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Embracing Capability in the Incapable World in *My Left Foot* and *One Little Finger*

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Abstract

Disability is not solely a product of the underlying medical condition; rather, it is substantially influenced by the way the external environment and society interact with the individual. The paper aims to explore the crucial role society plays in the life of a person with a disability, with a particular focus on the narratives presented in two autobiographical works*:* *My Left Foot* by Christy Brown and *One Little Finger* by Malini Chib. Notably, both authors, born with cerebral palsy to nondisabled parents, share commonalities in their experiences while simultaneously presenting unique perspectives. In both books the parents are nondisabled. I will look at how nondisabled parents shape early meanings for disabled children and their siblings—their acceptance, struggle, love, and advocacy inform how children understand their disability as well as their value and place in the world. A significant aspect of this exploration centers on the communication challenges faced by the characters, marked as "disordered." The study examines the societal dynamics surrounding disability and communication, exploring normative speech pressures, repetitive expectations, and the intricate nature of disability disclosure. Within this context, the author's insights into creatively adapting to disability become a focal point, mapping a journey that is not only adaptive but also laden with emotions connected with loss. This paper aims to shed light on the complex interactions that exist between how society views people with disabilities, how families affect them, and how resilient each person is. The paper aims to enhance comprehension of the emotional aspects involved in adjusting to and accepting a disability in the larger social context by disseminating these personal accounts.

Keywords: Disability Narrative, Resilience, Identity, Gender, Ethics of Care, Autobiography

Introduction

As per the Cambridge Dictionary, the word "dis" denotes treating someone disrespectfully or with the intention of insulting them. This is the point at which prejudice and stigma towards individuals with disabilities began to take hold. A person with a disability[1] has a significant role in society. Individuals with disabilities must endure mental as well as physical challenges. They learned to comprehend their bodies as early as possible, and they also had to learn about society and how they were supposed to live. Society's expectations of how they should look, speak, and behave impact the life of a disabled person. People find ways to cope and thrive in a world that isn't perfect and often falls short. Christy Brown, the author of *My Left Foot,* and Malini Chib, the author of *One Little Finger,* both fit this description. In order to get by in life, they too require assistance from humans and certain tools. Brown with cerebral palsy's journey from childhood to adulthood is chronicled in the 1956 book *My Left Foot*. Likewise, Malini Chib's 2010 autobiography, which details her genuine life from birth to growing up with cerebral palsy, follows a similar pattern. Although the authors come from varied socio-historical backgrounds, their shared lived experience is what unites them.

Both Christy Brown and Malini Chib, who were born with cerebral palsy (Brown in Ireland and Chib in India), are prime examples of resilience and willpower in the face of enormous obstacles. Throughout their lives, both people have had to deal with ableist beliefs, accessibility problems, and medical difficulties. They have made an effort to live lives of respect and dignity in spite of these challenges. The narratives of Brown and Chib demonstrate their remarkable talents in a society that frequently ignores them. Brown, renowned for his autobiographical work *My Left Foot*, and Chib, recognised for her memoir *One Little Finger,* have each emphasised their capabilities in the incapable world. While Chib's story focuses on her ability to operate with one little finger, Brown's work emphasises his deft use of his left foot. These authors strongly demonstrate how they have harnessed their capabilities to overcome societal limitations and assert their place in the world with dignity.

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[1] Throughout this study, I am aware of the importance of language in discussing disability. I use the term "person with a disability" when referring to the disabled community as a whole, to emphasise the individuality of each person. However, I use the term "disabled person" when referring to the author, as they identify as a disabled person and prefer identity-first language.

Parents' role in the life of a disabled child

Christy has had cerebral palsy since he was born. He has lived a totally different life than his classmates. His autobiography began by describing how he was kept in the hospital for several weeks without his mother. He was unable to sit without assistance for 12 months. When his relatives and neighbours found out, they told his mother that the boy is psychologically defective and unwell as well. Chib's memoir also includes how she had to deal with a lot of stigma and ableism throughout her life, as well as the persistent blame placed on Malini Chib. People used to make cruel and derogatory remarks to Chib, believing that she was incapable of understanding. They also started saying that the disabled child was mentally ill and incapable of accomplishing anything in life. In a way, it compels parents to see their kids with disabilities as a responsibility and not with love.

