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Trying to Grow Out of Stereotypes: The Representation of Disability, Sexuality and the “Modern” Disability Subjectivity in Firdaus Kanga’s Novel

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Abstract

Firdaus Kanga’s novel, *Trying to Grow*, tells the story of Brit Kotwal, a young Parsi boy with *osteogenesis imperfecta*, negotiating his life in the Bombay of the 1970s. From the beginning, this semi-autobiographical work draws our attention to the common religious and medical perceptions of disability in Indian society. This paper proposes to study how the novel focuses on several aspects of the lived reality of a person with “brittle bones” who does not grow more than four feet tall. The paper also explores how the novel focuses on and confounds the commonly perceived notion of the asexuality of disabled individuals. Brit’s voice is extremely aware and articulates positions of difference within disability and sexuality discourses. He is able to occupy what can be called a truly modern disability subjectivity. But, this paper shall show that Brit presents the reader with this modern, emancipatory rhetoric of disability because of the privileges of his gender and class status in the Indian context. Within the same text, Brit’s disabled female cousin is literally and figuratively mute and meets with a very different fate. The paper shall thus investigate and try to complicate the representation of disability, sexuality and the “modern” disability subjectivity in Kanga’s novel.

Keywords

disability, sexuality, India, adolescence, literature, gender

In an essay titled “Gender, Subjectivity and Sexual Identity: How Young People with Disabilities Conceptualise the Body, Sex and Marriage in Urban India,” Renu Adlakha writes:

Historically in India as elsewhere in the world, there has been a deep rooted cultural antipathy to persons with disabilities. Throughout the ages, the disabled have been looked down upon with disdain, almost as if they were subhuman. They have been portrayed as medical anomalies, helpless victims and a lifelong burden on family and society. Even in religion and mythology, negative characters often had some form of deformity, be it Manthara, the hunchback in *The Ramayana* or Shakuni, the lame of *The Mahabharata* (Ghai 2002). Indeed, the law of karma decreed that being disabled was just retribution for past misdeeds. Pity, segregation, discrimination and stigmatization became normalized in the management of persons with disabilities. Such constructions of the disabled by the non-disabled have the dual effect of not only justifying the marginalization and disempowerment of a whole population group but also leads to the internalization of such negative stereotypes by disabled persons themselves. This acceptance translates into passivity, dependency, isolation, low self-esteem and a complete loss of initiative. (2)

The development of ideas relating to disability in India has, as in the west, passed through several stages. The moral model regarded impairments as punishments for sins in the previous birth, a result of bad *karma*. The charity or welfare model of disability, guiding the work of several disability organizations in India even today, perceives persons with disabilities as dependent on the sympathy, charity and assistance of the “more privileged” non-disabled members of the society. The medical model again locates the problem of disability in individuals and looks at disability as an anomaly or illness which needs to be corrected with the help of medical intervention. In the medical model, disabled people are perceived as bodies that are “abnormal” and hence, not only not “ideal” but also pathological and therefore with a need to be “cured.” The rehabilitation model combines the premises and frameworks of the medical and charity models and sets out that disability is a lack that needs to be addressed by rehabilitation or other professionals. It believes that with sympathy, proper care, therapy and exercises, disabled people can be assisted to lead an “almost normal” life. In all the above

models, thus, disability is perceived as a personal tragedy and disabled persons are seen as requiring assistance and cures. These models essentially reinforce a power relationship between the disabled “dependent” person and the “generous” service provider.

In contrast, the social model points to a difference between impairment and disability. It defines impairment as “lacking part or all of a limb or having a defective limb, organism or mechanism of the body.” On the other hand, disability is “the disadvantage or restriction of activity caused by a contemporary social organization which takes little or no account of people who have physical impairments and thus excludes them from the mainstream of social activities” (TARSHI 12).

Thus, the social model refuses to place the onus of disability on the individual. Instead, it implies that society as a whole is responsible for the creation and perpetuation of disability. This model, theorized and elaborated upon by scholars like Mike Oliver and Tom Shakespeare, puts forth the argument that social structures and not deficits in the body or brain create disability. The notions and structures prevalent in society at large—a society created by and for non-disabled people and shaped by their ideas and prejudices—often denies people with impairments access to resources and subjectivity. This is responsible for creating and perpetuating disability. Disability thus becomes a socially constructed and not a biologically determined category. The social model perceives people with disabilities as agents of change who can initiate dialogues about changing existing social structures by establishing their difference and resisting oppression. Michael Oliver in his 1990 book *The Politics of Disablement* also points to the rationale behind the use of the word disabled. He writes:

