



Social Disability as Colonial Strategy: Palestine, Political Violence, and the Systemic Oppression of the Marginalized

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ABSTRACT

The presented paper reintroduces the concept of ‘social disability’ as a framework to analyze political violence by applying it to the ongoing occupation and genocide against the Palestinian peoples. Drawing on disability justice, crip theory, and decolonial studies, the authors explore how systems of power position certain identities and bodyminds as deficient, incapable, and undeserving of full personhood, thereby producing cycles of disablement and debility. We argue that the social construction of Palestinian identity, framed as inherently flawed, facilitates their marginalization and the normalization of violence against them and serves as a colonial strategy. This framework aims to shift the focus from individual rights to collective liberation, advocating for intersectional solidarity and resistance against oppressive structures.

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For over a decade, Disability Justice (DJ) organizers and activists have linked the DJ movement with the Palestinian liberation movement and the interconnected struggles of Disabled BIPOC communities in the Global North with the Palestinian peoples (Sins Invalid 2014). The most recent reports by the United Nations Office for the Coordination of Humanitarian Affairs reveal the unfolding outcomes of the ongoing genocide in Gaza: since 2023, it is estimated that over 60,000 Palestinians have been killed and more than 150,000 injured, while around 45,000 children face acute malnutrition (OCHA 2024; OCHA 2025), and numbers are still increasing. Those estimations show how bombardment, forced starvation, dehydration, and mass displacement (among other genocidal actions) are producing a pattern of increasing physical and psychic injuries and impairments among Palestinians in Gaza and the West Bank. These genocidal actions against Palestinians by the Israeli state did not begin in October 2023; Palestinians of Gaza and the West Bank have been subjected for decades to continued repeated wars, sieges, and bombardments that not only kill but also permanently disable thousands (Human Rights Watch 2009; UNRWA 2001; WHO 2019).

In the theoretical sphere, Puar (2017) has introduced the framework of debilitation, which is the state of methodical and prolonged eroding of populations that happens in the Global South and among people of color, keeping people in a managed in-between and preventing social, cultural, and political recognition of disability and its entitlements. Puar argues that Israel exercises a ‘right to maim’, meaning they deploy a calculated use of force aimed not only at killing but at inflicting lasting debilitation on the population. More specifically, she provides the example of the ‘shoot to cripple phenomenon’, when the Israeli Defense Forces snipers explicitly target protesters’ legs, knees, and vital organs, aiming to wound rather than to kill outright (Puar 2017, 129).

Based on Puar’s analysis, maiming people, rather than killing them outright, is described as a strategy of the occupation with multiple benefits. One of them is keeping many Palestinians in a debilitated state (i.e., with permanent injuries, amputations, trauma, etc.) that ‘prepar[es] the ground for continued occupation’ by making the population easier to dominate and less capable of uprising (Douglas 2018, para. 7). Another benefit is that the rhetoric of humanitarianism, medical care, and human rights can be entwined with violence, as the state that disabled may also offer prosthetics or aid, thereby presenting itself as benevolent, despite being the source of the initial maiming. This creates a pernicious cycle where the same power that wounds a marginalized group then manages those wounds. This process maintains control over that population in the name of care or rehabilitation (Puar 2017). It has been corroborated by scholars like Nishida (2022) and Ben-Moshe (2020) in similar works on BIPOC care workers and incarcerated people in the United States (US).

Greatly influenced by Puar’s work and DJ principles (Sins Invalid n.d.), this paper is an effort to name and explore another oppressive strategy used by colonization against oppressed people that intersects racism and disableism. Borrowing from the phrasing of social sciences of the Cold War era (Curran 2003), we would like to reintroduce and reclaim the term ‘social disability’ as a framework to analyze the oppressions of groups that do not traditionally fall under the disabled umbrella. Through this framework, the authors try to examine how systems position some identities and bodyminds as deficient, incapable, and undeserving of full personhood, producing and sustaining cycles of disablement and debility in the context of the ongoing genocide of Palestinians.