Parents of children with disabilities frequently have restricted options in a community that disregards the rights of individuals with disabilities. Even seemingly straightforward activities, like getting a disabled child to school or finding a home that can fit a wheelchair, can be difficult to accomplish. It is even more difficult to enhance one's quality of life by doing simple things like visiting the beach or seeing a movie at the theatre. The public views these problems as hardships—for parents, not for their children, of course—but in reality, they are indicators of a lack of institutional support rather than challenges brought on by a child's impairment. Some parents of disabled children feel compelled to place their children in care due to a lack of resources, as they are unable to provide safe and adequate care for them at home. Usually, this entails placing kids in huge institutions, skilled nursing homes, or nursing homes rather than small group homes that reintegrate disabled individuals into their local communities. Rethinking how we see and discuss disability culture is necessary to counter the prevalent societal and media narrative that portrays disability as a tragedy. In many cases, this means having an initial conversation about disability culture. This re-evaluation is crucial for the millions of disabled children and adults who require activists to stand in solidarity with them, especially when considering the ways in which these issues relate to child care, family formation, and parent-child interactions.

The parents of Malini relocated to London in order to provide Malin with better care. She attended Roger Ascham School in Cambridge before transferring to Cheyne Walk, Chelsea, London. However, Christy Brown came from a very poor family and was not from a privileged background. He was initially homeschooled by his mother. Christy has been lucky to have loving parents who have never let him feel any different—they have supported him through good times and bad. Seeing Christy as just another loving son, his mother, in particular, disregarded social norms and lavished him with love, treating him as she would her other children. His will to excel academically has been strengthened by this consistent support, which has propelled him to accomplish incredible educational milestones. From his early years to maturity, she served as a rock of support, inspiring him constantly. She was always there to support him, encourage him, and give him the willpower to stand up to the ableist actions of society.

The Journey of Self-Acceptance and Internalised Ableism

Learning to accept oneself is one of the biggest obstacles in the life of a disabled person. For a disabled child, this process of coming to terms with their condition is especially difficult since they witness the world treating them differently from a young age. It can be extremely disconcerting to feel the mixture of pity, discomfort, and curiosity that permeates society's gaze. Whether on purpose or not, a lot of people react to disability with a noticeable sense of uneasiness. A child may be particularly harmed by this response since they will internalise these unfavourable ideas and start to see their own disability loss through a prism of guilt and inadequacy.

As these kids become older, they could begin to feel bad about themselves and develop an ableist attitude towards their own disability. Because it confronts one's true identity against accepted social norms, this internal struggle is extremely unpleasant. Great bravery and determination are needed to overcome this internalised ableism. It entails a profound, introspective trip where the person is required to face and demolish the selfdefeating ideas they have internalised. It takes more than just admitting one's own disability to be accepted; it takes having the courage to esteem and love oneself in spite of social stigmas. Although accepting oneself is extremely difficult, it is the first step in learning to accept one's disabilities. It is a continuous process that is hampered by social and emotional constraints.

People with disabilities frequently experience social isolation and a sense of constant scrutiny. They may experience a sense of alienation from the constant sense of being judged, as if they are always on the outside looking in. In addition to highlighting the significance of creating inclusive societies where disabled people feel seen, heard, and respected for who they are rather than just for their disabilities. Accepting oneself for who one is a defiance of social conventions that aim to marginalise. It's about taking back control of one's life and discovering strength in oneself. This embrace can result in a fuller, more satisfying life where pleasure and personal development are based on self-acceptance and love for oneself.

Brown used to despise the world and detest himself. He was envious of those who could run, walk, and climb trees with ease—basic motions that seemed impossible to him. He was overcome with jealousy and resentment, and he struggled to find happiness or meaning in his life. His early years were spent alone, and the only things that gave him comfort were writing and drawing. But the emptiness he felt could not be entirely filled by his artistic endeavours. He eventually grew lifeless, his existence defined by a routine that held no thrills or prospects. He felt that his condition had condemned him to a life of unending misery and unhappiness, and he accepted his existence as a curse. However, when Brown went to THE MERRION STREET Clinic, his life changed significantly. He met other people in this clinic who had various disabilities and were all dealing with different issues. For Brown, this was an eye-opening event. He interacted with them, exchanging narratives and discovering points of agreement in their setbacks and victories. He changed as a result of seeing their tenacity and willpower. He realised that he was not alone in his path and started to view his own disability in a new way.

