts, including relevant biblical passages, commentaries, miracle accounts, and saints’ lives, to explore Christianity’s engagement with disability in medieval Europe. The next three sections, on poetry, prose, and drama, survey the literary texts of the period. Many of the texts included are staples of medieval British literature courses, such as selections from Bede’s Ecclesiastical History, Chaucer’s The Canterbury Tales, and The Book of Margery Kempe, but many are texts less often translated and taught in the classroom, bringing less recognized voices alongside more canonical ones. The concluding section examines visual depictions of disability in medieval Europe, opening up fields of inquiry beyond the written word. Each entry includes an introduction and bibliography, as well as textual notes and glosses, in order to highlight disability issues within the text and serve as springboards for students’ or scholars’ inquiry deeper into the field. All of these factors are designed to encourage as many people as possible, inside and outside the classroom, to participate in medieval disability studies.
Ultimately, I hope that this volume invites readers to listen to, interpret, and remember the voices and experiences of our historical neighbors; and I hope that participating in such a project of empathy means extending the same to our contemporary neighbors and to our own selves.

Bibliography


“Prosthesis in Medieval and Early Modern Culture,” special issue of *Textual Practice* vol. 30, iss. 7, 2016.


Endnotes

3 Ibid., p. 42.
4 Ibid., pp. 42–43.
10 Ibid., p. 73.
11 One reading of the passage might argue that Jesus’ healing of the blind man constitutes attention to and concern for his physical experiences, even as he valorizes those experiences as the “work of God.”
12 Shakespeare, *Disability Rights and Wrongs Revisited*, p. 87.
14 In speaking generally of people with disabilities, the volume will use person-first language. However, when speaking of specific groups or sometimes of a medieval source’s discussion of a specific group, identity-first language may be employed. Discretion was given to contributors in the case of the latter.
17 McNabb, “Staging Disability in Medieval Drama.”
19 Mitchell and Snyder, *Cultural Locations of Disability*, p. x.