To achieve this, crip theory and the DJ framework are at the core of this analysis, as they broaden D/disability beyond a medical classification and understand it as a social and political embodied experience of marginalization. Kafer (2013) argues that disability should be understood through a political/relational model rather than as a self-evident biomedical fact. DJ organizers, similarly, urge us to ‘re-imagin[e] and reinvent all of our relationships with one another, as well as with our own bodyminds’ (Sins Invalid 2016, 51). This perspective challenges the frameworks that deem some bodyminds ‘normative’, thus valuable and acceptable, and others ‘deviant, unproductive, and invalid’ (Sins Invalid 2016, 14).

These perspectives reject a deficit view of D/disability as they examine how social systems produce D/disability through the othering of people and systematic exclusion. In this paper, we

trace this expanded understanding of D/disability and use it as a foundation for how multiple regimes of power converge to devalue certain bodyminds and lives, with a focus on Palestinians under ongoing colonial violence and genocide. Thus, we use ‘Disability’ with a capital D for identity and for the sociopolitical, embodied experience. We use ‘disability’ with a lowercase d when describing social disability as an oppressive strategy within institutions. We also proceed from the clear premise that identity creation serves as a tool of control (Foucault 2012) while, as we explain later, staying alert to the risks that a potential simplistic metaphorization of disability entails.

To carefully explore social disability as an analytic tool, we have divided the main body of the paper into distinct sections. In the first part, we trace the historical production of racialized disablement under colonial rule prior to contemporary liberal discourse and establish the racialization of Arab identity in Euro-American discourse. In the second part, we rely on this basis to reclaim social disability and connect the presented framework with the ongoing Palestinian struggle. Finally, as this paper engages extensively with the concept of debilitation, we conclude by placing our framework in dialogue with Puar’s work, identifying points of overlap and distinction, and framing social disability as an analytic tool and, most importantly, a call to political action.

METHODOLOGY AND POSITIONALITIES

This paper, as a theoretical piece, aims to reintroduce the term ‘social disability’. To achieve that, we utilize the form and structure of a narrative review. The sources were selected through the authors’ sustained engagement with relevant scholarship across several years of studying and community-based organizing. The sources included peer-reviewed academic articles and theoretical books on colonization, racialization, disability, and critical studies, as well as community-building, activism, and organizing materials (e.g., zines, open letters, podcasts). For the examples related to the ongoing genocide of Palestinians, we relied on internationally acknowledged sources (i.e., the United Nations, the World Health Organization, and Human Rights Watch).

We, the authors, acknowledge that the literature selection was not mapped in a fully organized manner and that it reflects our positionalities as critical feminist scholars and queer crip individuals. Our positionality in relation to Palestine is one of solidarity. We are neither Palestinian nor of Arab descent, and therefore we do not make an identitarian claim or speak from lived experience. Rather, we aim to advance a political and scholarly argument grounded in solidarity, critical analysis, and accountability to the histories and conditions examined in this article. This standpoint first and foremost aligns and intersects with DJ values, especially the principle of collective liberations: ‘No body or mind can be left behind – only moving together can we accomplish the revolution we require’ (Sins Invalid n.d.).

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BACKGROUND

RACIALIZATION AS A SOCIAL DISABILITY

In medieval England, Jews were subject to a range of legal and social restrictions under Christian rule. In 19th-century Britain, these exclusions were increasingly discussed as ‘Jewish disabilities’ (Freitag 1968). This term reflects a legal incapacity imposed on a particular group, wherein being Jewish (in both religious and ethnic terms) was constructed as a civil disability within the context of Christian hegemony. These laws prohibited them from exercising fundamental rights, such as holding public office and engaging in free trade, while also imposing regulations concerning dress codes, housing, and various other aspects of daily life (Emancipation n.d.).

Pro-eugenics thinking shaped the creation of discriminatory laws, which created legal categories used to confine people, many of whom would now be recognized as having learning disabilities (Wise 2024), and proposed sterilization for those deemed unfit for society (Barad 2016). It is

clear from reading the language used in all that legislation that the term ‘disability’ was used as a legal-administrative tool aligned with imperial and social order. As historians have long before argued, regimes drew on racist rhetoric and public health fears to rationalize exclusions (Bashford 2003) that preceded science itself.