"In the Clinic, it is different. Here, we are 'among our own', so to speak. We are surrounded by people with handicaps similar to, and often worse than, our own, and we see that our old 'difference' is not so different after all. From thinking of ourselves as outcasts and burdens on others, we slowly come to realise that there are people who understand, people who have actually dedicated their lives towards helping us and bringing us to a greater understanding of our own, so that in the end something splendid is wrought out of our affliction." (Brown,80)

Brown's resilience was accelerated by the supportive and sympathetic atmosphere at THE MERRION STREET Clinic. He discovered that maybe the most important characteristic for someone with a disability is resilience. It is the capacity to change with the times, to endure hardships, and to draw strength from one's weaknesses. Brown started to reestablish his sense of value through the contacts and connections he made at the clinic. He learned that he could write his own story and that his condition did not define him. Brown was able to get over his anger and self-loathing by being resilient. It gave him the confidence to face his life with optimism and a renewed sense of purpose. He began to actively pursue his passions for writing and painting, using them as ways to show his resiliency and inventiveness rather than as ways to escape. This change in viewpoint made his ordinary life seem full of possibilities and optimism. Brown's story shows how crucial resilience is for people with disabilities. It serves as a reminder that happiness, acceptance, and growth are always possible despite obstacles and biases from society. The goal of resilience is to face one's challenges head-on, discover inner strength, and go on to live a meaningful life despite one's impairment rather than to minimise or ignore them. In the end, Brown's resilience allowed him to regain his life and find happiness, proving that everything is attainable with the right support, willpower, and tenacity.

Accessibility and Disability: A Matter of Necessity

For people with disabilities, aids and devices come in second place to family as a priority. Disabled persons form a strong bond with their mobility aids, which include wheelchairs, canes, and smartphones in the modern era, just like people do with stuffed toys or electrical devices. These instruments are more than just objects; they stand for freedom and self-determination. For those with disabilities, a wheelchair or cane is an extension of who they are, allowing them to move around the world more freely and independently. Similarly, cell phones increase their independence and connectedness by giving them access to information, communication, and a variety of supportive apps. As a result, these assistive technologies are essential to helping people with disabilities live happy, independent lives.

Disability and accessibility have long been important areas of research in the social sciences, particularly in understanding how people traverse environments created without their needs in mind. The importance of mobility aids such as wheelchairs cannot be emphasised in debates about improving the quality of life for people with disabilities. Academics such as Oliver (1990) and Shakespeare (2006) argue that mobility aids serve more than just functional reasons; they also play significant roles in the social and psychological lives of those who use them. In *My Left Foot,* Brown’s description of their wheelchair emphasises his profoundly personal and even anthropomorphic relationship with their mobility aid:

“The old go-car was still my chariot, and I went about in it like any royal king. It was an ugly, battered old thing that nobody ever treated well. It was always being kicked, knocked over, shoved about and trampled on. Everybody joked about it. But to me, it was something lovable, almost human. It seemed to have some queer dignity of its own that nobody but I could appreciate. I called it Henry.”(Brown, 17)

It shows the essence of how a wheelchair goes beyond its material role to become a beloved companion and a symbol of personal freedom. As Moser (2005) points out, a person's relationship with their wheelchair can be deep and transformative, providing not only mobility but also a feeling of agency and identity. The chair, despite being “ugly” and “battered,” carries dignity and significance, signifying Brown's resilience and autonomy. It also portrays cultural attitudes regarding disability aids, which are frequently considered as objects of pity or humour. However, for Brown, the wheelchair represents a source of empowerment. According to Burchardt (2004), societal attitudes and stigmatisations might be diametrically opposed to the lived experiences of people with disabilities, who may regard their aids as essential components of their lives and identities. Thus, the portrayal of "Henry" as a beloved, almost royal chariot highlights wheelchairs' twin roles: as necessary instruments for physical mobility and as powerful emblems of personal dignity and freedom. This viewpoint is consistent with the broader scholarly notion that accessibility involves more than just physical accommodations; it is also about recognising and valuing the human and social aspects of mobility aids in the lives of people with disabilities.

