

**An Anti-colonial Examination of how Disability is Conceptualized, Responded to and
Experienced by Prisoners within the Federal Prison System of Canada**

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Abstract

This research examines how disability is conceptualized, responded to and experienced by prisoners within the federal prison system of Canada¹, by attending to the constructs of disability and criminality as they relate to racial and colonial hierarchies. Drawing on anti-colonial theory and the concept of subalternity, this research aims to resist essentializing identity in a way that would limit ‘disability’ or ‘race’ to a particular spatial/temporal context. The constructs of race and disability will be attended to simultaneously, while engaging with how these identity categories have been co-constructed in relation to ‘criminality’, for the furthering of colonialism. Accordingly, this research contextualizes the mass-incarceration of racialized/disabled individuals within a broader, historic, colonial project of confinement and removal. I draw on 4 in-depth semi-structured interviews conducted for this study, with individuals who are living with disabilities and have been incarcerated in Canadian federal prisons. Throughout this thesis, I couple my analysis of the ‘problem’ in question with attention to ‘how’ the problem is often discussed in dominant critical research and discourse, particularly attending to Eurocentric articulations of race, disability and incarceration.

¹ Refer to ‘A Note on Language’ on page III for an explanation of why ‘Canada’ is not capitalized.

A Note on Language:

The rules of english grammar ascertain that proper nouns such as the names of cities and countries should be capitalized regardless of their location in a sentence. In this paper, I have chosen to not capitalize “canada” because I do not want to, in any capacity, lend legitimacy to it as a settler-colonial ‘country’. This approach is primarily rooted in how I understand space, land, nations and a personal rejection of colonial designations of land, maps and borders. Shohat and Stam (2014) describe how europe has made itself the “arbiter of spatial evaluation” examining the global ‘South’, the ‘East’, the “Middle” all from its positionality as central. Language and maps have also been organized in accordance to european centrality and the peripherality of the “Other” (Shohat & Stam, 2014). For a political ends, I have extended this logic to not capitalize other terms such as global north, west, europe, eurocentric, english which is a personal philosophy of rejecting english grammar rules and european centrality.

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Chapter 1: Introduction

Attention to the over-representation of marginalized groups in a variety of different institutions has been increasingly prevalent in critical discourse and scholarship (García-Largo, Martí-Agustí, Martín-Fumadó & Gómez-Durán, 2020; Maynard, 2017; Tetrault, Bucerius & Haggerty, 2020; Townsend, Henry, Holt, 2020; Walker, 2020; Weatherburn & Holmes, 2010; Owusu-Bempah, & Wortley, 2014). Critical theory, more broadly, seeks to reveal power structures and systems of domination, looking to the notion of over-representation as an entry point for the ‘social problem’ being explored. Included in this, is scholarship that attends to the over-representation of disability or the over-representation of racialized, namely Black and Indigenous people in prisons (Balfour, 2013; Sudbury, 2008; Tetrault et al., 2020; Warder, 2013; Weatherburn & Holmes, 2010; Walker, 2020). Nonetheless, there is a shortage of research that attends to ‘race’ and ‘disability’ simultaneously while also engaging with the colonial construction of difference ie, racial Otherness, disability (Ware, Ruzsa & Dias, 2014). Minimal recognition is given to how disabled/racialized individuals are ‘over-represented’ in the prison *and* how these identity categories have been co-constructed in relation to ‘criminality’, revealing the function of prisons as an institution complicit with a colonial project designed to incarcerate racialized/disabled people. An engagement with the histories of colonialism and how it operates contemporarily, in constructing and hierarchizing difference as a precursor to incarceration is often overlooked in eurocentric disability studies. Jaffee and John (2018) point out that while critical disability studies draws on the social model of disability, more broadly emphasizing social and economic structures as ‘disabling’, there is an omission of settler-colonialism as the ‘foundational structure in nation- states where the discipline of disability studies is most prominent’ (p. 1408). eurocentric disability scholarship may ‘address’ settler-colonialism but often privileges ‘canonical’ literature in the discipline, attending to settler-colonialism only as an added lens (Jaffee & John, 2018, p. 1407). Gretch

(2015) adds that eurocentric critical disability studies uses the term ‘colonial’ metaphorically in a way that is “disassociated from its historical lineages and the discursive and material power that made it one of the most important, destructive and lasting forces in human history” (p.7). Joseph (2015a) suggests that there is an “enduring Eurocentrism” in critical mental health studies reflected in the emphasis on material and structural oppression and the absence of engagement with historical and political systems whereby oppression (race or ability based) emerged from. Joseph (2015a) adds that this eurocentrism is also illustrated in the reliance on contemporary categorizations of difference that do not interrogate how difference has historically been constructed, defined or measured. The erasure of the histories that produce hierarchies of superiority/inferiority, dominance/subordination, humanization/dehumanization, the standard/the Other only serves to erase the histories and lived experiences of racialized/disabled people.

The erasure of the histories and lived experiences of racialized/disabled people in eurocentric disability studies is not challenged merely by the ‘inclusion’ of a race-based analysis. An essentialist recognition of “race”, as an identity category to be examined or “added” into the analysis of disability overlooks the colonial construction of difference that set the stage for hierarchizing said difference on a racial order. This produces the false presumption that the very category of “difference” is neutral and exists outside of power relations (Fellows & Rzack, 1998). Centring the coloniality of power in determining, defining and hierarchizing difference as an operation of orientalism, positions the construction of difference as central to the cementation of a colonial order, particularly for the western, white and dominant categories to assert itself as unlike the Other, who is racially, biologically, genetically, behaviourally, religiously, culturally, etc. “different”. Mohanty (1989) addresses this failure to engage with “race” and history in education as tied to liberal notions of plurality rooted in a purposeful avoidance of contextualizing the historical process of difference formation:

The challenge of race resides in reconceptualization of our categories of analysis so that differences can be historically specified and understood as larger political processes and systems. The central issue, not one of merely acknowledging difference; rather, the more difficult question concerns the kind of difference that is acknowledged and engaged. Difference seen as benign variation (diversity) for instance, rather than as conflict, struggle, or the threat of disruption, bypasses power as well as history to suggest a harmonious empty pluralism (p. 181).

The dangers of the emphasis on difference or beginning with categories of difference as universal is highlighted by Joseph (2015b) who suggests that it only “(re)deploys historically established systems and technologies to securely establish power relations and hierarchies” (p.18).

This research examines how disability is conceptualized, responded to and experienced by prisoners within the federal prison system of Canada, by attending to the constructs of disability and criminality as they relate to racial and colonial hierarchies. Drawing on anti-colonial theory and the concept of subalternity, this research aims to resist essentializing identity in a way that would limit ‘disability’ or ‘race’ to a particular spatial/temporal context. The constructs of race and disability will be attended to simultaneously, while engaging with how these identity categories have been co-constructed in relation to ‘criminality’. Accordingly, this research contextualizes the mass-incarceration of racialized/disabled individuals within a broader, historic, colonial project of confinement and removal. Moreover, attending to disability/race together, is not sufficient if beginning from an orientation that overlooks the nature of the criminal justice system, prisons, law, law-enforcement as an expression of coloniality. Recognition of the world order as a colonial order, provides an entry point whereby the criminal justice system itself is not left assumed and unquestioned, rather, it is a system that rations, permits and ‘legalizes’ colonial violence via various projects such as

prisons. The function of prisons, the operation of incarceration, thus, are also conceptualized as expressions of coloniality, for the furthering of colonial nation-building and expansion.

Throughout this thesis, I couple my analysis of the ‘problem’ in question with attention to ‘how’ the problem is attended to in dominant critical research and discourse. An anchoring text I draw on throughout this thesis is *Pedagogy of the Oppressed* by Paulo Freire (1972), mainly his articulation of praxis. Freire (1972), describes praxis as a process of both “reflection” and “action” allowing for the “transformation” of the world order ie. praxis (p. 125). Examining the eurocentrism in how the over-representation of race or disability in prisons is understood and researched, is a subtheme I explore. eurocentrism presents epistemological limits that prevent “reflection” of the nature of the problem being explored (as colonial), ultimately limiting praxis. Rabaka (2014) in *Concepts of Cabralism: Amilcar Cabral and Africana Critical Theory* thoroughly unpacks the paradox of western critical theories that examine ‘social problems’ and ‘power structures’, while simultaneously reproducing them. Rabaka (2014) explain that western critical scholarship is not critical until ‘it is critically conscious of white supremacy’ (p. 264). While I deliberated if attending to eurocentrism and discourse is ‘off-topic’ for this thesis, I concluded that how the ‘social problem’ I am exploring is taken up in dominant discourse is part of the problem. This approach also allows me to also situate my own processes of reflection in the equation of praxis.

Chapter Two: Theoretical Framework

Ontological orientations and theoretical frameworks within that are central in guiding the process of “reflection” identified by Freire (1972), subsequently directing “action” and ultimately determining entry points for “praxis”. I draw on anti-colonial theory to prompt reflection that engages with the histories of colonialism as a vital process in understanding the colonial nature of the present world order. In this section, I engage with Fanon’s (1967) articulation of the zone of being and zone of non-being, Said’s (1993) contributions on Orientalism, Spivak’s (1988) conceptualization of subalternity and Joseph’s (2015) theorization of confluence to outline how anti-colonial theory will be integrated in my analysis on disability and race.

Anti-colonial theory emphasizes coloniality as a historic and ongoing process and a set of social relations of power, at the centre of the operation of constructing difference for the function of colonial hegemony (Simmons & Dei, 2012). Correspondingly, dehistoricized reflection on ableism and the “treatment” of “difference” yields subsequently action -or rather, inaction- that does not challenge the *historical* processes, projects and systems that create and perpetuate oppression. By drawing on anti-colonial theory, I am better equipped to both acknowledge the material site of prison (as an institution), while also examining its function in removing, and confining the “Other” as an expression of coloniality. This approach creates space for analysis of the reciprocal relationship between the construction of the Other (the logic of Orientalism) and the removal of the Other. In order for the Other to be confined and removed from the “public”, the other needs to be constructed as inferior in juxtaposition to a non-Other (Said, 1993). Moreover, this entry point challenges eurocentric claims of the universality of “difference” and positions the construction and measurement of difference as systemized along racial hierarchies through colonial violence. Centring coloniality in analysis challenges the notion of difference as assumed, neutral or existing outside of power structures and locates it

as created by and for colonial power structures (Simmons & Dei, 2012). This analysis locates ableism as systemized along a colonial/racial hierarchy rather than levelled to racism- ultimately challenging the notion that the two are parallel and intersecting.

During this process of reflection, I deliberated whether I am merely cavilling at semantics, asking: If racialized/disabled people experience oppression differently than white disabled people, why does it matter if this is understood through a lens of “intersectionality” or not? This question in itself facilitated a better understanding of the limitations I felt but hadn’t fully put to words- it is because coloniality is not solely about individual people. Drawing on Fanon’s (1967) analysis in *Black Skin, White Masks* facilitated a more cemented and clear analysis. Fanon (1967) discusses the colonial order of the world as divided into the zone of being and zone of non-being (p.10). The zone of being includes those whose humanity is recognized within this colonial order, namely, white people. The zone of non-being is a space where colonized people are not recognized as human (Grosfoguel et al, 2015). The non-recognition of humanity, of ‘being’, results in subsequent non-recognition of the histories and subjectivities of racialized/colonized peoples (Grosfoguel et al, 2015). Drawing on this paradigm shifts the analysis from oppression of racialized and disabled people as merely different from white disabled people due to the intersection of race, but rather positions oppression as emerging from the dehumanization of racialized/colonized people. While oppression can be experienced in the zone of being, this oppression is “non-racial” and thus “shares in the privileges of imperial codes of law and rights, the emancipation discourses of the enlightenment and their peaceful processes of negotiation and resolution of conflicts” (Grosfoguel et al, 2015, p. 639). Furthermore, understanding the historical lineages of ableism/sanism and racism outlines the limitations in analysing both as separate and parallel. Joseph (2015a) provides an example drawing on sanism and racism:

Racial oppression is not sustained by madness; rather, madness and savagery were/are co-constituted through a confluence of ideas that rationalized forms of violence on bodies of difference deemed worthy of harm or exclusion. They serve together to shore up notions of civility and incivility; they do not now nor have they ever existed without one another (p. 1037)

An anti-colonial framework distinguishes the world order as colonial and thus expands analysis of oppression beyond essentialized frameworks that level all oppression as existing in a “zone of being”. Within a colonial order, oppression is hierarchized and operates differently based on zones of being or non/being where humanity is either recognized or denied.

Resistance to the eurocentric, dominant epistemologies requires looking at colonialism as *central* rather than *peripheral* to analysis (Simmons & Dei, 2012). This requires challenging discussion of “asymmetrical power relations” that conceptualize oppression in singularities and overlook the *coloniality of power* (Quijano, 2000). Centring the coloniality of power resists neutral and dehistoricized ways of theorizing power, power imbalances or asymmetries as existing outside a racial hierarchy and positions power as created by and for the preservation of coloniality.