Anti-Jewish discrimination persisted in the 19th-century US, where disability discourse became a tool for regulating immigration. Pro-eugenic arguments framed disability as a threat to the ‘white race’ to justify exclusion (Baynton 2001). Policymakers extended ableist rhetoric into ethnic screening, casting immigrants as mentally inferior and assigning group ‘deficiencies’: Jews as neurotic and physically weak, Slavs as ‘slow-witted’, and Italians, Portuguese, Greeks, and Syrians as undersized and compared to ‘dwarfs [sic]’. This framing entered immigration policy and practice, priming officials and the general public to read racialized phenotype as evidence of disability and deficiency (Baynton 2001).

A similar dynamic can be found in colonizer-indigenous interactions, where ethnicity and race were pathologized through state and scientific discourse. Ineese-Nashe (2020, 4) argues that ‘dominant perspectives in health research equate racial discrimination with societal disablement, perpetuating a discourse of “Indigeneity as disability” wherein Indigenous peoples are disabled regardless of individual capacity’. ‘Indigeneity as disability’ shows how colonial institutions defined normalcy and ability in ways that labelled Indigenous bodyminds as inferior or unfit by default; thus, being Indigenous is socially and politically constructed as a ‘disabled’ status regardless of individual ability (Ineese-Nash et al. 2018). Even though we could not find evidence of the wide adoption of the term, many scholars have corroborated the concept, showing that in America, Australia, and Africa, colonizing forces imposed disability upon Indigenous communities based on their cultural identity and/or race (Araújo 2022; Ngoma and Mwenda 2024; Soldatic 2017; Whitt 2021). Prior to colonization, many Indigenous communities used to have more fluid understandings of difference (Ineese-Nash 2020), but colonizers enforced Western medical categorizations and utilized disability as a pretext for controlling Indigenous populations (Puszka et al. 2022).

It is critical to acknowledge that these medical categories were socially constructed from the perspective of whiteness as the normal condition, regarded as the standard (Strings 2019). Thus, the main symptom of Indigenous and non-white individuals was not their culture but their distance from the white ideal. Any purported evidence used to justify that preconception was fabricated within the scientific paradigms of the time (Strings 2019). In other words, colonizers perceived race and cultural differences as inferior and employed Western science to substantiate that notion.

A parallel trajectory unfolded in the US toward Black communities, as Blackness has been repeatedly (re)fabricated through shifting regimes of expertise, first by nineteenth-century medicine (Snorton 2017) and anthropology (Muhammad 2019) and, later, by liberal social science (Ferguson 2004), each time in the service of racial hierarchy. For instance, antebellum medical discourse linked Blackness to pathology and experimental exploitation, laying a scientific veneer over domination (from slave-hospital wards to gynecological experimentation), thereby naturalizing the inferiority of Black communities (Snorton 2017).

By the mid-19th century, it was common to discuss nonwhite races as if they were disabled. They were seen as flaws in human evolution and were therefore pathologized (Baynton 2001). For instance, Down syndrome was first described in medical terms as ‘Mongolism’, as it was first believed that the phenotype was a result of the Caucasian race reverting back to the Mongol race, which was supposedly a less evolutionarily advanced race (Baynton 2001).

Jumping to the liberalizing mid-twentieth century, queer-of-color critique traces how the same hierarchy reappeared as cultural diagnosis. In his book, Ferguson (2004) demonstrates that canonical sociology judged Black people as unfit for the liberal capitalist order by departures from the heterosexual, patriarchal nuclear family. This is an ostensibly modern, value-neutral frame that masked the continuity of racial domination (Ferguson 2004). Likewise, Muhammad (2019) documents how progressive and postwar reformers weaponized crime statistics to incriminate culture, transforming biological racism into a social-scientific common sense that pathologized Black communities while claiming objectivity.

Respectability politics in liberal contexts reframe racial hierarchy as moral and sexual deficiency surfacing across performance and aesthetics and through discourses of abjection (Schalk 2022). They use metrics of health, normalcy, and risk to monitor and regulate Black communities, turning systemic inequality into individual blame (Schalk 2022). Liberal humanism itself keeps Blackness in a zone of suspended humanity, even when it denies biological race (Jackson 2020). As presented above, there has been a historical shift in the understanding of race and identity, moving from physical measurements of skulls to discussions of culture and respectability. Thus, this transition did not provide evidence of racial inferiority; rather, it rationalized existing biases.