. . . the term “disabled people” is used in preference to “people with disabilities.” It is sometimes argued . . . that “people with disabilities” is the preferred term, for it asserts the value of the person first and the disability then becomes merely an appendage. This liberal and humanist view flies in the face of reality as it is experienced by disabled people themselves who argue that far from being an appendage, disability is an essential part of the self. In this view it is nonsensical to talk about the person and the disability separately and consequently disabled people are demanding acceptance as they are, as disabled people. The second disclaimer concerns precisely what is meant by the term “disabled people.” Is mental handicap included, and

blindness and deafness and non-visible disabilities like epilepsy? An adequate social theory of disability as social restriction must reject the categories based upon medical or social scientific constructions and divorced from the direct experience of disabled people. All disabled people experience disability as social restriction, whether those restrictions occur as a consequence of inaccessible built environments, questionable notions of intelligence and social competence, the inability of the general population to use sign language, the lack of reading material in braille or hostile public attitudes to people with non-visible disabilities. (xiv)

Other contemporary terms like “differently abled” have been rejected precisely because they pressure disabled individuals to compensate for their disabilities by possessing abilities that non-disabled people may not possess. Again, such terms do not take cognizance of social restrictions that perpetuate disability; instead they pressurize disabled people to prove that they are worthy members of society despite their impairments. However, there have been critiques of the social model that emerged from within the disabled community itself, especially from feminists. They argued that such a model denied completely the role and materiality of the body, pain and experience.

In India the social model approach has been adopted and used by many—however the cultural contexts and development perspectives have not shifted disability from a welfare perspective to a rights-based perspective. As Addlakha has pointed out and Anita Ghai further stresses:

Disability in the Indian context is often understood as a “lack” or “deficit” as well as a “difference.” Very few people accept the fact that disability is as much a social construct as, say, gender. Since the normative culture in India and the world over carries existential and aesthetic anxieties about differences of any kind, be it caste, class, gender, race or disability, people who are impaired in any way have to live with markers such as “disabled,” “handicapped,” “crippled,” “differently-abled” and “special.” This results in an existence marked by acute marginalization, discrimination and stigmatization, and disability appears more as a personal quest and tragedy to be borne alone. Even those of us who have lived and studied in apparently

inclusive educational institutions, have felt the intolerant attitude of Indian society towards disability. (“The Women’s Movement” n. pag.)

The issue becomes even more complicated when the sexuality and sexual concerns of disabled people are discussed. As Anne Finger puts it, “Sexuality is often the source of our deepest oppression; it is often the source of our deepest pain. It’s easier for us to talk about—and formulate strategies for changing—discrimination in employment, education and housing than to talk about our exclusion from sexuality and reproduction” (qtd. in Mollow and McRuer 2). Works by disability scholars like Rosemarie Garland-Thomson, Anna Mollow and Robert McRuer, and Margrit Shildrick have pointed to the idea that Disability is seen as incongruous and contradictory with sexual desire in the popular imagination. More pleasurable sexual sensations are generally dissociated from disabled bodies and lives. One need only to examine the cultural constructions of the most sexually desirable people in order to understand this: thin models, regular visitors to the gym resulting in sculpted bodies, and so on. Rarely are disabled people regarded as either desiring subjects or objects of desire. As Mollow and McRuer have observed, if sex and disability are ever linked in contemporary cultures, it serves either to marvel or marginalize: the sexuality of disabled people is typically depicted in terms of either tragic deficiency or freakish excess (1). Disabled people are seen as incapable of both experiencing sexual desire and engaging in sexual acts. In India, where sexuality is already a taboo subject, talking about the sexuality and sexual rights of disabled persons becomes even more difficult. According to Pramada Menon, a feminist and queer activist, “The more severe a person’s disability, the more the discomfort in engaging with them as well as in addressing their sexuality-related concerns. . . . [But] just as lesbian, gay, bisexual, transgender and intersex images do not exist anywhere around us and we have to make a concerted effort to create them and bring them into conversations, similar are the issues with disability” (qtd. in TARSHI 16).

Disabled people’s narratives may go a long way toward investing the social and cultural imaginary with these images. These narratives usually point out not only that, as noted by Shakespeare, Gillespie-Sells, and Davies, “things that are taken for granted by non-disabled people may involve conflict and obstacles for disabled people, barriers which are more often social, rather than biological,” but also that “disabled people emphatically are sexual, are desiring, are loving, and loved and desired” (230). Such narratives highlight operational differences (a

reflection of the social model) where a normate is imposed as the lens through which the entire population is viewed and categorized into binaries.