The World Order as a Racial Order

Drawing on anti-colonial scholars, I attend to “race” as central to the establishment of a colonial order and the conferring of power. Early pioneering anti-colonial thinkers, such as Aime Cesaire in his work *Discourse on Colonialism*, elucidate coloniality as “relations of domination and submission which turn the colonizing man into a class-room monitor, an army sergeant, a prison guard, a slave driver and the Indigenous man into an instrument of production”. (Cesaire & Kelly, 2000, p.6) Through referencing the ‘slave driver’ in association with the army sergeant, prison guard etc., Cesaire is highlighting the synonymousness of

dominance and whiteness in juxtaposition to the subordination of the ‘Indigenous man’ (Cesaire & Kelly, 2000). Furthermore, in his work *The Wretched of the Earth*, Frantz Fanon (1962) explains that “looking at the immediacies of the colonial context, it is clear that what divides the world is first and foremost what species, what race one belongs to” (p.5). In accordance with anti-colonial theoretical frameworks, the ‘colonial’ is the locus by which oppression is tethered to, thus the “colonial problem” is a racial one. In his seminal work *Orientalism*, Edward Said (1978) explores the concept of alterity, more commonly referenced as the “Other”, by examining the western, anglo-american construction of the orient/occident binary. Said (1978) draws the link between the construction of the Other as a method of establishing and cementing *power* through defining the Occident in juxtaposition to the Orient who is constructed as savage, immoral, backwards, deviant etc. In *Reflections on Exile and Other Essays*, Said (2000) also explains “the status of colonized people has been fixed in zones of dependency and peripherality, stigmatized in the designation of underdeveloped, less-developed, developing states, ruled by a superior, developed, or metropolitan colonizer who was theoretically posited as a categorically antithetical overlord” (p. 295). Again, here, Said (2000) highlights the links between the norm/Other order as a racial one by emphasizing the *metropolitan colonizer*. I draw on some of these anti-colonial scholars to anchor my analysis so that I am more equipped to look at the shared axes of racism/ableism/sanism in the “data” acquired for my thesis and how it is expressed in the prison system.

Anti-Colonial Theory in this Research

Anti-colonial scholars offers numerous concepts that I will be drawing on to challenge dominant, eurocentric theorizations of disability and criminality. Fanon’s (1967) articulation of the zone of non-being will be drawn on to circumvent an essentialist and additive recognition of race and disability that omits the hierarchies in oppression. Said’s (1978) contributions on

Orientalism will be integrated to problematize the colonial construction of ‘difference’, instead of beginning with it as presumed and universal (eurocentrism). Starting from a theoretical standpoint that conceptualizes the world order as racial, I use the concept of subalternity as articulated by Gayatri Spivak (1988). The term “subaltern” was introduced in Antonio Gramsci’s (1934) Prison Notebook 25 and in the original context referred to the proletariat, peasant, “lower rank” people. The subaltern is a class of people who are not recognized and thus denied by the elite class, participation in local history and culture, and are pushed to the margins by hegemonic domination (Gramsci, 1934). This term was later adopted by South Asian scholars, forming Subaltern Studies. I draw on Spivak’s seminal essay *Can the subaltern speak?* (1988) and the subsequent conclusion that the subaltern cannot speak, to frame my analysis of subalternity within my understanding of the zone of non-being. Thus, when Spivak concludes that “in the context of colonial production, the subaltern has no history and cannot speak” this positions the notion of “voice” and representation only for those who are deemed human, who exists in the zone of being (p. 28). I bring these concepts together by analysing the erasure of prisoner voices through incarceration, as working to secure colonial hegemony and deny subaltern humanity.

Furthermore, how the colonality of power is expressed and operationalized requires analysis of the logics, philosophies, practices and systems that create and preserve the colonial world order. Joseph (2015) proposes an examination of *confluence* that does not essentialize or limit identity categories or systems of oppression. Joseph (2015) explains that a confluence is never static and thus, allows for the examination of numerous themes, simultaneously. For this thesis, it requires attending to the confluence of ideas, laws, practices and systems that converge at the site of prisons for the preservation of a colonial order. Drawing on this framework facilitates an examination of both the material site of violence (prisons) and abstract ideas and logics that guide the operation of incarceration. An analysis of confluence within the paradigms

of anti-colonial theory, facilitate “revealing a project”, that contextualizes prisons within colonial nation-building and the preservation of coloniality (Joseph, 2015, p.77).

Chapter Three: Literature Review

In *Culture and Imperialism*, Edward Said (1994) discusses the concept of “contrapuntality”, a method of reviewing literature that alternates between generality and specificity (p. 66). Particularly, Said (1994) begins with, centres and privileges literature and discourse from ‘non-western’ authors as the basis of his insight on coloniality and imperialism in western literature. He then offers critiques of “specific” examples from western literature to illustrate his points. Attention to coloniality in literature, offers historically applicable analyses (as colonialism is historic and ongoing), whereas hyper-specificity, that fixates on individual articles, leaves analysis to be bound temporally. This limitation obscures the pervasiveness of colonial hegemony through discourse and dilutes critiques as particular to specific articles or authors. Drawing on this approach, I attempt to situate some of the specific articles I cite, within the context of how critical theory operates in general. Chowdhry (2007) explains Said’s approach for contrapuntal reading of literature as:

not to valorise plurality, rather it is a plea for ‘worlding’ the texts, institutions and practices, for historicising them, for interrogating their sociality and materiality, for paying attention to the hierarchies and the power-knowledge nexus embedded in them.
(p.105)

Drawing on this approach, this review interrogates literature by ‘historicizing’ it, particularly paying attention to the histories omitted in eurocentric frames of reference. Accordingly, I focus less on what is being said about the over-representation of disability and/or race in literature and instead look at entry points and how these social problems are discussed in critical scholarship. I will draw on only a few examples of particular policies/practices that are attributed to the over-representation of racialized/disabled people in prisons, to position them within a wider context of eurocentrism in discourse and ultimately connect it to implications for praxis.

The “Birth” of the Prison System

Discipline and Punish - The Birth of the Prison (1975) by Michel Foucault is a frequently cited text by scholars in the humanities and social sciences, particularly those who seek to understand the social and material conditions of prison. I begin my review with this book because it is an anchor text for scholars who draw on Foucauldian concepts when discussing incarceration, such as surveillance, disciplinary power (anatomo-politics), biopower, recidivism, criminality, knowledge/power and the construction of ‘regimes of truth’ through science. In this text, Foucault (1975) outlines the different judicial practices in western Europe prior to the beginning of penal reforms near the end of the 18th century, which ultimately led to the birth of the modern-day prison. Foucault (1975) suggests that there was a gradual shift from spectacular practices, such as torture and ritual executions, to more covert modes of control that retain the State’s power to punish by implementing technologies of surveillance and discipline. Foucault (1975) explains that the “truth”, as set out by Church and State authorities, is about establishing a “norm” through removing and correcting “deviants” or “delinquents”. The concurrent relationship between these two concepts illustrate how the truth relies on the establishment of the norm, and the subsequent establishment of an abnormal that does not align with said truth. Consequently, a process of “normalization” is established that relies on technologies and systems of surveillance to cement a social order that upholds said norm. Foucault (1975) explains:

like surveillance and with it, normalization becomes one of the great instruments of power at the end of the classical age. For the marks that once indicated status, privilege and affiliation were increasingly replaced- or at least supplemented by whole range of degrees of normality indicating membership of a homogeneous social body but also playing a part in classification, hierarchization and the distribution of rank. (p. 184)

This book unearths many lessons depending on the reader's ontological orientation. I am interested in how the cataloguing of the abnormal solicits a power relationship where the classifier is, by default, consolidating their power as the producer of truth, normality and the standard. Furthermore, how the subsequent incarceration, organization and regulation of individuals is scientized under the pretence of "truth"- i.e a variation of "the good of the people", "public safety", "common good" or "public interest". While Foucault provides insight on the carceral network in Europe that North American prisons were subsequently modelled after, there remain oversights that reveal the Eurocentric roots of Foucault's analysis (Venn, 2009). This Eurocentrism is expressed as an absence of analysis that contextualizes the established norms, and classification of difference, as contingent on the taxonomies produced by the metropole as 'rationale' for the dehumanization, violence, confinement and imprisonment of colonized peoples both in the global North and the global South. Furthermore, Achille Mbembe (2003) picks up from Foucault, highlighting the Eurocentrism in his analysis and oversight of *sovereignty* as colonial. Mbembe (2003) centres colonialism and racism as a technology, authorising the exercise of biopower through *colonial* sovereignty, whereas Foucault does not make the distinction. Foucault (1975) explains "if torture was so strongly embedded in legal practice, it was because it revealed truth and showed the operation of power... It also made the body of the condemned man the place where the vengeance of the sovereign was applied" (p. 55). Mbembe's articulation of sovereignty as colonial, positions law, punishment and criminality as inseparable from violence on colonized peoples. He suggests that Foucault does not answer: "under what practical conditions is the right to kill, to allow to live, or to expose to death exercised? Who is the subject of this right?" here referring to colonization and colonized people (Mbembe, 2003, p. 12). In centring coloniality, he also suggests that biopower is colonial, drawing on the exercise of biopower in plantation systems in colonies and under apartheid regimes. Mbembe (2003) explains:

The most original feature of this terror formation is its concatenation of biopower... crucial to this concatenation is, once again, race. In fact, in most instances, the selection of races, the prohibition of mixed marriages, forced sterilization, even the extermination of vanquished peoples are to find their first testing ground in the colonial world. (p. 23)

Emphasizing the coloniality of power challenges eurocentric conceptualization of the “classification” and “distribution of rank” in the discussion of norms and delinquency. Instead, an anti-colonial framework highlights these constructs on a racial hierarchy that serves the expansion of colonial sovereignty through ‘race’ and ‘colonialism’ at the foundation of biopower (Mbembe, 2003). Moreover, it also highlights coloniality in the construction of “regimes as truth” positioning the construction of norms, and knowledge/power as colonial, formed and cemented through science as rationale for the subjugation of the colonized people. Within this paradigm, discussion of normativity and disability also needs to be “framed and analysed in historically and geopolitically referential ways, traceable to what we may call a colonial normativity” (Gretch, 2015, p.10). Recognition of history, position the constructs of “norms” “deviance” and “delinquency” as colonial archetypes employed to imprison, discipline and punish colonized peoples (Gretch, 2015).

eurocentrism – An analysis of Neoliberalism and Socio-economics

The eurocentrism in the literature on disability and incarceration is revealed through the consistent and pervasive western propensity to universalize white subjectivities via the erasure of the histories racialized and colonized peoples. What often ensues eurocentrism is a pseudo-understanding of class analysis and/or dehistoricized analysis of race (Rabaka, 2014). For example, literature that examines the movement from institutionalization to de-institutionalization, the closing down of asylums, psychiatric facilities, the aftermath of de-institutionalization and the rise of mass incarceration in prisons show negligence towards

engagement with history and “race”. There is a ubiquitous yet invisible western universalism that homogenizes the different outcomes of de-institutionalization for white and non-white disabled individuals. The homelessness of disabled individuals in the de-institutionalization era is a widely cited factor as a pathway to incarceration (DeLisi, 2000; Ditton, 1999; McGuire and Rosenheck, 2004; Markowitz, 2006). For example, prisoners with mental health diagnoses are more likely to be homeless than prisoners without in the year prior to their arrest (DeLisi, 2000; Ditton, 1999). Similar frameworks with attention to socio-economics offer critiques of the impacts of neoliberalism on social welfare policies and subsequent cuts to social welfare services (Brown, 2016; Bryant, Raphael, Schrecker and Labonte, 2011; Wilson, 2004). This is seen in analyses that discuss bed shortages, unaffordable housing and increased reliance on the police in the social welfare system as pathways for the over-representation of disability in prisons (Markowitz, 2006). Markowitz (2006), for example, proposes that neoliberal cuts to healthcare lead to decreased inpatient capacity in public psychiatric hospitals, which is a factor contributing to mass incarceration and disabled individuals being diverted to prisons. Furthermore, as a result of said cuts, some scholars suggest that there has been an increased reliance on police officers to assist in crisis intervention, which contributes to the criminalization of disability and thus increased arrest rates (Markowitz, 2006; Finn and Sullivan, 1988; Grob, 1994; Dowdall, 1999; Issac and Armat, 1990; Johnson, 1990; Lewis et al., 1991; Mechanic and Rochefort, 1990). The attention to the impacts of socio-economic systems on the lives of disabled individuals connotes the presence of multiple forces contributing to the mass incarceration of disabled people and their disproportionate arrest. Despite this, there is an oversight of colonial governance and the employing of exploitative economic-systems to secure a colonial order, thereby deeming disabled/racialized people as inferior and disposable. Strakosch (2016) for example, suggests that critiques of “inequality” focused on socio-economics without positioning economic-systems as articulations of

colonial-governance, present a history whereby neoliberalism emerged organically and outside of colonial power relations. Said eurocentrism confines analysis inside “liberal regimes of freedom”, directing discourses towards colonial paradigms of inclusion and exclusion and individual rights to be “granted” and “redistributed” through colonial systems, ultimately naturalizing the colonial nation-state (Strakosch, 2016, p.183). Gretch (2015) describes this tendency in critical disability studies as attached to a ‘eurocentric materialist history’ looking at social problems solely within the frameworks of pre-capitalism and post-capitalism “with nothing before or in between” (p. 19n1).