Nonetheless, these ideas influenced discussions in welfare and criminal justice of that era, reflecting in terms such as ‘social disability’. Indeed, social disability was widely used in early social sciences and lawmaking (Daley and Pittman-Munke 2021). For instance, the Michigan Social Welfare Act of 1939 explicitly called for ‘the prevention of social disabilities, the removal of causes of such disabilities, and the restoration of individuals to self-support and to normal conditions of life’ (Social Welfare Act 2025, § 400.54). Even though the term ‘social disability’ is not used explicitly in terms of race here, it is important to contextualize this framing. By the early to mid-20th century, US social science had liberalized its writings on Blackness and moved toward framing their cultural and behavioral characteristics for their conditions of living, especially in terms of the high poverty rate that characterized them at the time (Curran 2003; O’Connor 2001).

In the book *Welfare in the United States: A History with Documents*, by Nadasen, Mittelstadt, and Chappell (2013, as cited in Nishida 2022, 68), the authors describe the views of social workers in the 1950s as they witnessed African Americans entering the Aid to Dependent Children (ADC) program:

While they did not scorn them as critics did, they nevertheless viewed these clients as problematic compared to the overwhelmingly white and widowed women of earlier years. Using the vocabulary of postwar psychology, social workers insisted that the new clients were afflicted with ‘social disabilities’ of various types: they lacked education and employment skills.

What is described here as social disability refers, in essence, to the perceived incompatibility of certain racialized, pathologized traits with the ideal of the white, middle-class nuclear family (that dominated US social policy and culture in the post-World War II era) under a white supremacist framework. The disability identified here is clearly racially coded. While one could also argue that many white women who received benefits lacked education or job skills, they were not labelled with social disabilities. Their need was framed as misfortune requiring temporary support (Nadasen 2007). In the case of Black recipients, however, it seems that it is a product of their race and its predispositions that they are in a disadvantaged position.

Even though the term ‘social disabilities’ has fallen out of use nowadays, the underlying judgments have not disappeared. The discourse has moved to the Black community, a culture of poverty and crime as well as a difficulty in maintaining the nuclear family model, rather than being the product of racist structures (Muhammad 2019; O’Connor 2001). The vocabulary has liberalized, but the policy remains.

RACIALIZATION OF ARAB IDENTITY

In US census forms, Arab identities often fall under the category of ‘White’. Nevertheless, white supremacist ideologies in the West have long othered and racialized Arab communities on the basis of culture and religion. An early example is the forced conversion and exile of Muslims in Castile in 1502, following the Reconquista (Encyclopaedia Britannica, n.d. ‘Morisco’; Jónsson 2007). Even Muslims who converted to Christianity, later categorized as Moriscos, remained under suspicion and were eventually expelled in the early seventeenth century (Jónsson 2007). This indicates that conversion did not secure acceptance into the dominant Christian order. Instead, these populations were treated as fundamentally different (Jónsson 2007). In this period, the civilizational divide between Christianity and Arab culture was reinforced.

Moving to the 19th and 20th centuries, during European colonial expansion in Arab and North African lands, racialized ideas of Arab and Muslim inferiority intensified. One clear example is Italy’s genocidal campaign against Libyans from 1929 to 1934 (Ahmida 2020). This violence

was driven in part by colonial views of Libyans as backward, uncivilized, violent, and obstacles to civilization. With the rise of eugenics and fascism in the early 20th century (and eventually Nazism), European racial science and white supremacist ideologies further entrenched hierarchies that cast Arab and Muslim populations as inferior and threatening (Goldstein 2015). In Western discourse, Muslim and Arab identities were often conflated, and Arab people were frequently represented as threats to the purity or security of the West (Teo 2013).

European literature and academia perpetuated these views through what Edward Said (1978) called 'Orientalism'. The term was used to describe the discourse that depicted diverse Muslim societies as a single, static 'Orient' defined by exoticized backwardness and violence, an irrational, static civilization with a deep and unchanging hatred towards the West (Teo 2013). Essentially, Islam was culturally racialized as Europe's opposite, as incapable of progress and democracy. Most importantly, these views were used as an excuse to justify imperial domination of the Arab land (Teo 2013). These views still persist throughout Europe today. Islamophobia in particular is a widely used tool of right and far-right movements and governments in order to gain prominence (Meer and Spaeti 2015).