One such narrative is Firdaus Kanga's 1990 novel *Trying to Grow*. Firdaus Kanga was born into a Parsi family in Bombay in 1959. He was born with *osteogenesis imperfecta*, commonly known as "brittle-bone syndrome" which resulted in him having several painful fractures throughout childhood. "I was born with brittle bones, could never walk or go to school with sturdy little boys who might break my tiny body with a friendly slap on the back. I stopped growing at about four feet," wrote Kanga ("South Asia"). *Trying to Grow* is a semi-autobiographical work that traces the story of Brit Kotwal from childhood to early adulthood. It is a story of a boy who is acutely aware of his marginal identity as he negotiates with family, society and his own emergent sexuality.

Like the author, Brit is a boy with *osteogenesis imperfecta* who, his doctor confirmed, would break his bones often, would never walk, would never have teeth and if he survived at all, would grow to be only four feet tall. The only "silver lining" according to the doctor was that "the disease would burn itself out by the time he [was] in his late teens" (Kanga 28).

The novel opens with Brit's father taking him to a holy man called Wagh Baba in the hope that he would be able to cure him. While from the beginning Sera, Brit's mother, perceives him as a normal person with a "problem," Brit's father, Sam is unable to do the same. He looks rueful and sad when he talks about Brit and tries every possible "remedy" for Brit's *osteogenesis imperfecta*. These include not only frequent visits to doctors but also ingestion of pulverized pearls and bone marrow of goat, the rubbing of almond oil on the legs, Parsi prayers, the services of a woman who claimed she could cure Brit with electricity generated from her body, and finally, the blessings of the dubious Wagh Baba. Sam's attitude toward Brit's disability reflects the influence of the medical model on most people in India and their struggle to bring a semblance of "normality" or improved functionality to the lives of disabled people they may be close to and concerned about.

Sam's wish to "cure" pervades Brit's life even as he is sheltered and cocooned by his family. Members of his family are only too willing to "help" Brit go on with his life. They readily push his wheelchair, bring him books down from high shelves, rush him to the hospital whenever he breaks a bone. Even though it is taken for granted that Brit can never go to school or college, his middle-class family ensures he receives the best education they can afford. Brit is offered a world steeped in books, music and art—everything he needs for intellectual stimulation, almost as if

to make up for his lack of physical mobility. But all of this is done for Brit without asking for his opinion. People do what *they* think he needs. As Brit puts it himself:

. . . whenever we had to go somewhere important Sam washed me. It was safer. As for dressing, no one would believe it, but till I was fourteen I came out of my bath naked and laydown on a bath mat, spread over my bed. Then Sera or Dolly would sprinkle me with talc all over, cooing, “Now lift your arms. Turn on your stomach.” Then they’d tuck me into clothes and brush my hair with a baby-blue baby’s hairbrush. I was perfectly capable of doing all this myself. (52)

What Brit seems to stress is the infantilization and resultant loss of subjectivity that disabled people often have to face. This happens mostly within the embrace of family and friends who are entirely well-meaning but unconscious of their discriminatory attitudes.

Moreover, Sam’s attitude toward Brit’s disability reiterates some of the most common notions regarding disabled people in Indian society. Sam tells Brit:

. . . fractures for a few more years. Then I suppose you’ll study but you won’t get a job. . . . I see the young boys who come to the bank with their applications. Some of them have their MAs and they’re *healthy* and *good-looking*; they’re trying for a job that’ll pay them eight hundred rupees a month. And they don’t even get that. Then you’re going to need girls; you’re going to get really frusty when you can’t have them. (44; emphasis added)

Thus while Sam sees Brit as intellectually capable, he feels he is a misfit in a deeply competitive world and that his disability will cause him to live a miserable life without a job or romantic love. The insights of the social model which point out how the world of work is imagined and participated in primarily by the able-bodied populace and isolates the disabled, can help to understand Sam’s concerns. As Brit puts it, “when you can’t do some things people feel you can’t do anything” (52). The ingraining of body-image issues in disabled people also often begins with the family and immediate society. Although Sam doesn’t realize it, Sam’s insistence that “healthy” and “good-looking” boys were not getting jobs implies that Brit is neither healthy nor good-looking. This goes a long way in accentuating Brit’s dislike for his body; it is only after several years of battling excruciating body image issues that, in the last line of the novel Brit can assert “there are some things

we just can't believe. I liked the way I looked" (280). Moreover, although Sam does not perceive Brit as asexual as his aunt Jeroo does, he nevertheless believes that Brit will never have the satisfaction of romantic or sexual relationships with women and even Sera believes the same. She insists that Brit will be her "bachelor boy," although he resists the thought.