On a more micro-level, critical discourse attached to an analysis of economics, also fails to acknowledge who -with attention to race- is impacted by homelessness, housing insecurity, shelter bed shortages etc. In essence, eurocentric critical analysis locates injustices, or “social problems” on a class-based hierarchy, with economic-systems being the driving force behind mass incarceration. For example, the aforementioned articles discussing the increased reliance on police in social welfare and the criminalization of disability, without discussing the criminalization and policing of racialized communities, present an either-or fallacy that erases the experiences and histories of racialized/disabled people. In *Abolition Democracy: Beyond Empire, Prisons and Torture*, Angela Davis (2011) argues, “[...] regardless of who has or has not committed crimes, punishment, in brief, can be seen more as a consequence of racialized surveillance...those communities that are subject to police surveillance are much more likely to produce more bodies for the punishment industry.” (p.41) The term racialized surveillance is noteworthy, as it challenges the presumed neutrality of surveillance over disabled people. Categorization based on racial hierarchies seeks to warrant who is deserving of the exploitation, dehumanization and confinement that occurs through economic systems. Rabaka (2014) extensively discusses how western critical analyses are attached to a eurocentric materialism whereby economic relations are determinant of material conditions [economic determinism]

thereby failing to recognize hierarchies in human suffering. More importantly, it dilutes the extent to which exploitative economic systems have both historically and contemporarily been contingent on slavery and colonialism, requiring the dehumanization and non-recognition of racialized and colonized people as a precursor to operating. Rabaka (2014) adds that European and American/European critical theories, particularly in how they are oriented in addressing “social problems”, do so in a dehistoricized manner that continues to uphold the “epistemic apartheid” of Western Ivory towers, in their analyses of oppression (disability, race, gender). This Eurocentrism, particularly in the discussion of socio-economics is looking at social problems without attention to the histories that create and sustain them. Drawing on Amílcar Cabral, Rabaka (2014) explains that it is only through “deracinating social problems” or “returning to the source” via recognition and engaging with the histories of colonialism can social problems be addressed critically (p. 104).

Moreover, in the very process of discussing cuts to healthcare and bed shortages in psychiatric facilities, for example, leading to the “increased reliance” on law-enforcement, there is an erasure of the historic roots of psychiatry in the enforcement of colonial law (Kanani, 2011). Psychiatry is then positioned as “innocent” in the project of criminalization, rather than a characteristically colonial discipline that has been commissioned to not only rationalize violence but also inflict it on racialized/colonized peoples (Joseph, 2015). For example, psychiatry as a discipline of “truth”, validated scientific racism, characterizing Black people as intellectually inferior and as having a propensity to “submission”, making them “suitable” for slavery (Kanani, 2011). Psychiatry was also employed to define, measure and pathologize Indigenous peoples as “primitive” and inferior (mentally, socially, behaviourally) to white settlers (Waldram, 2004). Kanani (2011) adds that psychiatric institutions are fundamental systems in the operation of settler-colonialism, confining Indigenous peoples for resisting assimilative policies and being further subject to medical experimentation and forced

sterilization within these institutions. The process of confinement, removal and punishment is not exclusive to the criminal justice system and both systems depend on similar eugenic logics for the preservation of coloniality. While these examples do not come close to an exhaustive list, I use them to illustrate the danger of solely associating law-enforcement in the process of criminalization. Discussion of economic cuts to healthcare that dismiss this history are erasing the fact that racialized people have been subjected to violence and confinement prior to being “diverted” to prisons.

The Addition of Race Analyses

Critical scholarship that acknowledges the absence of “race” analysis often seeks to bridge this gap by introducing a dehistoricized analysis of race (Fellows and Razack, 1998). This is illustrated as oversight of coloniality in the construction of difference as an enterprise embedded in the logic of Orientalism (Said, 1993). Ultimately, by essentializing oppression, analysis that attempts to discuss race and/or disability often ends up paralleling the different historical descents of ableism, sanism and racism as one, equally quantified ‘oppression’. Research on the school-to-prison pipeline is another example of inquiry that seeks to understand the over-representation of racialized and disabled people in prisons. Depending on if a ‘disability’ or ‘race’ angle is adopted by the authors, the general conclusions are that disabled or racialized students are diverted away from educational spheres to the criminal justice system due to punitive disciplining methods (Alnaim, 2008; Heitzeg, 2014). Students with “learning disabilities”, “behavioural disorders”, and disabilities are often labelled as having “behavioural issues” or as “threats” to the general school safety leading to them having higher rates of expulsion (Alnaim, 2008). Authors who examine race and the school-to-prison pipeline draws links between ‘racial biases’ embedded within the implementation of punitive policies and the subsequent overrepresentation of racialized youth in the prison population

(Heitzeg, 2014). Nonetheless, there is an evident binary between “race” and “disability” and an absence of historical interrogation of the constructs used to remove racialized and disabled youth from schools – “threats”, “violent”, having “behavioural issues”. The construction of what and who constitutes ‘violence’ and ‘danger’ cannot be separated from the pathologization of Blackness as “rationale” for colonial violence (Erevelles, 2014). Erevelles (2014) explains this by highlighting eugenic logics in Jim Crow ideologies that depict Black men as “innately dangerous and depraved”, with the conceptualization of their “dangerousness” being attributed to an innate mental imbalance resulting from their “aberrant biology” (p.92). Erevelles (2014) explains that “the logic of disability (feebleminded) as dangerous pathology also implicated in the construction of Black men as dangerous (sexual) predators justified the most violent practices of Jim Crow and eugenic criminology” (p.92). This example illustrates that the very construct of disability as “dangerous” as well as whose body is “worthy” of violence was measured and marked on racialized and colonized people. Separating the construct, from the body it was constructed on erases the histories of racialized people that are subject to confinement and removal from wider society, a project of colonialism, analogous to the removal from the wider student body to the prison system. Racial ‘Otherness’ is a driving logic of colonial expansion, employed to subjugate and oppress colonized people (Said, 1993). Within that, colonialism “repositioned disability as a condition replete with signifiers and messages around notions of ideal colonised bodies” constructing normativity (Gretch, 2015, p.10). Discussing difference, adding race as a lens, looking at disability and race in binaries and even as intersecting/historically parallel without critical engagement with history restricts analysis to eurocentrism (Joseph, 2015a). This eurocentrism serves as an epistemological limitation to addressing or understanding the historical nature of contemporary “social problems” examined in critical scholarship (Rabaka, 2014).

Implications - Abolition and Praxis

Returning to the notion of “reflection” and “action”, identified by Freire (1972), I situate my examination of literature in relation to “praxis”. The eurocentrism embedded in critical theories impedes the process of “reflection” on the nature of the “social problem” being explored. Subsequently, the proposed “actions” do not facilitate liberatory praxis as it cannot challenge the colonial world order without recognizing it. To illustrate this, I return to the examples I cited, to interrogate some of their proposed solutions. The labels used to remove racialized students and disabled students from schools, for example, were dehistoricized and presented as a matter of racial bias or ableism. Heitzeg (2014) explains how some schools “have offered additional training and evaluation for police officers who patrol the hallways, with a particular emphasis on dealing with students who have disabilities or mental health challenges” (p.31). Moreover, literature that addressed “racial bias” in police arrests as a pathway to mass incarceration of disabled and/or racialized people suggest that police need more mental health training on better “managing” and “understanding” people with disabilities, with an emphasis on “diversionary tactics, referrals for service, and collaboration between police departments and mental health agencies” (Lurigio & Watson, 2010, p.9). Literature that examines “racial bias” during arrests for drug-related ‘offences’, are often preoccupied with the importance of promoting “equality” in the practice of arresting ie. equally arresting white and racialized people (Mitchell & Caudy, 2015). These “solutions”, however, do not offer meaningful, tangible changes to the lives of those most impacted by police brutality and incarceration. Chapman, Carey and Ben-Moshe (2014) give the example that early progressive religious reformists sought to ““liberate the “mad” from the oppressive conditions of chains and squalor, and to provide them with therapies—while still confined” (p.5). Accordingly, undifferentiated confinement was considered inhumane but specialized confinement was considered reformist, progressive and rehabilitative. Analogously, attempting to further

‘reform’ practices/policies that facilitate mass incarceration through accounting for biases, discretion trainings only uphold what Murakawa (2014) calls a “liberal law and order”, thus leaving colonial ‘law and order’ assumed and questioned (p. 59). Murakawa (2014) explains:

In the ideology of liberal law-and-order, police brutality was the unsanctioned use of force, but more procedures and professionalization could define acceptable use of force...Liberal lawmakers would come to evaluate fairness through finely honed, step-by-step questions: Did legislators enact a sufficiently clear criminal statute? Did police properly Mirandize? Did prosecutors follow protocol in offering a plea bargain or filing charges?... As a methodology for “finding racism” in the criminal justice system, liberal law-and order reinforced the common sense that racism is a ghost in the machine, some immaterial force detached from the institutional terrain of racialized wealth inequality and the possessive investment in whiteness (p. 59)

Accordingly, eurocentric analyses limit reflection and advance discourse that advocates for technocratic reforms, the addition of administrative layers to law-enforcement, cultural competency training, representation of racialized law-enforcement and increased ways to professionalize policing, surveillance and incarceration, ultimately expanding the carceral network. Attention to the “source” of the social problems addressed/explored in critical scholarship has the potential to promote praxis that moves beyond individual-level policy changes and facilitates imagining a world not only without prisons but also without the systems that uphold it.

Chapter Four: Methodology

Reflections on Research Design and Methodology

Colonial nation-building relies on institutions such as prisons to both abstractly and materially remove, silence and erase prisoner voices- namely, racialized/colonized peoples. Anti-colonial theory as an over-arching framework and the concept of subalternity in particular pushed me to reflect on and problematize the notion of “voice” in research. Particularly, what constitutes subaltern voices? If subaltern voices exist outside of and are silenced by hegemonic forces, how do I introduce the notion of voice as a pathway to counterhegemonic discourse? Reflecting on research design was an ongoing process throughout this project as I was looking for methodologies that aligned with my ontological orientation. Incorporating elements of participatory-action research (PAR) was a central point of contemplation in the initial stages of the research design as I reflected on what it meant to attend to “voice” and subalternity. I was eager to adopt more “bottom-up” approaches that are grounded in the community my research involved as an attempt to circumvent the dominant methods of “engaging” with prisoners in research. For example, in my first ethics application, I had planned to have a “research advisory committee” and bringing in members of the community to be “co-partners”. Moreover, in addition to the interview and/or focus-group set out in my research design, I considered having a follow-up collaborative analysis session, where there would be a “collaborative” conversation on data interpretation, analysis, discussion of themes and ideas. The use of participatory action research, was a form of extending the opportunity to participate in research, beyond “sharing lived experiences” and offering a space to also share thoughts on analysis, themes I picked up in “findings” and on knowledge dissemination. Nonetheless, many of the methods and practices within PAR felt antithetical to my theoretical orientation, did not attend to the notion of voice in subalternity and also felt exploitative. To further examine the

ethical “tension” I felt, I asked myself: 1) Why am I looking to include lived experience? 2) Who benefits from the methods outlined in PAR?

My rationale for including the “lived experiences” of prisoners was rooted in the fact that it is their very lived experiences and histories that are suppressed and silenced by hegemonic forces. Ware, Ruzsa, and Dias explain (2014) that “it is so rare to actually hear about prisons from prisoners themselves” and “there has been little research conducted about the experiences of race and disability in carceral spaces” (p. 164). There is an active erasure of the lived experiences of prisoners (also outlined by participants in the findings) in research and in discourse, that privileges the voices of ‘authority’. As with some of the research I addressed in the literature review, it is psychiatrists, social workers, law enforcement, policy-makers and academics that are asked about the problem of over-representation of disabled/racialized people in prisons and what they believe needs to change. Prisoners are devalued and disregarded as capable of making sense of their own social realities. Moreover, research funders and research partners have a vested interest in the project of criminalizing racialized people. For example, some of the current research partners with Correctional Services Canada are Statistics Canada, Public Safety, the Royal Canadian Mounted Police, St. Michael's Hospital and Canada Border Services Agency (Correctional Services Canada, 2020). As argued throughout this research, all of these systems work together to secure a colonial order through the operation of removal; thus, it is no surprise they collaborate to produce research that aligns with their colonial agendas.

Nonetheless, in discussing subalternity, representation and the “inclusion” of marginalized voice, Spivak (1990) explains that “it is not a solution, the idea of the disenfranchised speaking for themselves” (p. 63). Moreover, Macedo (2005) explains that there is a “romantic pedagogical mode that “exoticizes” discussing lived experiences as a process of coming to voice” (p. 18). Thus, “lived experience”, alone, does not inherently facilitate

recognition of subaltern voices- as “recognition” is not an individualized process and voice is not merely about individual people (Darder, 2018). Drawing on these frameworks illustrated that subalternity and counterhegemonic narratives can be attended to, without the ongoing “participation” of individuals with lived experience in every step of the research. Principally because some of the practices of PAR are exploitative in nature. For example, if I were to have a feedback session or a research advisory committee, this is a one-way benefit whereby participants feedback/analysis would enrich *my* thesis. Beyond the interview/focus group, ongoing participation would require more “input” on the participants’ end (reflection, feedback, analysis, time). This framework also presents “offering a space” as inherently beneficial for participants, whereas it is primarily beneficial for research (similar spaces could be created for prisoners to share experiences outside of a research context) (Janes, 2016). This point of reflection changed my research design leading me to remove the second phase of my research – the “collaborative” component. This prompted me to expanded my understanding of subalternity as not merely “inclusion” of those who are excluded but also how I orient my analysis and reflection to align with the erased histories of erased voices and populations. Subalternity could be attended to in the histories I cite, how I read the data, how I connect the data to broader structures, where I locate it within the present colonial order (as outside of it, for example) as well as how I look for the “voices” that are “missing” in dominant discourse and literature (Darder, 2018).