U.S. Islamophobia is often linked to 9/11, though anti-Muslim suspicion and hostility predated the attacks. The racialization of Muslim identity intensified with the rise of the Civil Rights Movement and the prominence of the Nation of Islam and other Black nationalist movements (Curtis 2013). This created, as Curtis (2013) writes, a 'Black Muslim scare' and branded Islam as a domestic radical threat. Islam became not simply a minority religion but a racialized marker. This laid the foundation for broader anti-Muslim sentiment, as well as narratives around Muslim communities (including Black-led ones) as incompatible with 'American norms' (Aziz 2021; Curtis 2013).

By the end of the 20th century, US strategists, seeking a new enemy to sustain military-industrial growth, identified the 'Islamic threat' (Aziz 2021; Kumar 2012). Post-9/11, this perspective intensified, with Islamophobia being a crucial ideological foundation to gain domestic support for military interventions in Afghanistan, Iraq, and other Muslim-majority regions (Kumar 2012), even if their populations were not Arab-identified. The identity of an Arab-Muslim terrorist had been created. Muslimness became a racial signifier, and people who were visibly Muslim or Arab (e.g., facial characteristics, name, dressing, etc.) were highly villainized (Kundnani 2015). Anti-Muslim hate crimes spiked 17-fold within a year (Human Rights Watch 2002). The establishment of the PATRIOT Act expanded surveillance on Arab people, and the National Security Entry-Exit Registration System (NSEERS) program forced men from 25 Muslim-majority countries to register.

The clearest evidence of Arab racialization, ironically, is the surge in hate crimes against different religious groups and, specifically, Sikhs, as attackers targeted by appearance and assaulted turban-wearing Sikh men alongside Arab men due to a misapplied racial marker (Jhutti-Johal and Singh 2019). Such incidents demonstrate that Islamophobia operates independently of actual Islamic belief. It is primarily phenotype- and symbol-based (Meer and Spaeti 2015). All these provisions made it clear to the public consciousness that Muslim-looking violence is terrorism. In contrast, white extremist violence is downplayed (Corbin 2017; Jannack 2021). By the 2010s, measures like the 2017 Muslim Ban and white nationalist replacement narratives made clear that, regardless of census labels, Arabs and Muslims were treated as a racialized outgroup (Scalco et al. 2025).

Although much analysis focuses on Europe and North America, the racialization of Muslims is a global phenomenon. In countries like India and Myanmar, indigenous Muslims are racialized as foreign, which fuels the nationalist and state violence that targets and scapegoats them (Bowser 2022; Maizland 2024). Moving to the North, in China's Xinjiang region, the predominantly Muslim Uyghur and other Turkic communities face suppression under a counterterrorism pretext that echoes global Islamophobic narratives. Since 2017, authorities have detained over a million people in reeducation camps, imposed mass surveillance and forced assimilation, and carried out deportations, disappearances, forced labor, and family separations (Human Rights Watch 2021).

All these global examples of anti-Muslim hate serve to demonstrate that Muslim racialization is a worldwide phenomenon, adapting to local contexts. In every case, we see a pattern of defining Muslims as a noticeable out-group (e.g., name, appearance) marked by inherent negative traits

(e.g., violence, disloyalty, backwardness) that purportedly threaten the majority's security or values. In each case, religion intertwines with ethnicity, culture, and politics to produce a racialized identity. As scholar Deepa Kumar (2012) observes, anti-Muslim racism is not simply about individual hate crimes, but it is rather woven into the fabric of global politics and power structures; it serves the empire, as it has found Islamophobia useful for gaining support and diverting blame.

RECLAIMING SOCIAL DISABILITY

The racialization of the Arab people, among other groups, as described above, serves as a colonial sorting mechanism where authorities read socially constructed signs, then mark people as less rational, more dangerous, and less modern (Kumar 2012; Kundnani 2015). That status precedes any individual action and positions groups as already disabled in the political imagination. Therefore, it is available to be used as a tool to reinforce the societal hierarchy. The above process describes exactly how we define social disability: the advanced disabling of people through classification, aiming to excuse the oppression and maintain the oppressive system.