An article on body image and disability in India notes that:

In 21st century India, and indeed in most parts of the globalised world, sex (and sexuality) is often linked with youth and physical fitness. This is mainly because society's definition of sexuality is so narrow that some people, such as those with (visible) disabilities, children, and senior citizens, are mistakenly viewed as being incapable of being sexual. Messages from family, friends, the media, and society clearly propound the myth of a "perfect" body. These messages compound the belief that people with disabilities are not attractive or "complete." (qtd. in TARSHI 48)

A similar attitude permeates the minds of Brit's friends and the society he lives in. When Brit's cousin, Tina, who is hearing-impaired, falls in love with a boy, Brit and his friend Ruby contemplate the tactics they should use to convince Tina's mother to allow her to marry the boy she loves. Ruby says, "if she loses Rohit, she'll probably never find anyone else. You know how it is for handicapped people" (Kanga 104). Rosemarie Garland-Thomson uses the term "normate" to describe the majoritarian non-disabled population and points out "the normate's frequent assumption that a disability cancels out other qualities, reducing the complex person to a single attribute" (12). Ruby is quick to apologize but she occupies the position of Garland-Thomson's "normate." She reduces "handicapped people" to their impairments and fails to perceive the other facets of their personality that make them who they are. Her chance comment also reveals how deeply certain ableist notions concerning romantic love and what constitutes the desirable are ingrained in society. Moreover, certain norms and codes that define modern dating and the idea of being in love exclude certain categories of people. Consider, for example, Brit's own thoughts regarding Tina:

But I knew I didn't really want Tina. Not the way you want a girl when you're fifteen. Because then you've got to have everything just right—soft music and poetry and whispered somethings. And they

wouldn't have worked their magic on her ears. I didn't want a deaf girlfriend even though she was a gorgeous girl and a fabulous friend.
(96)

Even as a young boy fighting and resisting badges of asexuality and the impossibility of romantic love attributed to him by society, Brit falls into the same trap when thinking of a possible romantic partner. There is only one "normal" model available for expressing and exploring love that he can access and a girl like Tina does not fit into it on account of her disability.

One particular scene in the novel details the several facets of people's anxiety—their varied attitudes to disabled people in general and in particular, the anxiety regarding disabled people as desiring subjects or objects of desire. The scene unfolds when Brit and his girlfriend, Amy, kiss on the beach:

They were discussing us, as if we were the clouds or the sea or the rocks. 'What does she see in him?'

'Pity?'

'God will reward her.'

'Maybe he is rich.'

'I wouldn't take him if he were rich as the Birlas.'

...

'Such people,' said someone, 'are often God's favourites: that is why he makes them different.'

'You are wrong, wrong. He is punished.'

'You mustn't laugh,' someone said to the urchins. 'Or the next time you are born, you will be as unfortunate as him.'

'At least they should not come out, such people. Then loving in public—it's too much.'

...

Then the man in the dhoti said, 'Maybe something is wrong with her inside, we can't see it. That's why she has to marry this cripple. She can't find anyone else.' (253)

In most religions in India, disability is conceived of as a punishment for some sin committed in the previous life. However, at the same time charity toward disabled people is preached by these religions on the ground that one shall be rewarded in one's next birth for being charitable toward the "less fortunate." The passage above

shows how these religious ideas play out in the day-to-day lives of disabled people, particularly if their impairments are visible. Not only do they become objects of the stare and often unsolicited pity, but the motives and health of their partners are also questioned when they happen to be non-disabled like Amy. The popular imaginary cannot conceive of a happy sexual and romantic life between a non-disabled person and a disabled person without there being a catch. This deep anxiety about the (visibly) impaired body and about considering the disabled person as a sexual subject is summed up in Margrit Shildrick's words. According to Shildrick, "the issue is not so much that the body of the other is horrifying in and of itself, but rather that it might infiltrate the space of my own body and effect the very transformations that would unsettle my claim to autonomous selfhood" (22). She further stresses:

. . . it becomes clear that it is the encounter with an anomalously embodied other positioned within the arena of sexuality that is the most threatening and disruptive. The opening up of the subject to a certain degree of uncertainty and risk that is always inherent in the intercorporeality of the sexual relation is significantly intensified by the operation of corporeal difference. The psychic underpinnings of the disavowal of the very possibility that the disabled person should be sexually active, sexually identified, and sexually engaging become all too clear. (94)