Recruitment

My recruitment strategy involved connecting with different organizations that may work with individuals who have been imprisoned in the federal prison system of Canada. The recruitment poster and letter of information were circulated to organisations that may come in contact with individuals who have experienced imprisonment such as shelters, disability

services, settlement services as well as organisations that work directly with individuals who have experienced imprisonment such as PASAN, The Bridge, Elizabeth Fry Society of Toronto, The John Howard Society of Toronto and half-way houses. These organisations were asked to share the recruitment flyer and information letter via email to their email list, to put up physical copies in their buildings as well as verbally and physically share information about the study. The recruitment strategy was intended to promote a wider reach and account for barriers by providing participation opportunities for individuals who may not have an email or access to the internet. Despite this, it was around early April of 2020, three weeks into the nation-wide lockdown due to the global pandemic (COVID-19) when I had passed ethics and was able to officially start recruitment. This transformation meant that essential workers are now also managing new work hours, health guidelines and changes to the very operations of the workplace which predictably influenced the extent to which organizations could be engaged in the recruitment process. Many organizations, for example, expressed interest in supporting my project in late May or June when new work routines have been established, but this conflicted with the timeline I had for this thesis. This change yielded fewer participants than I had originally planned and prepared for.

Eligibility Criteria

The eligibility criteria required that interested participants be over the age of 18, have been incarcerated in a federal prison in Ontario and are living with a disability. I chose to use the broader term ‘disability’ including any visible or invisible disability as identified by the participant. I wanted to avoid specificity, in a way that aligns with a medical model pre-occupied with medically imposed labels and diagnoses, allowing me to position the construct of disability, more broadly within a historical framework. Participants were not asked to disclose any medical or health information, to name the prison where they were incarcerated,

nor the amount of time in it. My intention is not to highlight how one particular disability is “treated” in one particular prison. I wanted to look at the constructs of disability and how disability interacts with the social function of prisons in Canada. This approach was to allow for an analysis of prisons that does not fixate on the particularities of one prison over the other and situates “prisons” within a broader context of removal, confinement, segregation.

Methods

Along with the nation-wide lockdown, came guidelines to social and physical distancing that changed the dynamics of my research methods. While I had originally planned for an in-person focus group and interview, I had to change this method to be conducted virtually. Consequently, I was concerned about participant security and safety regarding data and security breaches with online platforms where interviews would be conducted. I was also apprehensive about the changes in the dynamic that would be created with the presence of technology such as cameras and added discomfort from sharing personal experience through a screen. The omission of in-person meetings prompted me to reflect on how I could create a more comfortable space virtually. I researched different platforms for online meeting and selected Cisco WEB-EX as it was secure and end-to-end encrypted. I also explained during the informed-consent process that participants have the option of using their camera or not, and there will only be audio-recording. Nonetheless, the omission of in-person meetings automatically excludes participants who may not have access to the internet or the phone alternative and creates barriers to participation. For example, two of the four participants that I interviewed were supported by the half-way house they were staying in to use the half-way houses’ phone. On the other hand, the use of online platforms also increased the possibility for a wider reach of participants, where distance or transportation could have been a barrier. Lastly, one participant indicated that they preferred virtual meetings because it helped them talk about

things that are often more challenging to discuss in person. Ultimately, the focus-group was omitted with some participants not having access to the internet and another expressing that they would prefer a women's only space. Overall, there were four in-depth interviews that occurred over the phone and also through virtual meeting on WEB-EX.

Individuals interested in participating were asked to discuss, to whichever extent they felt comfortable, their experiences in the federal prison system of Canada as someone living with a disability. A semi-structured interview was selected as the method of data collection so questions pertaining to my research question could be addressed while also creating space for participants to share and focus on what they find significant. In alignment with anti-colonial theory, I sought not to fixate on the classification and "treatment" of difference (disability) but used the concept and construct of disability as a guide to listen to the stories and experiences of prisoners.

The theoretical underpinning behind this approach allowed me to look at how the cataloguing of difference and constructs of criminality work in tandem to establish hierarchies of dominance/subordination. This allowed me to situate the incarceration of racialized/disabled individuals within my analysis of the colonial order, as well as more broadly examine colonial oppression systematized along the lines of "difference" ie, disability and race. Within my theoretical framework, the "Other" is constructed to be removed and the operation of removing is designed for the Other, it is dynamic co-constructed via a confluence of philosophies, laws, systems, practices etc. (Joseph, 2015). This orientation anchored my interviewing method and created space for an open-ended conversation led in the direction the participant wanted to take it. The experiences and stories shared by participants ultimately alluded to and addressed the objective of my thesis, regardless of the specific questions I asked or did not ask because any given experience could be connected to a series of concepts addressed within an anti-colonial framework. This was also illustrated by the fact that I did not have any outlined questions on

“race”, nor was I looking for racialized participants in my eligibility criteria, yet the majority of the participants were racialized and discussed it in ways that were inseparable from their discussion of disability. What the participants focus on, even if it is not “directly” related to the questions I had prepared, is an indication of what is important/stood out for them. For example, one participant emphasized gender in relation to disability and others emphasized race, whereas fixation on “disability” would serve to reinforce a false divide that is also antithetical to my theoretical framework.

Data Collection – Voice and Subalternity

In *Culture and Imperialism*, Edward Said (1993) brings up the “cultural argument for empire” by discussing the re/production of colonialism and imperial expansion through the west’s “power to narrate, or to block other narratives from forming and emerging” (p. 187; p. XIII). Subaltern studies resists this by starting from and centre the histories of communities that are marginalized and/or erased (undocumented in dominant historiographies) from colonial records (Chattopadhyay & Sarkar, 2005). Drawing on subalternity facilitates situating the stories, experience - “data”- acquired through my research as “evidence” in and of itself of colonial violence. Documenting and highlighting the stories of silenced and erased populations is testimony of a reality that exists yet is not recognized by dominant hegemonic structures, as the humanity of the racialized/disabled subaltern is not recognized. Meekosha (2011) for example, explains that one cannot “meaningfully separate the racialized subaltern from the disabled subaltern in the process of colonisation” (p. 673). From this, the concept of subalternity could be useful to understand data concerning oppression and identity, not as “intersecting” but as historical identities delineated through the colonality of power. The “data” I am looking for is then about the narratives, histories and undocumented experiences of the “subaltern”, as a historical identity existing in these violent continuums, rather than

looking at specific instances of injustice in the prison system, or specific ways that disabled prisoners are “treated” as evidence of injustice.

Darder (2018) draws on the work of Freire in *Pedagogy of the Oppressed* where he looks at the struggle for freedom and humanization as being led by critical consciousness, education and collective action by and for oppressed people. Darder (2018) draws links between Freire’s critical pedagogical engagement and the subaltern, suggesting that the “dialectical understanding of the subaltern voice echoes Freire’s (1970/2012) notion that the emancipatory knowledge of the researcher must emerge from an intimate understanding of “the empirical knowledge of the people” (p. 181)” (p.101). As such, transformative praxis, illustrated as the abolition of the carceral network requires reconstitution of “knowledge” and “truth”. This means beginning from and centring subalternity, whose stories exist outside of the hegemonic order and silenced through the processes of colonial erasure. The subaltern as a historic/political entity in and of itself indicate a long-standing hegemonic order. The existence of the Other is proof of violent systems of dominance that Otherize. To understand colonial systems of dominance, as a researcher I would need to look outside western traditions that epistemologically expand colonial domination, by beginning from subaltern voices. Subaltern voices, in this case, does not mean the literal voice of prisoners but the histories and subjectivities of racialized and colonized peoples who are subjugated through violent systems of removal. As Darder (2018) explains, for Freire the construction/reconstruction of knowledge “must unfold organically through a humanizing praxis that is grounded in the voices and sensibilities of subaltern researchers, both within the academy and out in the larger society” (p. 102). In alignment with anti-colonial theory, subalternity allows for the conceptualization of the “problem”, being investigated in the research question and the subsequent data analysis in a way that illuminates “the manner in which the coloniality of power has had concrete social

and material consequences on subaltern populations” (p. 103). The theoretical frames guiding my research position subaltern voices as a necessary and primary source of data collection.

Data Interpretation

The concept of “confluence” as a data analysis method will be used in tandem with the concept of “subalternity”, in that the data could be used to examine the confluences that secure colonial hegemony. To study a confluence means connecting the data to the histories, systems, structures and philosophies that have been employed for the furthering of a colonial world order (Joseph, 2015). The attention to confluence shifts my analysis beyond an over-articulation of identity-based oppression, such as ableism or sanism as based on a temporally static ‘identity’. Instead, it facilitates an examination of the historical processes by which racism secured the concept of ‘ableism’ and ‘sanism’ and the histories by which the differentiation of subalternity was violently constituted. Subalternity will be used to conceptualize prisoners, as a group existing at the margins of the hegemonic order. Accordingly, the concept of subalternity will be used as a medium to examine the various constructs that encompass “prisoners”, in relation to disability, race and criminality. This framework resists eurocentric theorizations of disability that ignore the construction of difference as a process of colonial domination, accounts for the limitations in ‘intersectional’ analyses that essentialize identity-based oppression as equivalent and facilitates a cohesive analysis that attaches contemporary experiences to historic realities.

The concept of subalternity in its alignment with anti-colonial theory will be a useful data analysis tool in its function of documenting and searching for the “blocked narratives” addressed by Said (1993, p. XIII). Within this framework, the histories and lived experiences of subaltern groups will be drawn on to resist eurocentrism represented by the Western propensity to dominate the Other “by making statements about it, authorizing views of it, describing it, by teaching it, settling it, ruling it: in short, for dominating, restructuring, and

having authority over” (p. 3). Drawing on hooks, Darder (2019) explains the subalternity can link the “politics of voice to the “authority of our lived experience” (hooks, 1994)”, creating space for the multiplicity of subaltern sensibilities to be expressed (p.44). Through subverting dominant narratives and attending to subalternity, demarcations between the colonial “past” and present become blurred and eurocentric frames of reference that look at disability, race and criminality are resisted.

Chapter Five: Findings

Participants

In total, this research project involved four participants. For anonymity, participants will be labelled with an alphabet letter – Participant A, Participant B, Participant C and Participant D. While demographic information was not collected, participants, to varying degrees, disclosing different details about themselves such as age, race, gender and faith. Three of the four participants were racialized, with two of the participants identifying as Black men. Similarly, participants were not asked to disclose health/medical information, but overall all of the participants did- discussing different disabilities such as depression, anxiety, ADHD, eating disorders, addictions, chronic pains, HIV and schizophrenia. Any labels I use in the findings and analysis are used by the participants.

Summary of Findings

As outlined throughout the thesis and within my theoretical framework, the coloniality of power is central to the analysis of the various institutions that interact with the criminal justice system. Accordingly, many of the quotes I cite from the participants overlap across different themes. I organize the themes to answer the question of: Who? What? And How? Leaving the question of why to be explored in the discussion. The first theme I explore is concerning the colonial construction of disabled prisoners: Who is deemed as deserving of confinement? Who is deemed criminal? Here I attempt to unpack the construction of disabled/racialized prisoners as conceptualized by dominant “regimes of truth”. Examining the construct of racialized/disabled prisoners is not referring to how particular people within the system “view” prisoners, but rather the social, political and cultural construction of prisoners both historically and contemporarily to secure the colonial world order, carried out through the policies and practices inside of prisons.

After examining who is being imprisoned, I will explore “what” is being carried out by the systems that interact with and are integral to the functioning of the prison- psychiatry, medicine and the criminal justice system in its entirety. Many of the sub-themes discussed in “who” and “what” are not distinct from “how”, which is the final theme that looks at *how* the criminal justice system silences prisoners and which violent tools and tactics are used to further their erasure. I highlight the overlap because the construction of “who” prisoners are, in itself, is a tool of violence that serves to erase and silence, thus also answering the question of “how”. The overlap that exists amongst the themes is reflective of the ubiquitous forces that underpin the injustices the participants discuss, that being white supremacist, colonial hegemony.

Colonial Construction of Difference– Who?

The symbiotic relationship between the existence of prisons and the construction of criminality is quintessentially represented by prisoners. In order for prisons to exist, it relies on the construction of a ‘criminal’ by which the operation of incarceration can occur. Simultaneously the mere construction of the Other and criminal prisoner necessitates a carceral network of institutions by which “criminals” can be removed to. The construction of the criminal prisoner concurrently establishes a non-criminal, morally superior, non-Other that is deserving and justifiably ordained to institute “social order”, which is done through the establishment of systems to carry out this operation ie. the criminal justice system. The participants frequently highlight the ways they were deemed by those who work within/for the federal prison system as “bad” people and morally “wrong”. The participants highlight this construct as mass-produced, exported and employed by healthcare providers, social workers, psychiatrists, nurses, prison guards and police officers. They make the connection that their

disabilities have often been “used against” them to fulfil this archetype of the deviant prisoner, particularly for the racialized participants. Participant A, for example, explains that:

They [healthcare providers inside prison] say if you have a problem with drugs come and talk to us if you want...they would then go and investigate you. They wouldn't help you, you know? And they will use that as a way to not let you out as opposed to let you out. They would say you clearly haven't changed...I know a lot of people who maybe, like, did struggle with certain things, but they didn't want to talk about it because they knew if they talked about it they would be seen as having risky behaviour. Instead of the system offering help it's more like we'll just supervise you more.

Participant A illustrates how their experiences as someone living with an addiction is often “used against” them to construct their health as an inherent moral failing and a result of deviance that is characterized by the “criminal” prisoner. Similarly, other participants highlight the constant emphasis on how prisoners, especially those living with addictions and are racialized are seen as exhibiting “risky behaviour” and must “change”. This begs the question: Change to what? Who decides what is “good”? Who decides what is “morally right”? The participants discuss the prominence of mandatory church-based programs that pervade the system and seek to “rehabilitate” the “criminal”, subsequently re-emphasizing the prisoners as “bad”, morally inferior and must be mandated into “change” Participant A explains:

It's like, all they offer is religiously based programs that focus only on abstinence. Because you're in an institution, and if you are in an institution you're in shit, you're not doing a *good* thing. They will not give you parole if you admit to using inside.... You know, there is so many, like, alternative approaches to sobriety especially nowadays. There's only one in there [prison] and it was like you have to take the 12-step program which is like, it's focussed on God and I don't not like God, it's just not realistic for a lot of people.