The obstacles that face people with disabilities do not go away even in the presence of helpful technology like wheelchairs. Malini Chib outlines the pervasive problem of accessibility hurdles in India in her memoir. She describes the fundamental difficulties that arise while attempting to use basic utilities, such as restrooms, where the lack of accommodations for individuals with disabilities serves as an example. Chib describes situations in which poor infrastructure caused mishaps that left people hurt and forced her to quit her job. She also emphasises the wider social consequences of inaccessible settings, highlighting the widespread marginalisation that people with disability face in public places. Chib's story highlights the critical need for all-encompassing policies to promote inclusivity and fix infrastructure shortcomings so that everyone in society, regardless of physical ability, can have fair access.

“The basic problem of working in India was the lack of accessibility. Even toilets for people with disabilities were not accessible. As basic a need as that had not been thought out by the authorities. The toilet had one or two steps. Once I fell and was badly hurt. My attendant was with me, but there were no bars, so I fell. I had to leave the job. (104, chib)

Chib's personal experience of being hurt by facilities that are difficult to obtain is consistent with Thomas's research findings (2004). Thomas highlights how places without sufficient accessibility elements put those with disability at greater risk of accidents and injuries. Chib's story of falling and getting harmed because there was no infrastructure in place, such as accessible restrooms with safety bars, demonstrates the real-world effects of these shortcomings. Further, it clarifies larger socio cultural perceptions of disability, mirroring the debate on advocacy and acceptance. Academics like Barnes (2012) and Goodley (2014) stress how critical it is to question societal norms and advance inclusivity for people with disabilities.

The obstacles that people with disabilities must overcome go beyond physical restrictions and include societal attitudes and biases, which are collectively known as ableism. Even while many disabled people tend to navigate inaccessible circumstances with resilience, persistent discriminatory behaviour can have a significant psychological impact. This is especially true for children with disabilities, who have to deal with prejudice in society from an early age in addition to the difficulties posed by their condition.

Freud addresses ideas that not only influence our thought processes but also elucidate and define certain facets of our existence. He presents these ideas as problems through alienation; feeling confined by ingrained ways of being restricts how your perception functions at the moment. In his essay Remembering, Repetition, and Working Through, Freud addresses this topic personally. His main area of study is the use of estrangement to better understand oneself, particularly as it relates to how one's early life experiences can predict unconscious thought and behaviour patterns. According to Freud, there are two ways in which the past continues to influence the present: repetition and remembrance. When a memory becomes unconscious, it is recalled by repeated activity. Malini's emotional dynamics from early childhood continue to play out as she grows older. She was unable to completely comprehend or appreciate the significance of early formative situations. Instead, emotional dynamics are taught and eventually become habitual. To function, these emotional dynamics must stay unacknowledged, which contributes to their strength. The doctor can recognise when disabled people refuse to describe themselves or their activities in specific ways. When habitual behaviour remains unconscious, she is oblivious to the different options available to them. Unconscious types of use will not last indefinitely and will become less effective with time.

The significance of understanding the social and psychological aspects of disability is emphasised. It illustrates the need for greater social acceptance as well as the removal of obstacles that support internalised ableism and stigma. According to Linton (1998), acknowledging disability as a social construct facilitates the transition from individual shortcomings to group accountability for establishing accessible settings. An examination of Chib's path toward self-acceptance signifies the influence of cultural perspectives on personal identity and overall wellbeing. This viewpoint is consistent with the overarching objectives of disability studies, which promote a more just and inclusive society that celebrates variety in all of its manifestations.

In Brown's autobiography, his incisive assessment of the relationship between social stigma and disability strikes a deep chord with the larger conversation about ableism and how it affects people's perceptions of themselves and their interactions with others. According to Brown, feeling like you're being looked down upon by people, especially when you're attracted to someone romantically, can lead to feelings of depression and deep-seated resentment against society as a whole. As to Garland-Thomson, pity frequently functions as a social control mechanism, strengthening power relations that are hierarchical and sustaining stories of helplessness and inferiority. Brown's response to being objectified via sympathy highlights how dehumanising these ideas can be and how much of a toll they take on one's sense of autonomy and self-worth. Brown's unwillingness to use his left foot is an example of the internalised ableism that many disabled people experience. This is the belief that persons with disabilities are inferior or undesirable because of society's norms and conceptions of disability.