As Kanga's nuanced narrative has already shown, even disabled people sometimes fall into the trap of being biased against other forms of disability and would rather have non-disabled partners. This happens because we have been brought up in a culture where "desirable" almost always means "able-bodied." This view is often internalized by people with disabilities and may lead to issues such as low self-esteem and self-confidence, negative body image, and feelings of incompleteness and unworthiness of companionship, sex, love and marriage. In this context, it is also important to note how in the narrative, Brit takes pride in the upper half of his body, often drawing the reader's attention to his broad shoulders and chest and his charming smile while constantly using negative epithets for the lower part of his body. This and Brit's continual accentuation of his intellectual superiority could be read as a resistance and unwillingness to identifying with his disabled body, at least in the first half of the narrative. Shildrick cogently explains this when she talks about "underlying attitudes, values, and subconscious prejudices

and misconceptions that figure an enduring, albeit often unspoken, intolerance. That intolerance can be found in non-disabled and disabled people alike, not because the latter have turned against a self-identity that aligns them with an oppressed minority, but because both categories share a psycho-social imaginary that disavows morphological imperfection” (5).

Here, it is also important to pause and consider the words of Adlakha:

Sexuality is an area of distress, exclusion and self-doubt for persons with disabilities. Sexuality at core is about acceptance of self and acceptance by others. Indeed, disability and sexuality not only evoke strong emotional reactions but are also mired in cultural myths and misconceptions. . . . Rarely is a person with an impairment conferred a positive or heroic role. Disabled persons are expected to reject their bodies as asexual. . . . Disabled people are the perennial ugly brothers and sisters. As a corollary to this, their needs for human contact, affection and intimacy are often ignored. . . . The situation is more complicated in societies like India where sex is a highly tabooed subject. (4)

Battling against such notions held by family, friends and society that threaten to marginalize his sexual subjectivity, Brit candidly talks about his trysts with desire, what he calls his “single-minded pursuit of lust” (Kanga 95). The growth and transformation of Brit’s comprehension of his sexuality is also painstakingly mapped in the novel and here again, one notes the devastating effects chance comments have. Brit talks of his adolescence when he and his neighbor and friend Ruby (who is the same age) used to flirt outrageously with each other. They even on one occasion tried to “French kiss” each other but Brit had stopped at the last moment. The reason for this reveals Brit’s acute sense of self: “The truth was—” records Brit, “and it was awful—I thought she didn’t deserve a kiss from me” (98).

One day, a few months after this incident Ruby says:

‘You know, Brit, you’re awfully ugly. I mean, I could never had done [*sic*] all those things I did with you if I were some other girl. It’s just that I’ve known you all my life, and I could forget the way you looked.’ She laughed. Then she saw the colour of my face. ‘Hey!’ she said. ‘Did that hurt? I don’t mean your face is horrid or anything.

Actually it's quite sweet when you smile. I was talking about the whole thing—you know, your body, and your legs and— (99)

In every facet of life and particularly in the matter of romance and sexual relationships, disabled people are thus taught to settle. If a disabled person finds a partner, they should consider themselves lucky and try to hold on to the relationship despite anything. This results in the stripping of self-worth as Brit experiences in the passage above. As Adlakha further notes:

adolescents and young people with disabilities must cope with all physical changes, emotional anxieties and social conflicts of able-bodied adolescents, in addition to those produced by their disabilities. Absence of role models with disabilities and negative social perceptions of persons with disabilities are the major stumbling blocks for youth with disabilities as they struggle to cope with both the pain and excitement of growing up in general, and the personal challenges posed by disability in particular. (6)

Several times, disabled people find themselves acquiescing even to abusive relationships because they have always been made to feel that they cannot do better.

In contrast to Ruby's encounters with Brit, which make him extremely conscious and ashamed of his body, Cyrus offers Brit a refreshing change from the very beginning of their friendship. While he has to put on "The Brave Act" in front of people like Ruby, the entry of Cyrus marks the first chapter of the section of his life called "Trying to Grow."¹ He lets Brit wheel himself unless he asks for help, tells him that it is okay for grown men to cry and asks him "why the fuck should you bother?" about the difference in their bodies. Unlike other people, he actually asks Brit what he wants. Cyrus is also the first person who, to Brit's delight, can stimulate him intellectually and outsmart him when it comes to words. They soon become partners in what Cyrus calls "the serious business of living." With Cyrus, he dares to experience many things for the first time—like going very close to the sea and letting a huge wave break over him, and going out to the Cricket Club for a

¹ The book is divided into two sections called "The Brave Act" and "Trying to Grow," respectively.