Participant A makes the connection that their imprisonment for drug charges and their addiction has been “used against” them to construct them as “bad” and in need of moral correction, in this case, represented by church-based programs that are “right” and morally superior. Participant D, similarly explains this by discussing how the mandatory programs offered inside of prisons focus on “making good choices” as well as teaching prisoners certain “skills” to facilitate “change”. Participant D explains:

A lot of it is cognitive behavioural therapy based and it’s just trying to, they want you to be a pro-social person and make choices for yourself. It’s the choices that they want, there is no understanding of like structural or systemic issues in society. The program is, I don’t know, a pile of crap, I don’t really know what they want, I guess to rehabilitate you.

All four participants discuss the use of force and punishment as being justified by prison officers and healthcare providers alike as prisoners are “wrong” and the programs mandated by Correction Services Canada are “right”. Participant A explains:

The system where I was, they have programs, right, so they put everyone in like a black box and the black box doesn’t fit everyone, and they don’t asses everyone’s case individually like they say they do, they assess individually in terms of punishment but not in terms of rehabilitation... I think they just take the easy way out to say, that ‘this is our one solution and this is what has to work, and if it doesn’t work, then I guess it’s *your fault*.

The notion of “fault”, expressed by participants, is related to the construction of criminality and deviance of disabled prisoners. It is considered the prisoner’s fault that they are in prison, it is considered the prisoner’s fault that they are living with an addiction and it is also their fault for not “changing” or “rehabilitating” to the ways prescribed by “correction doctors”.

Participant B, discusses his experience as a Black man living with schizophrenia, highlighting how the mere process of conviction and imprisonment has constructed him as undeserving of dignity and respect. Both him being Black and his mental health was used to depict him as An Participant B explains:

When you're locked away in a cage and they don't care about your dignity, they don't care about your community, they look down at you, they're going to act like they are your superior and subjugate you.

The authorization and legitimization of the punishment of prisoners is often done so on the basis of moral inferiority that is central to the construct of the criminal prisoner. Participant A draws on examples of punishment for refusing to attend the mandated 12-Step program as they were imprisoned for “drug charges” and are living with an addiction. Participant A explains:

You get in shit if you refuse, they take away all your privileges, you can't get a job...They jam you in that black box whether you like it or not so they can take away your day parole, so you won't get out as soon.

In tandem to the construct of the criminal as immoral, inherently wrong and in need of correction is the construct of the prisoner as sub or non-human as a result of this immorality. Participant C and D highlight how disabled prisoners are further dehumanized in the prison system and constructed as “out of control” threats, unsafe, aggressive etc. Participant D indicates that this construct leads to disabled prisoners being “shipped” from mental health institutions to prisons where they are better able to be “controlled”. Participant C highlights that this is heightened for disabled Black prisoners who are viewed as fundamentally criminal on the basis of being Black. Both Participant C and D describe the construct of the prisoner as non-human by using the analogy of disabled prisoners as “an animal”:

The government, in many different areas, too many to go into, depends on the level of your disability, the simple mental health disabilities are treated like animals, okay, left in cells with faeces after days on end - Participant C

You're cuffed down your ankles and you're being transferred for a couple of hours and it's uncomfortable they treat you like crap... it's just a whole transfer process, and yeah I mean it kind of felt like they treat us like animals, like you're just going from a shelter to another place and you don't really, there is no sensitivity and it's a scary process
-Participant D

The “non-human” disabled prisoner is rooted in notions of prisoners as violent and uncivilized on the basis of being “convicted”, of being disabled, of being racialized, of being Other. The constructs work in inseparable ways to constitute prisoners as “non-human”, by which punishment and segregation is justified. Participant D provides an example: “they treated me like I was just a drug addict trying to get drugs even for simple things like a muscle relaxer”. Participant D explains how they were perceived as attempting to “abuse drugs” as they are living with an addiction and chronic pain. Being non-human, and just a “drug addict” rationalized the denial of access to healthcare and pain medication, leading Participant D to be sleeping on a “concrete slab” without a pillow for the first six months. Participant D gives another example:

The system uses solitary confinement all the time for minor things still. At one point when I was in provincial, I spent a week in the hole they called it, loss of all privileges. I'm so, that means they took my blanket my mattress and I had no books or anything so I'm just isolated in this dark cell and it was all because I had strep throat so it's a medical thing but they treat you as if you are violent, having a violent outbursts or something.

The stories and experiences shared by Participant A, Participant B, Participant C and Participant D highlight how disabled/racialized prisoners have been constructed as Other, deviant, threatening, violent and non-human. These constructs are a necessary precursor to the existence of carceral sites, as the operation of incarceration requires an archetype of “who” should be incarcerated. Moreover, these constructs also illustrate how professionals and systems that inflict violence have relied on these constructs as rationale, simultaneously positioning themselves as unlike prisoners-ie, morally superior, good, civilized, lawful.

An Authority on Violence – What?

Health Records and Surveillance

The criminal justice system, psychiatry and medicine in general have been identified by the participants as working together in the initial “conviction” process and then subsequently inside of prisons to keep them in the system. The participants highlight how the constructs of disabled/racialized prisoners have been used to measure how “fit” “well” and “corrected” participants are to be “released” back in the public. Participant A, for example, explains that in addition to the absence of harm-reduction supports on the inside, there is a surveillance of disabled prisoners who are living with addictions and a fear of disclosing drug use to a health care provider as it will be used as a barrier for being “released” on “good behaviour” during parole hearings. Participant A and Participant D discuss how healthcare providers that work “on the inside” are employed with Correctional Services of Canada and therefore are only working to “keep them in jail”, with no protection of their confidentiality.

There is also a worry the healthcare that you access will be used against you because it has done been done before in prison. So if you access it they say oh why did you access that kind of thing? and they will bring it up in your parole hearing – Participant A

They (healthcare providers) document every single thing and they can essentially use it against you and it goes into a report. Your parole officer, all of the correctional officers, they can all see it and everything that you say ends up being turned against you as like a risk factor. So that, so if you're trying to get parole or trying to get out on your stat. release or you have your parole conditions, or leaving an abusive relationship they say you're at a greater risk for violence, if you have a history of addiction then you're at greater risk- Participant D

Racialized/disabled prisoners are targeted and under constant surveillance for “harm” and “threat”. Participant B highlights that Black prisoners who are living with an addiction or are living with schizophrenia are more likely to be “observed”. Participant B explains that healthcare providers share this information with prison guards and officers and this is often why he was targeted and punished. Participant B explains:

If you get caught smoking weed or you get caught making beer or brew you got to go to court, it's called major court and if they find you guilty in major court they could ship you to another institution, they can take you, there is a drug program there... they hold a meeting and they ask you where you get the drugs from and they ask you what you're doing with the drugs.

Participants B and D echo that “getting caught” in possession of marijuana results in harsher punishments for those living with an addiction or are racialized and disabled, with their health records being used “against” them to keep them in prison or further isolate from the rest of the prison population through solitary confinement or through being “shipped off” to a maximum security prison. Participant B and D explain:

the analysis is a guy, a jail guard, he comes into and has you in a room and he wants you to urinate in a jar, so you urinate in the jar and it comes up dirty for weed or hash or coke they uh they lower your rate of pay and when they lower your rate of pay, then

you get paid less and it's really bad because you can't make too much money unless people are sending you in money. Or they cut you off of how much you can spend at the canteen line, they'll go make you spend only 20 bucks and they'll do all kinds of things to you because they don't want you smoking weed – Participant B

It's like you have to get strip-searched more often you have to get your analysis has done more often there is more you have to get up really early before everybody and go in the winter it's just uncomfortable unsupportive all together”. – Participant D

Participants A and B also highlight how their health records are often used as “evidence” of their criminality and inability to “change”. Health records and private medical information are shared with parole officers and used to suggest that prisoners have not rehabilitated to a certain standard and as a consequence must return to and stay in prison. Participant A explains that environmental barriers to meeting parole conditions are often individualized and attributed to their addiction and “used against” them to show that they are still “just an addict”:

your parole officer says you have to go to AA or else if you don't you'll go back in jail. So it's not just the institution but on the second level which is provisional ... it's like you have to take a bus for 3 hours or like 2 hours to get your AA meeting and it was just like some people would spend their whole day taking a bus or like they could be working and doing other stuff you know.

Participant B, explains that as a Black man and someone living with schizophrenia he is often perceived as having “behavioural problems” with the officers and this is also used to prolong his time in prison or punish and isolate him in solitary confinement. He explains:

The federal system is not going to play around with me and they gave me a lot a lot of time and I'll be sitting there but stuck on psychosis, because of that I'll be getting a longer sentence and people don't care and people walk all over me.

Participant B adds that he was imprisoned for breaking entry into private property but has minimal memories of doing so, was not intending to “harm” anyone and was very “scared and nervous” himself as he was experiencing psychosis during his arrest. Participant B highlights how the criminal justice system relies on the constructs of disabled Black men as “dangerous” and “threatening” as justification for restraint, confinement, removal and segregation

the courts are going to get tired of it or they're going to find you a place where you can associate and stay [prison]there, and eventually you'll stop what you're doing, that's what they told me.

Participant B adds that he has been in and out of the prison system since the age of 12 and is now nearing his 50's. Participant B's experiences illustrate how the criminal justice system uses prisons to lock racialized/disabled people in cages and presents these cages as a place for them to “associate”, as Participant B put it, to remain in for the majority of their life under the guise of “stopping” their “criminal behaviour” and “criminal activity”.

Forced and Coerced Medical Treatment

A derivative of being constructed as non-human, exemplified as “being treated like animals”, is what the participants described as “being treated like guinea pigs” for medical and psychiatric experimentation. This experimentation is rationalized on the basis of the criminality and disposability of prisoners, who are less than human. Participant D explains:

Being treated like a guinea pig with all kinds of medications, that was difficult and frustrating because there were some meds that I felt like a zombie, I couldn't think very clearly so that was uncomfortable and frustrating

The participants discuss the use of force, coercion, punishment and overall disregard of their humanity in relation to the prescription and coercion of medication and “treatment”. Participant

D gives the example that they were often “treated like an addict” looking to “abuse drugs” when asking for muscle relaxers for their chronic body pain. Participant D explains:

They [doctors] just cut me off my muscle relaxants and put me on psychotropic medication that I didn't really need... they over prescribed certain things and take away certain things.

Participant C similarly explains that Black prisoners, especially those with mental health are often coerced into taking “psychotropic drugs” on the basis of being “violent” and “out of control” and are met with punishment and further isolation for refusing. Participant C adds that prisoners who are perceived as having “behavioural issues” “emotional issues” “visceral reactions” and “mental health issues” are coerced into taking psychotropic drugs “to slow them down and dope them up”. He explains:

The doctors prescriptions seem to me to be indifferent, only to serve the system to control you and manage you, it's how best to manage you and making sure that you don't die in there because there is possible exposure there and because they understand liability they're worried about exposure.

Correctional doctors have what's called a pharmastore .. they have a list of medicines that they prescribe, okay and for example if they say “use it” you need to use it, especially in the dangerous offenders section.

Participant C, makes the distinction that healthcare providers are more likely to coerce and punish Black prisoners and deny them access to adequate healthcare. He explains:

Had I been a blond-haired, blue-eyed, rich, white guy, the doctor would have sent me to a specialist because he would be worried about his liability exposure and the family because they hold them accountable, but he didn't feel accountable to me, so he said ahh I'll prescribe him that.

The participants also discuss being given outdated or unreliable treatments that have negative side effects, to harm and “deteriorate” prisoners, purposefully. Participant C, explains that he was neglected and mistreated medically, as he is criminalized on the basis of being Black and someone living with HIV. He feels that healthcare providers, guards, particularly those who are women had a targeted “hatred” towards him because they believed that he “was out there having sex with women and harming people” while living with HIV. Participant C explains that this belief was the reason he was given medication that resulted in harm to his genital area, as an intentional attempt to “deteriorate” his body and punish him. The criminalization of HIV, of Black men and the notion of the “dangerous” prisoner causing “harm” to society was used to justify the absence of support, access to healthcare, as well as denial of access to a specialist as punishment. This was described as coercion, as he was forced to take medication that had negative side effects due to the lack of alternative options available while locked in an institution.

The construct of disabled prisoners as non-human and thus undeserving of dignity and agency is represented by the disregard for the supports identified by prisoners and sole recognition of treatments identified by healthcare providers. For example, Participant D explains that due to having the label of an “addict”, “they don't want to listen to anything that you say”, “they just decide what they want and they ignore your medical history” and “you are not given any choice for treatment it's just what they think is best”. Participant B, similarly explains that if he is looking to access mental health support on his own terms he has to wait five or six months and psychiatrists only see him “to make sure my mind was stable”. Participant C explains that suicidal ideation and attempts to access mental health supports is seen as a “evidence” of “instability”, when initiated by participants, but seen as “help” when forced onto prisoners by psychiatrists. This contradiction highlights the true function and motif

of medicine in the prison system, which relies on “psychologist and a psychiatrist to catch you and lock you up for the rest of your life”. Participant C explains:

solitary confinement exacerbates mental health it doesn't mitigate it or help in any way, that makes it worse, right? This is my experience with people with mental health issues, it was not just one person, it was not just the Black guys, it was even the white guys sometimes, those with mental health issues.. they were just really indifferent if you had mental health.