Disability academics have investigated how internalised ableism shows up as self-consciousness and a desire to fit in with the expectations of those who are able-bodied, such as Titchkosky (2011). In Brown's instance, it's possible to interpret his refusal to use his left foot as a coping technique meant to lessen his pain from people staring at him or passing judgement. His absurd and uncomfortable feelings illustrate the wider effects of ableist beliefs on people's sense of identity and worth. Disability studies experts, such as Linton (1998), have highlighted the role that cultural representations and societal attitudes play in influencing how handicapped people view their bodies and themselves.

Brown's story serves as a reminder of how subtle ableism can be, how it can erode people's self-worth and sense of agency, and how it forces people to change the way they behave in order to fit in with the norms of the able-bodied.

Erving Goffman's idea of “impression management,” in which people control their behaviour to manage how they are viewed by others, also helps to explain this sensation (Goffman, 1959). In an attempt to avoid what they perceive to be other people’s criticism and scrutiny, Brown avoids utilising their left foot in public. This is an example of impression management. His thoughts of himself as a “performing monkey” point to a profound objectification and a reduction of their identity to their infirmity. It also illustrates how internalised ableism has a psychological consequence. Because of internalised cultural beliefs that devalue disabled bodies and movements, the narrator feels silly and awkward. As per Campbell's (2009) conclusion, internalised ableism transpires when people with disabilities embrace the unfavourable attitudes and generalisations maintained by the community, resulting in emotions of inferiority and humiliation. The reason behind Brown’s hesitation to use his left foot freely is society's propensity to stigmatise disabled bodies as aberrant or deviant. The apprehension stems from the discrimination and stigma that individuals with disabilities frequently encounter, underscoring the necessity of societal transformation to foster a more inclusive atmosphere.

Brown's perspective on his disability saw a substantial shift. He first battled feelings of self-hatred and bitterness because of his physical state. On the other hand, he met people who encouraged him with their abilities despite their impairments when travelling to America for treatment. His perspective on his body and its capabilities changed from one of self-loathing to acceptance and gratitude as a result of this exposure. He probably felt more empowered and confident after accepting his body and realising his potential, which helped him travel through his journey with renewed resilience and hope.

Brown’s growing understanding of other people's suffering draws attention to the idea of empathy in disability studies. Understanding and experiencing other people's emotions entails empathy, which is essential for building a society that is more compassionate and inclusive. He moves beyond his own solitary perspective as he sees the suffering of others and gains a greater emotional connection and comprehension of the many experiences of disability. This change from an inward-looking perspective to an outward-looking one is consistent with perspective-taking, a state of mind in which one looks at the world from the perspective of another. Brown conveys a narrow and solitary perspective of impairment by comparing their prior state to a snail in its shell. This limited viewpoint is challenged by exposure to the "great crowded world" and the varied perspectives of others, leading to a re-evaluation of their own experiences in light of the larger context of human suffering. Brown was surprised at learning that other people’s disabilities and their positive attitude towards disability highlight how social constructions of disability are constructed. According to Oliver (1990), this idea implies that cultural attitudes, norms, and settings influence disability and that it is not just a physical or medical condition. Seeing others with disabilities highlights the relative nature of pain and the ways in which society's environment shapes views of disability. Brown had previously thought his own condition to be especially burdensome.

Conclusion

Disability is an intricate experience with many facets, going beyond simply overcoming ableism and cultural prejudices. It also entails a deep process of self-realization and awareness. This is a long and extremely exhausting path, requiring people to face and refute the opinions of innumerable persons who stigmatise and condemn people with disabilities without taking the time to comprehend their challenges. Gaining resilience in the face of such pervasive bias is a noteworthy accomplishment in and of itself. It was an overwhelming experience for Brown to come to terms with his disabilities and have friends who didn't make fun of him. The experiences of people with disabilities can be significantly shaped by variables like class, caste, race, gender, and place. These variables create wildly disparate lived experiences even among individuals with comparable disabilities by dictating the degree of opportunity, accessibility, and support that are accessible to them.

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