swim. Slowly but surely Brit falls in love with Cyrus and finds to his surprise that thoughts of Cyrus can arouse him like no fantasies involving women ever could. This results in him having what he describes as “the first atomic orgasm in history” (Kanga 142). “Trying to Grow” not only marks Brit’s battle with sexual fluidity but also mental growth when he allows himself to question whether he could be happy with a partner who did not fit into the normative idea of beautiful. Earlier he was quite certain he couldn’t. Brit says:

I wanted Cyrus: his mocking mouth, his quiet eyes, his thigh and hair and cock. Now, if he were someone else, someone who thought life was the food you ate and the movies you saw and not the winds that blew inside your head; or someone who got out of the taxi without thanking the driver; or someone who blew his nose into his hand instead of his hanky, then I wouldn’t have given a damn if he looked like Shashi Kapoor or Sean Connery or whoever; not if he had a cock that would’ve made him a blue movie star. (155)

While at one point he had been certain that he couldn’t desire Tina even though she was a gorgeous girl simply because she was hearing-impaired, here he allows himself to question why bodily beauty mattered so much. This uncertainty marks his growth as an individual—a learning to question the socio-cultural notions that govern who we desire and how. Further, the relationship with Cyrus and the exploration of homosexual love becomes another way by which the novel challenges established notions of masculinity. Earlier, it had questioned socially acceptable notions of masculinity through the heavily satirized figure of Wagh Baba. Moreover, in a country where homosexuality is still a crime and is often couched in the language of disease with Babas and Wagh Baba claiming the ability to “cure” people of it, a love affair between a boy with visible impairments and an able-bodied boy becomes all the more radical. It draws attention to and resists the hydra-headed disabling politics of Indian society. What Robert McRuer observes about the subversive potential of the conjunction of queerness and disability is applicable to this context: “in contrast to an [heteronormative, masculinist] able-bodied culture that holds out the promise of a substantive (but paradoxically always elusive) ideal, crip theory would resist delimiting the kinds of bodies and abilities that are acceptable or that will bring about change. Ideally, crip theory might function—like the term ‘queer’ itself—‘oppositionally and relationally but not

necessarily substantively, not as a positivity but as a positionality, not as a thing, but as a resistance to the norm' (Halperin 66)" (31).

Another aspect of the novel that deserves attention is its form and language. Even at its most poignant, the narrative is characterized by Brit's idiosyncratic tongue-in-cheek humor. Through humor, he satirizes hegemonic masculinity and what McRuer calls "compulsory" able-bodiedness, revealing the ludicrousness of religious, medical and social notions regarding people with impairments in India which renders life difficult for people like him. His trips to see Wagh Baba, Sam's desperate attempts to "cure" him, and Jeroo's opinions about his future are all cases in point. Humor becomes a weapon with which Brit not only resists being framed within the ableist gaze of society but also provides a cutting critique of it.² As Avner Ziv has observed, "Humor exposes ugly human phenomena (those that render the world almost unbearable) to mockery, in the hope of thereby eliminating them. Man makes a mockery of man. In his efforts at changing and improving mankind, man turns matters he thinks grave into absurdities. He does this sometimes with delicate casualness, sometimes with disrespect, and sometimes with ferocity. The laughter that derives from the perception of absurdity reforms the world" (357). For conscientious readers, the text offers opportunities of questioning our own notions regarding disability even while making us laugh. Are we guilty of (unconsciously) perpetrating and perpetuating what we are laughing at?

Brit's relationships with both Cyrus and Amy do not work out as he had hoped they would. When Brit analyzes the reasons for the failure of each relationship, he notes that insecurities regarding his body image had formed the basis for the collapse of both. Although he loved both Cyrus and Amy dearly, he realizes that he desired them because he needed validation as a desiring subject and as a worthy object of desire from people who were both intelligent and conventionally beautiful. In a touching scene where he tries to kiss Cyrus but fails, Cyrus asks why Brit had wanted him. Brit answers:

'. . . if I could have you, which meant you wanted me, that meant my body was as good as yours.'

. . .

² That humor can be effectively used as a tool to critique notions of disability in Indian society is also increasingly being revealed through the work of disabled stand-up comedians like Nidhi Goyal and Sundeep Rao.

‘ . . . I was opting out of the race—’
 ‘For girls?’
 ‘Yes.’ . . .
 ‘But you were entering another race, weren’t you?’
 ‘You were out of reach. So where was the race?’
 ‘ . . . But I wasn’t out of reach, was I?’
 ‘As soon as you weren’t I got out of your arms. Don’t look like that, I’m not crazy. It’s just that wanting you was a faking, wasn’t it?’
 . . .
 ‘ . . . I couldn’t do things with you because it would have been like a poor girl marrying a millionaire for his money. You’d say that was sick, wouldn’t you?’ (Kanga 171-72; emphasis added; 4th ellipsis in original).