Under this framework, people who deviate from the dominant ideal (cis, straight, non-Disabled, healthy, Christian, white, capitalist-productive) are marked as deficient and thereby positioned as already disabled in the moral and political imagination. The label is not intended to serve as a medical diagnosis; instead, it functions as a status assignment that occurs prior to any medical evaluation. It is meant to sort populations as inherently less rational, less safe, less modern, or less deserving, which in turn makes them available for injury and control. All the violence and harms that follow this designation (e.g., policing, exclusion, impoverishment, border violence, "preventive" war, coerced care) are then framed as unfortunate but necessary. Social disability relies on the idea that the dominant group's identity requires a subordinated opposite (able/disabled, civilized/uncivilized, moral/immoral) that stabilizes hierarchy and legitimates intervention. Social disability is not the result of inherent impairment but an analysis of how power disables (socially, legally, financially) before any specific wound is inflicted.

For many decades now, disability studies scholars debate regarding the harmful effects versus the useful potentials of the metaphorization of disability. The first raises concerns that using disability as a metaphor entails the danger of not only contributing to the discrimination against Disabled individuals but also ignoring experiences of pain and impairment (e.g., Alshammari 2022; Dorfman 2022; Sontag 1990). The latter underlines the importance of interconnecting the struggles and how metaphors, as part of life, can offer a unifying lens and revolutionize the way we think of intersecting struggles, such as colonialism, racism, and ableism (e.g., Harris 2020; Paul-Emile 2018; Titchkosky 2016).

In this paper, the goal is not to utilize disability as a metaphor, ignoring the material and embodied realities of disability, nor to ignore the common ground struggles. Even though social disability is an outdated term that is no longer used, its frame still exists. The colonial forces have not stopped utilizing the term while ignoring the context. Reclaiming the term 'social disability' does not equate it with anti-colonial, race, and class struggles; instead, it aims to bring these issues back to the forefront. Social disability, then, is not a metaphor for personal deficit. It is an account of how systems are disabled in advance and how classification authorizes later injury.

By reclaiming social disability, we argue, there might be a pathway for people in oppressed positions (e.g., colonized, racialized, Global South communities) to see themselves as 'disabled' by the system and stop investing hope in liberal promises of equality that never materialize. Instead of trying to prove they are 'just as good' or fit into the oppressor's norms, they can unite in claiming a politicized disability identity, one that inherently challenges the system's values. This is not about taking on 'Disabled' as a personal identity in a trivial sense or diminishing the lived experience of people with Disability. It is about understanding one's positionality. In other words, the framework asserts that the system needs us to be less-than-human (cc: disabled) for it to function.

This approach aligns with what DJ scholars call politicizing disability. The Transnational Feminist Disability Studies Collective (2023) published a statement declaring that 'imperialism is intertwined with disablement', and the mass debilitation of Palestinians is not 'collateral

damage' but core to modern warfare. Ben-Moshe also speaks of being 'disabled politically', meaning recognizing how disablement connects to colonialism and imperialism and using that awareness to build solidarity and resistance. She urges a 'decolonial commitment' wherein disabled people globally (and all politicized people) refuse to accept these injuries and traumas as inevitable (Adler-Bolton and Gill-Peterson 2024).

The social disability framework takes this a step further by suggesting that even those who might not identify as Disabled must realize that under white supremacist capitalism, they are all disabled subjects. The framework broadens the typical US-centric notion of Disability (tied to legal status or medical diagnosis) into a totalizing condition of oppressed existence (Adler-Bolton and Gill-Peterson 2024). Gaza is rendered disabled in the global hierarchy, deprived of autonomy and resources. Understanding this fosters a clearer view that the issue is not one of individual impairment at all but of structured violence.

THE COLONIZATION OF PALESTINIANS AND THE SOCIAL DISABILITY FRAMEWORK

Palestinian identity is often constructed in post-colonial and Zionist discourse as inherently flawed. Palestinians are depicted as backward, irrational, or violent (Said 1978), effectively disabled in the cultural imagination of the oppressor. This goes beyond the literal creation of Disabled bodyminds (though that is happening too) and into the realm of identity: Palestinians are preemptively viewed as incapable of self-governance and unworthy of full personhood. This position is highly connected with and has stayed stable since the British colonization of Palestine (Said 1978).

As we have argued, all marginalized identities and embodiments are potentially subject to social disability under a system that defines them as inferior to the normative ideal. Not everyone with a Disability is socially disabled in this sense (and vice versa), but there is an intersection. Crucially, those who do have impairments only receive social recognition or support if they belong to or accept the hierarchical norm. Within oppressive hierarchies, Disability becomes a righteous identity only for those who submit to the existing order, while those cast as disabled outsiders are denied basic human rights.