Participant A, also explains that attempts to access support for eating disorders were belittled and disregarded as it was identified as a “need” by the prisoner and not what healthcare providers believe the prisoner “needs”. Participant A and Participant D both draw on examples from mandatory programming, one called Women Offenders Management and Intervention program which try to “help” prisoners “change”. The program is focused on how the women need to “fix” themselves, develop emotion regulation skills, and lacks what Participant D explains as attention to “structural or systemic issues” such as violence against women. Thus, the programs that are offered are not about care or mental health, they are about “fixing” the “offender”. Participant B also explains that there was no real support for schizophrenia and when experiencing psychosis he was unsure what to do or who to ask for help. Participant B adds that he often asked to be sent to solitary so that he is alone and safe. He also explains that despite solitary being a frightening space he asked to be sent there out of a lack of options.

Participant B explains:

I asked them to take me to the hole and if they don't, I said I will commit suicide. When you say you're going to commit suicide they take you out of your surroundings and they put you in the hole and they put a gown on you and it's fire resistant, that's a fire resistant gown ...you can't rip it, you can't hang yourself with it, nothing. They have you there,

they monitor you and they write down what you say or if you're talking to yourself or something like that. Some people, some people go there because they want to get shipped out or because they want to.. I wanted to feel safer because in my mind I wasn't safe, in my mind I thought people were going to get at me.

Participant D also explains that on one hand they were being forced into “treatments” and “programs” to “help” them but basic needs are not met on the inside for folks with disabilities.

They explain:

the system as a whole whether it's provincial or federal is not set up any way to support people with any kind of disability whether it's visible or invisible...Lots of times there wouldn't be wide enough doors or a space for a wheelchair for example or being able to shower and stuff. And when you're looking at invisible disability and mental health issues every aspect of the system is designed if somebody doesn't really have mental health issues you are going to have some by the time you're going to leave

Participant D adds that “there is like an extra layer of issues for women” and provides the example that requests for women healthcare providers were disregarded. They explain, “if you suffered sexual assault at the hands of a man then it's like an extra layer of trauma in there and it's very difficult”. As a result, they explain that they often refused treatment because it was provided by male doctors, which is retraumatizing. They explain: “there are times where I didn't bother for like a week or two because they take away all your control, you don't have control over your own body or on medicine your own health care”.

The participants highlight how healthcare providers rely on and reproduce constructs of disabled prisoners as non-human, as “guinea pigs” and as undeserving of dignity, respect, agency and care. This is represented by the forced and coerced treatment, mandatory “rehabilitation” programs that blame and dehumanize prisoners and complete disregard for the

health supports and resources identified by prisoners and overemphasis on the “treatments” mandated by healthcare professionals.

“The Gang in White and The Gang in Blue” – Participant C

Each of the participants touched on the concept of “us against them”, highlighting the criminal justice system, psychiatry and medicine as working together both to “convict” disabled/racialized prisoners and “keep them locked up”. Participant C describes healthcare providers, naming nursing, doctors, psychologists and psychiatrists as “the gang in white” as working with the “gang in blue” naming police officers, prison officers and guards to punish and abuse the “gang in orange” referring to prisoners. The participants highlight how police and prison officers, guards, judges, lawyers, healthcare providers and psychiatrists all rely on and actively construct disabled/racialized prisoners as violent, criminal, deviant, immoral and undeserving of care. Participant C explains that the criminal justice system:

Use the psychologist and a psychiatrist to catch you and lock you up for the rest of your life ...if they want to name you a dangerous offender or a long term offender it's the psychologist that they use to do that. So it's best not to build a psychological profile because these are psychologists that betrayed the Hippocratic oath and they have sold their Hippocratic oath to the government and systems of the government.

The participants highlight how doctors, nurses, psychiatrists, social workers and healthcare providers are employed to justify how the prisoner is unwell, uncontrollable and therefore unfit to be in the public, as they are “threats” to public safety. Participant C describes this as a “culture of nepotism”:

So the doctors the guards they're all like family and *they all* want to beat you. And so you figure it all out, how good is a quality of care under a cesspool of nepotism, who's going to take responsibility when one of the husband beats the shit out of one of the

guys in the cell and the wife of the husband is the nurse? They're all married and have picnics together and a code of silence together. You see what I'm saying? So that lack of independent accountability.

Participant C makes the connection that he is criminalized for living with HIV, for his mental health, for being Black and is punished at the hands of *everyone* in the prison system with no one to take accountability due to a “code of silence” that is shared between the “gang in blue” and the “gang in white”. As highlighted with other participants, this “code of silence” is not limited to those who work “inside” the prison itself but also extends to those who work for the state and protect the interests of the dominant class. Participants describe “shelters” and mental health institutions as serving to have them “shipped off” to prison when they are “tired” of them. Participant C adds that lawyers “representing” prisoners is a “lie” and gives the example:

At the same time that all of this is going on, my lawyers had a conflict of interest, a very large financial conflict of interest because they reached the procedure and told my lawyers before I was convicted that if I was convicted they would get a dangerous offender designation. Now the dangerous offender designation is a two-year hearing. That made it financially in my lawyers best interest to have that two-year hearing because he can make fifty two hundred thousand dollars in that 2 years... they were seeking a dangerous offender designation for my conviction, which made it financially in his best interest to see me convicted.

I was forced to plead guilty. I was given a choice, 90 days or dangerous offender and never get out of prison. What would you take? 90 days in prison or never get out of prison?

Participant C's experience illustrate how the criminal justice system produces and uses constructs of Participant C as criminal, violent and “threatening” on the basis of him living

with HIV, his mental health and him being a Black man. This case highlights the relationship between law, psychiatry, medicine and the criminal justice system as working together to have him “convicted” as a “dangerous offender” or to attain a confession of “guilt”. The participant’s experiences are exemplary of the Prison Industrial Complex- a carceral network contingent on and upheld by various systems and institutions to bolster the operation of incarceration and removal.

Systemic Erasure and Silencing of Prisoner Voices- How?

Participants highlight how incarceration serves to erase prisoners from the consciousness of the wider public through the operation of removal. Central to the erasure of prisoners is the violent tools and tactics employed by the dominant to silence those who have been deemed inferior. The criminal justice system, psychiatry and medicine not only have the power but also the legitimacy to justify and authorize violence and punishment to any resistance, thus suppressing prisoner voices. A reoccurring theme highlighted by participants is the extensive barriers that exist for prisoners to communicate with “the outside”, leaving them “completely at the mercy of the gate keeper and the person internal and that right there, is you know, a type of abuse”. The participants highlight how prisons are in far off locations, presenting barriers for communicating and interacting with the “rest of society”. Participant C describes this as a form of “death by prison” as the prisoners history, life, identity, stories, experiences and connections with “the outside” are erased. Similarly, participant B also highlights the extensive barriers to communication and interaction with “the outside” as a tactic to have society “forget” about prisoners. Beyond incarceration, various tactics are employed to limit any evidence of prisoners. A reoccurring example outlined by participants, is that letters, a primary method of communicating with family members, friends, community and loved ones are often “lost”, which participants indicate is code for being “thrown out” by prison

administration. Prisoners are both figuratively and literally silenced as there is an active agenda to repress access to the already limited methods of communication with “the outside”. Participant A highlights the importance of having connections with “the outside” particularly to access mental health resources or advocacy as there is mistrust with healthcare providers who work for the prison. Participant A explains that they “wish” they had access to outside suicide hotline as they could not trust any of the psychiatrists or social workers on the inside who send them to solitary when seeking support. Participant A provides another example of how prisoners are silenced:

Phone calls are like \$0.13 a minute and you can rack up bills pretty quick and if you don't have family members sending you money then you're kind of out of luck, or a lot of family members spend their money on coming to visit them... some people have to take a bus to come to prison to visit their daughter. Like the cost associated with communicating with your loved ones are like astronomical

Silencing communication illustrated through the inaccessible cost of communication is highlighted as disproportionately impacting prisoners who do not have money, may come from low-income families and may have mental health concerns. Participant C also highlights how the barriers to communicating particularly impacts racialized/disabled prisoners who are not only denied the supports that they need on the inside but are also forced or coerced into “treatments”. He explains that he was deemed “disposable” and none of the healthcare providers on the inside felt “accountable” him. He was only able to access a specialist after calling the HIV & AIDS Legal Clinic Ontario and finding someone to advocate on his behalf. Participants also discuss the erasure of the injustices, violence and atrocities occurring inside of prisons as systemized to also erase the prisoners lived experiences and histories. Participants describe the notion of being “stuck” as there is a systemic process of elimination where any attempt at seeking accountability is met with suppression, illustrated by the fact that most

participants have their filed grievances “lost”, which is once again is “code” for being “thrown out”. Participant A describes this as “top-down racism” as grievances filed by racialized people are frequently disregard. Participant A gives the example that grievances for racial discrimination filed by the “Black Women of Diversity Group” are often “lost”, but participant A adds “like we know you just got it and threw it out”.

Suppression of voice and silencing is often carried out through the punishment of any resistance by prisoners. Disabled/racialized prisoners explain being depicted as violent or having an “outburst” when resisting punishment and this notion is used to further justify restrain, isolation or further punishment. Participants also indicate that racialized/disabled prisoners are targeting by guards who intentionally instigate them to “get a reaction”, by which the prisoners are then sent to solitary for or abused. Any attempt at self-defence by racialized/disabled prisoners is labelled “assault” and used to further the notion that these prisoners are uncivilized and “need to be controlled”. Participant C gives the example:

you can't talk back to the guards if they tell you to stand the fuck over here you have to... they say “what oh yeah come over here... and they lock you up and put you in the cell and they piss at you they take you down to the hole.

If I come back, they charge you with assault, and that will justify the beating that you get, “oh he got that beating because he assaulted one of the officers”.

The threat and use of violence, abuse, punishment in solitary, suppression of accountability measures and extensive barriers to communication with the outside are all tools and tactics used by the prison system to suppress resistance and erase prisoner voices.

The Code of Silence

“It is a complete, across the board, unwillingness to take accountability for anyone wearing orange, so we we’re living under a type of autocratic system, it's an autocracy in prison” – Participant C

Participants discuss a “code of silence” that exists amongst healthcare providers, prison officers and guards who are “loyal” to protecting one another, using their collective powers as another force to silence prisoners. Participants address the concept of “us against them”, whereby prisoners are fighting against multiple institutional powers simultaneously. Participant D gives the example that healthcare providers often make mistakes, giving out the wrong medications. Prison officers, will then accuse prisoners of “abusing drugs”, document it and use it to create barriers to release during parole hearings. Due to the absence of confidentiality, prison guards have access to participant D’s health records which indicate they are living with an addiction. Participant D explains that they are often penalized by prison officers for mistakes made by healthcare providers, but both systems work to protect one another at the expense of the prisoner. Participant D explains:

they found these meds in my room and I got an institutional charge, so that goes on my record, I didn't end up applying for parole I just got out on my statutory release but if I would have tried for a parole it would have been a strike against me and they don't really listen to reason.

Participant C describes this code of silence as emerging from a “culture of nepotism”. He explains:

Through the lack of accountability and culture of indifference that the guards put out, carries over to the nurses, the nurse is turning a blind eye to what the guards are doing, most of them are in relationships with the guards and a lot of them are wives of the guards or in relationships with the guards, right, so the prison system it does that, it's full of nepotism, if your dad is a boss you're getting the job, there is these dynamics of these relationships by itself creates discrimination and an us-against-them mentality instead of being accountable.

As a result of this “nepotism” the participants highlight how there is “no real accountability process” and healthcare providers and prison officers, guards etc can “walk all over” prisoners, silence and erase their experiences through suppression and “autocratic” measures. Participant C gives the example that Black and disabled prisoners are seen as “dangerous” and therefore prison staff demand that they need to be protected from people like him. Under the guise of “protection” and “safety” for prison staff, they are no longer required to wear identifying tags with their name and instead are only required to wear a number. Despite this, Participant C explains that none of the staff in prison wear their identifying tags with their number and they all “cover up” for each other. The refusal to wear any identifying information is also to silence prisoners as there is no accountability measures that prisoners can pursue. Participant C explains:

they say they have safety issues they are worried about, and that's why you have a number, they don't even have their name tags anymore they have number tags to mitigate that exposure to any danger if somebody could find them with their name, and they refused to even wear their numbers to be identified so that's why I say there's a culture of indifference.

I'm saying everyone across the board are still complicit to the fact that nobody wants to be accountable, even the good ones who cared, right, wasn't wearing their ID tags you feel me, they cared and everything but they care to an extent, but you knew damn well, don't push it too far because they're still going to ride with the guard.

The various tools implemented at every level by every system that interacts with the prison is used to silence the voice of, and erase prisoners. The mere operation of imprisonment in itself has been highlighted as a tool to erase prisoners from wider society. This operation cements the agenda of erasure through the tools of violence and punishment that create barriers to communication with the outside, through the erasure of accountability measure attempted

by the prisoners, through punishment for resistance and through codes of silence that are shared by all those who interact with and serve the criminal justice system and are protected by it at the expense of racialized/disabled prisoners.

Chapter 6: Discussion – Why?