What Brit is trying to say here can be summed up in the words of Shakespeare, Gillespie-Sells, and Davies, who note that, “for some disabled people, the ultimate goal is to be in a relationship with a non-disabled person, because this represents total acceptance, total validation as a human being” (108). Brit comprehends this even as a young boy and refuses to succumb.

Shakespeare, Gillespie-Sells, and Davies further note, “when a non-disabled partner feels they are ‘needed’ by the disabled partner, this may sometimes be to bolster their own self-esteem, rather than reflecting an actual reality. Disabled people’s supposed ‘vulnerability’ and ‘dependency’ may be less threatening than the independence of non-disabled partners” (110). This is what is played out in the text in Brit’s relationship with Amy. They break off the relationship when they both realize that they had been using each other to overcome their insecurities:

‘I wanted . . . I loved you because I needed you. Not to push-push, but to feel—’
 ‘To feel you didn’t have osteo.’
 ‘Yes, yes, that was very clever.’
 She smiled and I saw that infernal tooth again. ‘I was happy because I knew you wouldn’t have too many opportunities with other girls. . . .’ (Kanga 278; 1st ellipsis in original).

“Trying to Grow” thus marks not only the growth of Brit Kotwal as an individual but also that of Amy and Cyrus. They grow as individuals and as characters in a

way they never could have if not for their interactions with Brit. Cyrus and Amy's attitude toward Brit's disability—one of true inclusiveness—is what Kanga seems to espouse in the novel. While it is true that even Cyrus and Amy inevitably reiterate certain internalized prejudices about persons with disabilities, at some point or other, they recognize and question them. In doing so, they grow as individuals, friends and lovers and learn as much about themselves as about Brit.

By the end of the novel, Brit is free from the contours of dependence that have defined his life. Both his parents pass away and his sister, Dolly, resides abroad with her husband. He has also broken off his romantic relationships with both Amy and Cyrus. He is, as he had once feared, all alone, with no one to cocoon him physically or emotionally. But the Brit at the end of the novel is a happy Brit. He has managed to bag a publishing contract and decides to continue to live in his Colaba apartment alone. For this purpose, he has also employed workers to have a kitchen that can be accessed at wheelchair level. This Brit has embraced what Shilpaa Anand calls a “modern disability subjectivity.” He has overcome his insecurities and discovered that he can survive without being dependent on anyone. However, what often goes unacknowledged is the fact that Brit is allowed such a happy ending because he was born with certain privileges. As Anand notes:

Brit Kotwal embraces the contours of disability subjectivity and all its modern emancipatory rhetoric because it is there for him to embrace. Brit's condition is genetic, his economic situation is secure and he is cultured and socially groomed. Brit's middle-class upbringing and liberal-humanist schooling enables him to grow into disability as personhood, another kind of modernising. His growing into disability modernity is the same kind of transformation that is the experience of the West, where modernity is a temporal phenomenon. . . . Literary narratives have offered an important space for the articulation of difference and it is this space that Kanga occupies in presenting us with the experience of Brit Kotwal. (254)

The privilege of gender bears out in Brit's narrative through one gaping lacuna in the text—Tina's story. Tina is initially presented to us as a character full of vitality. Unlike Brit, her disability does not seem to give her an inferiority complex. She attends parties, goes to the movies where Brit or Dolly take turns to relay the dialogue to her in sign language and takes pleasure in warding off inquisitive street urchins by roaring in her deep, guttural voice. She also cracks bawdy jokes when

with Brit and Dolly and does not hesitate to fall in love with the handsome Rohit. However, this character is sold into prostitution by the man she loves. Her family does go looking for her but gives up hope only too easily when they realize what has happened to her. They easily accept the fact that Tina will never be found and don't even inform the police out of concern that this would adversely affect their reputation. It is convenient for them to believe that the police wouldn't be able to find her anyway. Sera says, "D' you know how big India is? Endless forests and as many villages as—as the stars up there. God! We've lost her" (Kanga 110). Even worse is Tina's mother's reaction to the incident:

'The secret,' said Jeroo, smoothing her new red-and-yellow-printed sari as she sat down, 'lies in forgetting. Forgetting that I once had a daughter I loved, that she is now a prostitute who is raped day and night by fat men smelling of sweat, that she will die soon of a disease she catches from them and that I will not see my child again—in this life.' (110)