Fanon (1967) argued that colonialism imposes an inferiority complex on the colonized by depicting them as lesser humans whose resistance is recast through racist stereotypes of incapacity or deviance. By treating colonized peoples as inherently unfit to govern themselves, colonial regimes rationalize violence while undermining the personhood of those they oppress (Alatas 1977). The production of this disabled Other is central to colonial rule, allowing domination to appear as paternalistic care rather than oppression (Alatas 1977). Fanon also described how colonial domination works through language that strips the colonized of full personhood, often casting 'the native' as animal or subhuman (Fanon 1963). This logic appears in contemporary Israeli state discourse. After October 7, Israeli Defense Minister Yoav Gallant announced 'a complete siege [...] no electricity, no water, no food, no fuel. We are fighting human animals, and we act accordingly' (HRW 2023). This rhetoric does more than describe. It authorizes policy, normalizes collective punishment, and turns discursive devaluation into material harm.

The ongoing genocide of Palestinians shows how social disablement leads to physical and psychic disablement. Israeli military operations have inflicted mass death and injury in Gaza and the West Bank while depriving people of healthcare, clean water, food, and humanitarian aid (Gisha 2026; HRW 2024; HRW 2023). Yet the global response remains unjustifiably weak, not because this violence is invisible but because Palestinians have long been rendered as less fully human, with their suffering treated as inevitable. Positioned in mainstream narratives as non-modern, uncivilized, and inherently violent [sic], they are too often denied the grief, outrage, and resistance extended to others, and their deaths are dismissed as the natural by-products of a troubled region rather than the outcome of state violence (Hodges 2024).

Indeed, when Palestinians resist, their actions are pathologized. They are framed not as legitimate opposition to oppression but as symptoms of fanaticism or primitive aggression, a continuation of the colonial trope that resistance equals madness (Sheehi and Sheehi 2021). As Fanon correctly identifies, nonviolence is the tool colonial societies developed to contain the colonial order and revolt. After the 1947 Malagasy uprising, French authorities described

resistance as collective madness rather than a justified anti-colonial act (Baynton 2001). This pathologization denied the legitimacy of resistance and absolved colonial power of blame (Césaire 2000).

SOCIAL DISABILITY AND DEBILITATION

Connecting social disability with debilitation and the right to maim (Puar 2017), both frameworks show how power sorts people into accepted and stigmatized groups, then uses strategic harm against those marked as deviant. Both hold that hierarchical societies depend on a subordinated class to sustain dominant power. Able-bodiedness, often tied to whiteness and national belonging, is constructed by excluding and injuring those marked as non-normative. The social disability perspective holds that the privileged group is defined against an ‘other’ cast as inferior. This is an intersectional process, and Puar’s work (2017) bridges queer theory, disability studies, (anti)colonial studies, and critical race theory, showing how racism and ableism reinforce each other, for example, in whose disability is recognized and whose debilities are ignored. The social disability framework stresses the same structural interconnection and locates these harms within social power. We introduce both debility and social disability as strategies within that field. At the same time, social disability is the frame in which debility is executed, alongside other tools, such as the strategic use of D/disabled groups against each other.

Puar (2017) distinguishes debility (i.e., the slow, methodical harm that drains capacity without a formal label) from disability (i.e., the recognized impairment tied to one’s rights) as overlapping and shows how state power shapes bodies and capacities. Her analysis names injuries and identities that white-centered disability politics have sometimes missed. She also traces how rights discourse can legitimize state violence in colonial contexts through the paradigm of the Palestinian struggle and how certain queer and Disabled subjects are utilized in that relation of nationalist power.

Building on the clarity Puar’s (2017) work offers, we aim to reclaim and advance the social disability frame to broaden the analysis. Social disability treats racial, sexual, religious, financial, and bodily marginalization as shared disablement relative to a privileged norm. It centralizes the common struggle and the systems that benefit from disablement. At the same time, we acknowledge that oppressions intersect but are not identical. Our framework acknowledges those differences in degree, yet reads them as variations of sorting, debilitation, and exclusion. We take Puar’s nuance as a stepping stone toward a broader account that supports unity without erasing difference. In other words, Puar’s work is diagnostic, naming how the state claims a ‘right to maim’ (2017). Our approach uses that diagnosis as a starting point for strategic solidarity, alliances across groups, and a political account of shared disablement.