Central to the objective of my thesis is recognition of the historic processes that forged the present world order for the preservation of coloniality and white supremacy. I want to position my “findings” within this framework, not as “new”, but as illustrative of an ongoing project of removal. Hence, prisons are recognized as a material site of violence, as well as an abstract site that functions to remove and confine racialized and colonized peoples in order to preserve global colonial hegemony and empire expansion (Davis, 2011). Subalternity as a primary data analysis method used in tandem with Joseph’s (2015) theorization of confluence have facilitated contextualizing “who” the subaltern is, which is the first theme I explored. This theme was a central point of reflection as I sat with Spivak’s (as cited in Deivasigamani, 2019, p.4) argument that “the subaltern is not just a classy word for ‘oppressed’, for [the] Other, for somebody who’s not getting a piece of the pie”. Here, an analysis of colonial violence, expressed in the confluences of the criminal justice system, healthcare/medicine and psychiatry, allowed me to understand the subaltern as a category that *historically* existed and exists outside the *colonial* order, at the margins of the forces that creates racial hierarchies that constitute the subaltern as such. The subaltern is quintessentially represented by racialized/disabled prisoners who both literally and figuratively exist *outside* of the hegemonic order. The very prototype of who prisoners are is a necessary construct for the presence of systems that imprison. The sub-themes highlighted under *The Colonial Construction of Prisoners* are reflective of the colonial manufacturing of the subjectivity of racialized and colonized peoples -represented by the subaltern- through colonial violence (Dardar, 2019). In *Discourse on Colonialism*, Cesaire describes colonization as an equivalent to “thingification”, the violent ways in which the “who” is constituted by the colonizing dominant class (Cesaire & Kelly, 2002, p.42). Thingification is a process of dehumanization, of making objects, “things” of colonized people, as ‘bodies’ or sites whereby coloniality is expressed. One

illustration of this, is the thingification of colonized people for the function of defining who the colonizer is, colonized people then, serve as a mirror, for the colonizer to express/see itself as ‘unlike the Other’ (civilized, moral, White, Christian, Enlightened) (Cesaire & Kelly, 2002). Similarly, the logic of Orientalism is an extension of ‘thingification’, whereby the colonial dominance of the West, identifies, subjectifies and constructs the Other, as uncivilized, barbaric, sub-human, deviant etc. (Said, 1979). The logic of Orientalism is not limited to the Occident vs. Orient geographically: rather, it also refers to a racial hierarchical division. Extrapolating from his example of the construction of the ‘Orient’, the logic Said highlights illustrates the “thingification” of racialized and colonized peoples as a necessary precursor to their subjugation via imprisonment. Said (1979) explains:

Along with all other peoples variously designated as backward, degenerate, uncivilized... Orientals were viewed in a framework constructed out of biological determinism and moral-political admonishment...Orientals were rarely seen or looked at; they were seen through, analyzed not as citizens, or even people, but as problems to be solved or confined (p. 207).

Participants identified numerous constructs of disabled/racialized prisoners as “bad”, “immoral”, “unworthy” “criminal” “violent”, demonstrative of a historic process of the ‘thingification’ of racialized and colonized people. Not only do the aforementioned constructs serve to dehumanize prisoners, subsequently rationalizing violence, but they also serve as a space for the dominant, to also define itself as the opposite, ie. good, moral, worthy, non-criminal and civilized. The constructs identified by the participants are representative of colonial eugenic logics that have constructed differences and subsequently hierarchized it on a racial, order. The subaltern, i.e. prisoners in this case, is a construct that is inherently about racial inferiority. The participant’s identification of disabled prisoners as “out of control” “just addicts” having “violent outbursts” and as “animals” is not merely an expression of “ableism”

in the system. These “risk factors”, sustained through discourse of ‘objectivity’ and ‘science’ have been defined, measured and constructed on racialized bodies. Participants being identified as having “risky behaviour”, “outbursts” and “out of control” are analogous to Orientalist archetypes of the Other as savage and deviant- also a “risk” that needs to be controlled. Within this, emerges a ‘pathologizing’ of racialized, colonized people embedded in narratives of ‘disability’ that fulfils a colonial need to “intervene and manage” “to enforce and discipline and regimentation” ultimately, “satisfying the coloniser’s inspecting gaze” (Gretch, 2015, p.10). This construct of risky people and risky behaviour could be comparable to what Gretch (2015) describes as a “colonial obsession and fears of the ‘monster’ (deformities notorious in tales and stories including biblical ones), encapsulated in the colonised” (p. 10) As identified by the racialized participants, being labelled as “violent” and as “having behavioural issues” was used as a warrant for their restraint, abuse, being sent to solitary confinement, being denied healthcare and being punished. Their experiences were not discussed as occurring on the basis of disability, or the basis of race, or the basis of being a prisoner, alone, or in ways that could be essentialized and identified as separate. Rather, it is the very construct of criminality, deviance, fitness and wellness as intrinsic to the construction of racial inferiority, by which prisoners were then subjugated.

Understanding “Who” – Subalternity and Implications

Recognition of “who” the subaltern is, as a historically constituted political category contextualizes prisoners and prisons (as a project of removing racialized/colonized people) within the global project of white supremacist empire expansion (Davis, 2011). This recognition is a fundamental entry point to my analysis of the violence discussed by participants. Prior to highlighting “what” the violence and injustices are, and “how” they are maintained, it was vital to recognize who, historically, has been deemed worthy of said

violence. Subalternity as a data analysis method facilitates an understanding that recognizes the fluidity of subaltern identities, challenging an inorganic separation between analysis of disability, race, criminality, coloniality, power, hegemony the local and global, history and the present (Parekh, 2008). Consequently, subalternity positions the construct of “who” prisoners are as not solely based on temporally static categorizations of ‘identity’. Instead, it accounts for the historical processes by which ableism/sanism/racism secured subalternity and subsequent hegemony, through colonial violence. The significance of understanding “who” prisoners are, in this research and in wider discourse, is primarily rooted in which “voices” are privileged. Recognition of subaltern voice serves to “(re)produce knowledge forms that are in sync with the histories, cultures, languages, and cosmologies of the oppressed”. Subalternity as central rather than peripheral, privileges the lived experiences and histories of subaltern groups that are erased and undocumented in dominant historiographies. Included in this, is “critical alternatives” that confine and stabilize fluid subaltern identities by compartmentalizing and essentializing race/disability and omitting subaltern histories. Ultimately, dominant historiographies only permit and reproduce non-recognition of “who” prisoners are. Beginning from subaltern groups as a vessel to understand “who” is and has been historically deemed worthy of confinement facilitates resistance to dominant recorded (acknowledged) histories by recording (acknowledging) the erased histories. Fraser (1990) (as cited in Darder, 2019, p.15) describes *subaltern counterpublics* whereby “members of subordinate social groups invent and circulate counterdiscourses, which in turn permit them to formulate oppositional interpretations of their identities, interests, and needs”. This framework highlights the significance of subaltern recognition, so that it is prisoners who are articulating “who” they are (identities, experiences) allowing for their “oppositional interpretations” to be known, recorded, acknowledged.

Prisons as a Civilizing Force – “What” and “How”

Central to the construction of who is criminal, immoral and uncivilized, is the construction of who is lawful, moral and civilized. The logic of Orientalism underpinning colonialism as a “campaign to civilize” is replicated in prisons (Cesaire & Kelly, 2002, p.40). Participants describe this as being mandated into “correction” programs, being assessed, regulated, monitored and punished by an authority who are responsible for defining/enforcing “correction”. Within that, is the formation of institutions and systems to establish and preserve said law and order, by removing those who are a threat to this order. This is illustrated in the confluence of logics that underpin the operation of the healthcare system, psychiatry and the criminal justice system. Participant C expressed this as “the system” (the criminal justice system) relying on “psychologist and a psychiatrist to catch you and lock you up for the rest of your life”. The confluence of multiple systems and institutions for the preservation of an “order”, necessitates attention to what the nature of this “order” is? Who is legitimizing healthcare, psychiatry and the criminal justice system as authority over the preservation of this order? An anti-colonial lens situates the confluences of the identified systems and logics underpinning incarceration as central to the security of a colonial order. As such, incarceration as a practice of removal is positioned as central to the operation and structures of colonial governance (Thobani, 2007). Prisons as an essential structure, as a correcting force for the “criminal”, as necessary for “the good of the wider public” are recycled colonial tropes. Mbembe’s (2003) theory of *Necropolitics*, in exploring how the politics of terror and violence operate in relation to colonial ‘sovereignty’ can be used to draw parallels between prisons as an expression of colonial governance in Canada. Contextualizing violence, expressed as the prison itself as well as the violence permitted/exercised through healthcare, psychiatry and the criminal justice system is tied to what Mbembe (2003) describes as a “divine right”, driving the fundamental claims of the legitimacy of colonialism (p. 27). Mbembe (2003) explains:

Violence and sovereignty, in this case, claim a divine foundation: peoplehood itself is forged by the worship of one deity, and national identity is imagined as an identity against the Other, other deities. History, geography, cartography, and archaeology are supposed to back these claims... In this case, sovereignty means the capacity to define who matters and who does not, who is *disposable* and who is not (p. 26-27).

Looking at prisons, nation-state formation and coloniality within this framework highlights the colonial logics underpinning the right to not only define “who” is criminal, who is disposable, who is deserving of violence, but also the “right”, the authorization and legitimization of exercising violence. The “right” to monitor, regulate and punish prisoners is permitted under the pretence that these institutions, systems, professionals are authority driven by science and ration for the mission of “law and order”. As outlined, both the law and the ‘order’, as well as the systems that enforce it only serve to preserve coloniality. This is explained by participants who indicate that social workers, psychiatrists, nurses and doctors use their health records “against” them as evidence of criminality, failure to “rehabilitate” “change” or be “corrected”. Here, returning to the logic of Orientalism highlights how the process of “thingification” is not solely about the subject of thingification but also about solidifying the power/legitimacy of colonial philosophies, systems and institutions that engage in it. This is quintessentially represented by the concept of ‘corrections’ - correction services of canada, correction doctors, correction programs-. As outlined by the participants, for example, many of the programs are “church-based”, particularly privileging Christian notions of “goodness” as the baseline measure for prisoners “rehabilitation”. Participant A gave the example that they are only deemed “corrected” when completely abstaining from drug use, a standard outlined by the 12-step program which they describe as “focussed on God”. Correction programs as civilising forces and the archetype of “corrected” people as Christian, law-abiding, civilized, white citizens is a historically forged standard, revealing the colonial archetype of an ideal citizen

(Thobani, 2007; Joseph 2017). This trope is also historic, rooted in what Cesaire describes as a ‘dishonest equation’ whereby “Christianity = civilization, paganism = savagery, from which there could not but ensue abominable colonialist and racist consequences” (Cesaire & Kelly, 2000, p. 33). Emerging from this is eugenic logics that have conceptualized racialized people as primitive, subhuman, savage, barbaric etc. rationalising colonial violence and positioning ‘civilising forces’ as an “integral instrument in the establishment, extension and expansion of white supremacy colonial capitalism” (Rabaka, 2014, p. 122).

Other participants alluded to a form of surveillance through the documentation and recording of addictions, use of drugs, mental health, perceived behavioural and emotional “violent outbursts” in order to “keep you locked in”. The forced “treatment” and mandatory “correction” programs focused on teaching participants things like “emotion regulation”, how to be “prosocial”, how to make the “right choices”, as well as punishment, restraint, abuse and segregation in solitary confinement, have all been justified, sanctioned and authorized on the basis of “expertise” via biomedicine (Joseph, 2015). Joseph (2015) describes the importance of attending to the objectives of colonialism in the “goals, means and outcomes” in how law is instituted, and in how authority is constructed and in the “hegemonies of expertise” (p. 194). Particularly, Joseph (2015) brings attention to how

ideas symmetrical to the colonial projects of developing mechanism of identification to establish hierarchies (racial, mental, gendered, abled, etc.), the deployment of dehumanizing discourses, and a reliance on eugenic morality, continues to achieve their mandate to perpetuate regimes of authority, disciplinary knowledge, and subordination (p. 194).

In this sense, a “eugenic morality” and “expertise” is an expression of the “divine right” addressed by Mbembe (2003). As a result, doctors, social workers and psychiatrists are

responsible for dictating how prisoners need to be “corrected” and “treated” via forced treatment, mandatory programming, setting the conditions for parole, etc. The proposed neutrality and objectivity of these institutions and “caring professionals” then, are also an expression of “western Rationality”, which Mbembe (2003) describes as the “syntheses between massacre and bureaucracy” (p. 23). As outlined by the participants, the true function of these “helping professions” are “to not let you out, as opposed to let you out”. The Participants highlighted the hypocrisy of caring professions, who, despite the title they carry, deny disabled prisoners basic needs- such as a pillow and a mattress while living with chronic back pain, accessing a specialist for HIV care and support and being told that eating disorders are not serious enough, being given outdated medication, being experimented on with numerous medications, and for authorizing the isolation and segregation in solitary confinement on the basis of mental health. The hypocrisy outlined by participants reveals that the primary function of healthcare is not “care” but rather surveillance via the avenues of medicine and psychiatry, punishment through health records as evidence of criminality and for exercising control masked as rehabilitation and help. Comparably, Cesaire explains that colonialism seeks to mask it’s violence as “about progress, about ‘achievements, cured diseases, and improved standards of living’” (Cesaire & Kelly, 2000, p.42). Prisons, as sites where coloniality is expressed will always re/produce this hypocrisy because as with colonization there is “no human contact, but relations of domination and submission” (Cesaire & Kelly, 2000, p.42).