Here, very interestingly, it is both gender as well as type and degree of disability that becomes significant—the fact that sometimes they work in tandem and at others they contradict one another. Brit and Tina therefore have different life trajectories based on social constructions of disability and gender. While the visibility of Brit's impairments comes in the way of his attaining romantic love in his early years, the invisibility of Tina's impairment ensures that she faces no such trouble. However, the ramifications of gender notions in Indian society further problematize the already complex experience of disability. Thus, while a career and an altered kitchen are possibilities for Brit despite the much more visible and severe nature of his impairments, Tina can only have a future with "no money" and "no love." Tina is indeed forgotten in the text. She is written out of it just as her genteel, "cultured" and "modern" Parsi family conveniently accepts her "fate" and makes no attempt to contest it. As Ghai puts it:

This approach reflects the general attitude toward disabled women in India in general. In Hindi the phrase, "Women with disabilities" (*Ek to ladki oopar se aapahij*) means, "one a girl, and that too disabled." This intermingling of disablement and gender marks the reality of a woman with disability in India. Consequently, both congenital and acquired disabilities for the girl child are seen as additional rather than initial

liabilities. Opportunities for improving the quality of life of a disabled girl are virtually non-existent. (“Disabled Women” 53)

Shakespeare, Gillespie-Sells, and Davies further elucidate this by pointing out that “sexist stereotypes of women reinforce prejudices about disability: Oliver argues ‘there are strong links between the assumed passivity of disabled people and the assumed passivity of women’ (1990: 72)” (59). In both cases, dependency, vulnerability, and frailty are the dominant associations in patriarchal culture. Therefore disabled women are represented, as Morris points out, in particularly negative and passive ways (97). “Unlike the non-disabled woman, who has societally sanctioned roles as mother and wife (restrictive though they may be), the disabled woman has no adult roles. Neither mother nor wife nor worker shall she be” (Blackwell-Stratten et al. 307).

Tina’s bawdy humor, her relationship and finally, her escape can be read as modes of resistance to these socially sanctioned roles of docility and passivity. The end of her narrative, then, makes the reader feel almost as if Tina was punished for her refusal to succumb to either this socially sanctioned passive identity or to an inferiority complex on account of her impairments. Her vitality and open exploration of sexuality despite being a woman and despite being disabled prove too much of an incongruity in a novel primarily about a male protagonist’s battles with his marginalized experience of being disabled. While a disabled man can be allowed full exploration of his sexual subjectivity without any imminent threat other than that of rejection and heartbreak, if a disabled woman does the same and manages to find love with a non-disabled partner without much trouble or anguish, her story can only prove to be cautionary. The “modern” disability subjectivity that Brit is allowed on account of his class and gender is thus unavailable to many in India who are not likewise privileged.

It is true that Brit is oppressed by several layers of social dynamics. He is a survivor of the demands of hegemonic masculinity with its insistence on physical strength, mobility and prowess as well as the stigmatization of people with disabilities in India. However, the privilege of gender and class allows him to “subvert [his] devalued disabled status by reformulating and redefining hegemonic masculine characteristics on their own terms by describing independence . . . as being able to take charge and control of one’s life” (Gerschick and Miller, qtd. in Ghosh 29). However, when disabled women attempt to subvert the “passive, dependent, weak” identity assigned to them by gender and disability, it has significant adverse consequences, particularly in the social context of India. Tina’s

exploration of desire, her assertion of herself as a desiring subject and her attempt to “take charge and control of [her] life” is seemingly bound to fail because the “dangerous discourses” she thereby intensifies is too much for Indian society to allow.³ Not only does she challenge society’s prescription for an “ideal” disabled woman: passivity and asexuality, but also threatens to unravel the fundamental power relationships that characterize her social existence in a patriarchal setup. For disabled people in a socio-cultural context like India, the exploration of sexuality, desire and assertion of an alternative “modern” disability subjectivity is dependent yet on caveats such as those posed by gender, caste, class and economic wellbeing. What texts like Kanga’s achieve is the tracing and questioning of legitimated assumptions and processes of the construction of power relationships that seek to govern and oppress the lives of the physically and mentally non-normative. They thereby initiate and suggest possible dialogues and avenues for change.

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³ The sub-plot of Tina in the novel, in fact, makes it all the more important to revisit it in the wake of the movie *Margarita with a Straw* (2014). This movie, based on Malini Chib’s autobiography *One Little Finger* (2010) uses humor just like Kanga’s novel does to critique notions of disability, femininity and queerness in Indian society. However, the end that the female protagonist with cerebral palsy meets in the movie is quite different from that of Tina in Kanga’s novel. These texts become particularly significant when examined as part of an emergent discourse of disability rights in India.

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