Both Jasbir Puar’s framework (2017) and the social disability perspective describe a world in which hegemonic power thrives by designating a subclass of humanity to oppress and exploit. They agree that modern forms of domination often work by disabling targeted groups rather than by outright elimination. Both highlight that authorities justify these practices as protecting society and maintaining order and that they secure financial gains for state and corporate actors under capitalism. The differences between the two lie mainly in emphasis and granularity. Puar provides a detailed theoretical account of how debility is administered and intersects with specific discourses. In contrast, the social disability framework provides a broad unifying analysis of why oppressed groups are kept down to sustain an unjust hierarchy and its profits.

Despite these differences, one can see the two approaches as complementary. Puar offers depth and precision about the mechanisms of maiming and control, and the social disability perspective aims to offer a big-picture solidarity narrative. Together, they underscore that the oppressed groups of the world (whether disabled, colonized, racialized, queer, or otherwise) are the product of deliberate structures of power. Recognizing this fact, as both frameworks do, is the first step toward dismantling those structures and imagining a more just, inclusive future.

CONCLUSION

Throughout this paper, we have tried to establish a solid background for our proposed framework of social disability. This framework shifts the focus from individual rights-based advocacy,

which often asks the existing power to kindly include the marginalized, to a collective liberation struggle that targets the root(s) of oppression. When Palestinians, and by extension other marginalized groups, internalize that the colonial-capitalist order will always define them as deficient, no matter their actions, they can abandon fruitless attempts to prove their worth to the oppressor. Instead, we can build alliances based on a shared social disability status against the hegemonic norm. This means recognizing the common structural cause behind various injustices. Acknowledging this shared position can galvanize a unified front seeking to overturn the hierarchy, rather than each group separately begging for inclusion.

Of course, this newly (re)introduced framework includes limitations. First, this paper does not delve into how dehumanization and colonial and racial hierarchies depict people as less than human. This point warrants further exploration. It is also crucial to acknowledge the risks and costs of adopting the disability label. Structural ableism stigmatizes disability. In racialized contexts, it can essentialize inferiority, echoing tropes communities are fighting (Harris 2020). For many, especially marginalized communities and individuals, retaining a non-disabled presentation is a survival strategy for safety, work, and credibility (Piepzna-Samarasinha 2020). The state's uneven recognition also means those most debilitated are often least able to claim disability protections, which Puar (2017) shows as debility left uncounted and unmanaged except as control. Future work should center these tensions alongside our analysis.

The hope is that social disability will be used as an affirmative framework to embrace politicized understanding of disability, acknowledging that the problem is not D/disabled peoples, but the political system that disables them. Whether it is a disabled person fighting for accessibility or a colonized community fighting for survival, the adversary is a matrix of domination that privileges an ideal of able-bodied, white, Western normativity. Truly liberating Palestine and other oppressed peoples will require dismantling that matrix. In practice, this looks like D/disabled people pursuing solidarity across movements, with DJ linked to anti-colonial resistance, and the connection flowing both ways.

Ultimately, the cultural disability framework urges a shift from asking for inclusion to demanding a new world. Palestinians do not need to prove they are modern enough or able enough to deserve freedom. Rather, the burden is on us to recognize social disabling and join in dismantling the violent order that produces it. In the face of an ongoing genocide that disables and destroys thousands, understanding this framework is not just an academic exercise; it is a call to action. By seeing how our bodyminds are fractured by the political order, we can refuse to forget. We can instead remember and keep witnessing the violence: every bombed hospital, every amputated limb, every traumatized child in Gaza is not an accident of war but a function of oppression. With that clarity, the path forward is not to integrate into a system that maims and marginalizes; it is to abolish it and rebuild a society that does not require disabled 'others' at its foundation.

COMPETING INTERESTS

The authors have no competing interests to declare.

AUTHOR CONTRIBUTIONS

M. Davradou conceived of the presented idea. M. Davradou and G. T. Karalioliou developed the theory and completed the literature review. Both authors contributed to the final manuscript. Both authors share equal contribution and responsibility for all parts of this work.

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