Carceral spaces are central to colonial governance, that relies on the removal and elimination of racialized and colonized peoples (Thobani, 2007). Each participant highlighted the different avenues and tools of silencing and suppression that exist “on the inside”, often targeting racialized/disabled prisoners. Racialized prisoners, who resist force or seek accountability are punished by officer and psychiatrists who use medical language to justify

restraint, abuse, isolation and forced medication. Prisoners who file grievances, looking to address the absence of medical care or support are not addressed/responded to, with the majority of participants discussing that their grievance are often “lost” which is “code” for “thrown out”. Along with the numerous examples highlighted by participants in the findings, there is an active effort to silence and ultimately erase prisoners.

Understanding “What” and “How” – Implications and Subalternity

Anti-colonial theory in general and subalternity in particular can be drawn on to contextualize the function of silencing and erasure (Darder, 2019). Erasure in a colonial context is a manifestation of the colonial imagination of a white supremacist order, wherein the “Other” does not exist, neither abstractly or literally (Thobani, 2007). The criminal justice system, through prisons, employs eugenic practices of removal, genocide and elimination to fulfil a colonial imagination; reproducing the logic of *terra nullius*, that nothing existed or should exist outside of what is ‘white’. The trajectory of this logic is continued in the erasure of subaltern groups by hegemonic forces. Within this framework, ‘hegemony’ could be understood as *colonial* hegemony, and the erasure of subaltern groups by hegemonic forces is a colonial project (Gramsci, 1971; Louai, 2011, Spivak, 1988). Correspondingly, the denial of subaltern political agency and participation in ‘local history’ preserves the ‘legitimacy’ of colonial states via the denial of subaltern existence. Correspondingly, the operation of incarceration ie. confinement and removal of subaltern groups, is positioned as fulfilling the colonial imagination of white supremacist hegemony. Thobani (2007) describes the foundation of canadian ‘nationhood’ as predicated on a notion of the lawfulness of early settlers who are “Christian, law-abiding and industrious, the embodiment of Western civilization”, unlike the “lawless heathens and warring tribes” that were Indigenous people (p. 34). canadian nationhood relies on the curation of a mythical canada, a nation supposedly based on law, order

and negotiation, and as a peaceful evolution -which is now known as liberal democracy (Thobani, 2007). This contextualizes the colonial order as represented by ‘the law’ and subaltern as that category which exists outside the ‘order’ ie. law- represented by criminalized people. Thobani draws on Achille Mbembe’s (2001) analysis on violence and colonial sovereignty:

First it eliminated all distinction between ends and means; depending on circumstances, this sovereign violence was its own end and came with its own ‘instruction for use’. Second it introduced virtually infinite permutation between what was just and what was unjust, between right and not-right, Thus, in regard to colonial sovereignty, right was on one side. And it was seized in the very act of occurring (p. 26)

Thobani’s (2007) analysis on the founding of a ‘lawful’ nation and Mbembe’s analysis on violence, law and colonial ‘sovereignty’ illustrate a confluence of ideas and systems that are expressed in prisons. The first point articulated by Mbembe is taken up as an ‘absolute right’, an assumed truth, an indisputable legitimacy to exist –this is the criminal justice system, which has established itself as the arbiter of truth and justice, and has framed itself and its legitimacy as assumed (so that, even discussion of ‘injustice’ is done so within the frameworks it provides and permits). The second point is what Thobani (2007) describes as “authorizing authority”; this is the authorization of systems, institutions, laws, policies, disciplines as sanctioned through frameworks of legality to exert violence on those who are ‘outlaws’ (via psychiatry, medicine, policing etc.) (p. 41). Participant C, for example, described this as the employment of psychiatrists and psychologists to have someone convicted as a “dangerous offender”. Silencing and erasure of subaltern groups are sustained by the “hegemonies of expertise” (Joseph, 2015, p. 194). Within this, is what participants highlighted as an ability to “get away” with violence, on the basis of being experts, representing morality, civility, law and order. The

various identified avenues of silencing subaltern voices are examples of “tools” used to achieve this process, with imprisonment itself as a starting point. The “codes of silence” and “culture of nepotism” outlined by Participant C for example, is another illustration of an omnipresent protection, enshrined in law as ‘truth’, thus “authorizing authority” (Thobani, 2007, p. 41) The magnitude and pervasiveness of the tools of erasure, is what participants described as being “stuck”, in the most literal, material way. Not only are prisoners “locked in cages” but any attempt to have their experiences known, any attempt at accountability and any attempt at resistance is met with punishment and suppression. Participant B discussed how through imprisonment he is “forgotten” and Participant C describes prison themselves as well as the violence on the inside as a “death by prison”. Mbembe (2003) analysis of necropolitics elaborates on Foucault’s conceptualization of biopower and locates it as organized upon the ‘death’, dehumanization of enslaved and colonized ‘bodies’. This framework, he explains illustrates how racialized and colonized peoples are “subjected to conditions of life conferring upon them the status of *living dead*” (p. 40). Correspondingly, ‘conferring’ death on subaltern groups through violence and erasure of voice, experiences and histories secures hegemonic histories and reproduces colonial mythologies of terra nullius, settler-colonialism and legitimate nation-building (Thobani, 2007).

Implications for Critical Research

Beginning from subaltern histories and lived experiences has the potential to facilitate “demythologizing of hegemonic beliefs, disrupt colonial epistemological structures of knowledge formation, and offer emancipatory re-readings of colonizing notions of human existence” (Darder, 2019, p.25). Centring those who exist at the margins of the colonial world order (subaltern groups) creates an inverse dynamic whereby dominant (eurocentric) ‘truths’ become marginal, peripheral and the very nature of their universality is put into question.

Within this framework, critical analysis is not preoccupied with ‘revealing’ dominant power structures as an end. Instead, it begins with the coloniality in asymmetrical power relations as assumed and recognition of the subaltern as a historic/political entity in and of itself as indicative of colonial hegemony. The significance of this approach is in the “counterhegemonic dimension” it offers, which facilitates questioning and resisting the “truths” that the criminal justice system operates from (Darder, 2019). In effect, it challenges colonial “truths” such as the “divine right” to uphold law and order, which has also “authorized authority” and bolstered “hegemonies of expertise” by privileging subaltern voices and rendering colonial/dominant truths as futile (Mbembe, 2003, p.27; Thobani, 2007, p.41; Joseph, 2015, p.194). The abuse experienced by participants at the hands of “helping professionals” and “correction services” is state-sanctioned violence, permitted within paradigms of “truth” that are comparable to the logic of colonial violence as “mission to ‘civilize’” (Cesaire & Kelly, 2000, p.21). Subaltern frames of reference, privilege ‘subaltern reason’ which has the potential to reveal the multiplicity of the histories and experiences of the “Other”, and allows us to “rethink and reconceptualize the stories that have been told and the conceptualization that has been put into place to divide the world between Christians and pagans, civilized and barbarians, modern and pre-modern, and developed and undeveloped regions and people” (Mignolo, 2000, p. 98) (as cited in Darder, 2019, p. 28).

Moreover, as the process of erasure reproduces and preserves coloniality, liberatory praxis necessitates a recognition of who the subaltern is-- in society, in history, in politics, in culture and in discourse (Darder, 2019). Critical discourse preoccupied with “revealing” and “transforming” power structures, while omitting an analysis of coloniality, is only perpetuating “false generosity” (Freire, 1972, p. 44). Freire (1972) discusses the significance of “generosity” as a central practice of maintaining oppression, as it allows the systems of dominance to remain intact. He explains “an unjust social order is the permanent fount of this

‘generosity’” (Freire, 1972, p. 44) Discussion of power imbalances or recognition, alone, is not inherently liberatory, because it neglects a vital engagement with the coloniality of power. This omission serves to obscure the magnitude of global, colonial hegemony. In *Red Skins White Masks*, for example, Coulathard (2014) problematizes the appropriation of recognition by naming critical theory that adopts recognition-based models rooted in “liberal pluralism”, that, for example, omit attention to settler-colonialism, and assert “recognition” of Indigeneity through a paradigm of settler-state sovereignty. The absence of engagement with coloniality, thus, seeks to fit recognition “via the accommodation of Indigenous identity claims in some form of renewed legal and political relationship with the Canadian state” (p. 3). Coulathard (2014) brings attention to the importance of problematizing recognition by highlighting the ways in which recognition itself could be hierarchical, positioning the state as the arbiter of “recognition” and “non-recognition”. Correspondingly, attention to coloniality, at every junction, from the recognition of who is being imprisoned to understanding the interlocking systems that work to oppress and imprison all require an attention to nation-state building and the practices of colonial governance. Recognition of the world order as colonial, leaves abolitionist praxis as the only possible entry point in pathways to liberation and ultimately decolonization. Fanon (1962) explains:

Decolonization, which sets out to change the order of the world, is, obviously, a program of complete disorder...Decolonization, as we know, is a historical process: that is to say it cannot be understood, it cannot become intelligible nor clear to itself except in the exact measure that we can discern the movements which give it *historical* form and content (p. 36).

Within the question of this research project, abolitionist praxis aimed at addressing the over-representation of racialized/disabled people in prisons does not stop at the decarceration of

subaltern groups from prisons or reducing the rates of their ‘representation’. As the world order is ‘colonial’, decolonization is a ‘program of complete disorder’, as colonization is a ‘historical process’ so is decolonization (Fanon, 1962, p.36). Accordingly, abolition (as an entry point for anti-colonial struggle) calls for dearceration of racialized/disabled from prisons *and* the abolition of prisons, systems that authorize imprisonment, professions designed to imprison etc. As was outlined throughout this thesis, racialized people have been subjugated via colonial violence prior to the inception of modern day prisons. The confinement, erasure and removal of subaltern groups was never limited to one site of violence. Therefore, without the complete eradication of the systems designed to “represent” subaltern groups, the operation of confinement, erasure and removal will persist. Comparably, as outlined in the literature review, turning to “helping professionals” such as social workers, instead of law-enforcement officers to address the rates of arrest is not a solution. An anti-colonial framework and abolitionist praxis are vital in directing how we respond to and engage with “social problems”. Thobani (2007) (as cite in Chapman and Withers, 2019, p.262) for example highlights how the welfare state in Canada is only a “characterization of the [imagined white] nation-state as shaped by the ethic of compassion” which then “became an important means by which a claim to western civilizational and moral superiority could be reconstituted” (p. 112). Abolitionist praxis prevents shifting towards soft-power law-enforcement as the solution to social problems, by putting into question nation-states, subsequent welfare-states, law, and all professions that enforce it whether a hard-power or soft-power. Failure to name the colonial agenda, how it operated and how it operates to further colonial expansion, serves to keep the system intact. Omission of the fact that the criminal justice system in its entirety as well as the settler-state it exists on has established itself as the ultimate truth, of law, order and morality through colonial violence- preserves its legitimacy. Beginning from an entry point that does not interrogate the nature of the world order as colonial, limits discussion of ‘justice’ to be measured by the very

same laws and systems that inflict violence. Moreover, centring colonialism directs conversations outside of ‘legality’ ie, if it is legal that guards abuse prisoners, if it is legal that psychiatrists share confidential information, if it is legal that prisons who ask for mental health support are sent to solitary confinement etc, as these frameworks are not useful. Instead, it questions the very nature of the law and recognizes it as written to secure coloniality, ultimately, justice cannot be served through the ‘criminal justice system’. This theoretical and practical orientation is vital to ensuring that the operations of removal and confinement are not repackaged to be semantically different (ie. as progressive, modern, social-justice oriented) while remaining tethered to the legacies of colonialism.

Circling back to Freire’s (1972) notion of praxis, ie. reflection and action throughout this thesis, directed my attention to the importance of situating my own research within this equation. Examining how disability is conceptualized, responded to and experienced by prisoners within the federal prison system in Canada was a primary objective of this project. Situating the findings and my ‘reflections’ in relation to ‘action’ highlighted the necessity of abolitionist praxis. In tandem, examining how disability/race is conceptualized in dominant discourse and in research was vital for my own process of ‘reflection’, prompting me to explore subaltern studies and anti-colonial theory. In *Decolonizing Methodologies: Research and Indigenous Peoples*, Smith (1999) offers the example that decolonial ‘praxis’ in research requires critical attention and engagement with the ‘multiple levels’ of imperialism and colonialism (p.20). Accordingly, anti-colonial studies and subaltern studies, through the integration of subaltern voices can highlight “anti-colonial possibilities” and “new truths in line with emancipatory possibilities” that are omitted and overlooked in dominant discourse (Darder, 2015, p.75) For critical disability studies, these frameworks facilitate resistance to the eurocentrism it is attached to, presenting ‘alternative’ ways of theorizing disability and race. Darder (2018) explains that “the sensibilities of subaltern voices can offer epistemological

breakthroughs necessary to forging transformative political praxis linked to bringing together decolonizing theories and practices within our fields of study and out in the world” (p.99). An illustration of this is a shift away from inorganic dichotomies between the theorization of disability/race and thorough engagement with the colonial construction of difference, instead of beginning with it as truth (eurocentrism). Friere’s (1972) notion of ‘false generosity’ suggests that pedagogy of the oppressor is “sweetened by false generosity” thus it “interferes with the individual's ontological and historical vocation to be more fully human and become desperate at the slightest threat to its *source*” (p.45). This false generosity pervades eurocentric critical studies, precisely through its commitment to overlooking the colonial nature of social problems being examined (Rabaka, 2014). “True generosity”, then, can begin with recognition of the *source* of injustices, or social problems being examined, that being white supremacy and colonialism (Freire, 1972, p.45, Rabaka, 2014). This recognition, in critical research can occur through the centring of anti-colonial analysis, in reflection and in praxis, as a process of decolonization and anti-colonial struggle.

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