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In/flammation and Self Immolation: Solidarity with Palestine Through Disability Embodiment as a Praxis of Care

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ABSTRACT

In the context of state violence, namely, the U.S. imperial support for Zionism that actively enables genocide in Palestine, self-immolation and encampments register as powerful methodologies of refusal and rootedness. This article reflects on reorienting to autoimmune disorder beyond a medical symptom to suppress or a mere metric of distress. In/flammation provides a way for thinking of the body as rebellious and disobedient, in solidarity with the oppressed and source materiality for holding historical memory. An autoethnographic epistemology contextualizes these insights as legacy. Radicalizing symptomology and politicizing traumatology show the preconditional (normative un/conscious) structures of neoliberal disavowal. These ignite opportunities to crip the doxa of biomedicalization and dream decolonial futures.

I stand in a mirror and snap a shirtless selfie, documenting myself and asking for others to see. I post and caption: “Since February of this year I’ve had the worst flare of psoriasis in 10 years. Aaron Bushnell died three months ago on Feb 25. I remember thinking as spots continued to appear: we’re on fire. It’s brought me peace, feeling into connection between auto-immune inflammation and self immolation.”

I’m out of town and in a hotel mirror that feels spacious and somber. It feels almost safer to post something vulnerable, surrounded by the impersonal and alien minimalist furnishings. I’m being very careful about what parts of myself I’m sharing. It is intimate but so far from everything.

Immediately I get messages of solidarity. There are many of us mourning. I can tell there’s some worry. There may also be some pity. Thankfully no one minimizes or changes the topic with anything suggesting “you look fine, not too bad, etc.” There’s actually this excitement. I hear from others that they want to make meaning with illness too. Like the red, scaly patches furiously regenerating and growing more visible, I feel seen on my own terms.

Throughout the spring of 2024, college students and groups launched encampments and autonomous-liberated zones across the United States and throughout the world. In the United States, protests occurred on some 140 campuses in 45 out of the 50 states, and police abetted by university administrators arrested over 3,100. Protestors demanded divestment from companies profiting from the genocide. Students and faculty disrupted graduations, calling attention to the fact that there were no universities left standing in Gaza.

The stealth of institutions manufacturing complicity for genocide stands so counter to the eruptions of resistance. Only brave disruptions of normalcy begin to expose the violence of tacit endorsement and force power structures to reveal themselves through repression measures. My psoriasis stays camped out on my skin, begging me to consider the visibility of pain, rage, and resistance as

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I write and teach on such terrain. Inflammation encourages me to acknowledge my need for community that refuses to cease fighting for Palestinian liberation.

For too long, I looked at my psoriasis solely through a lens of shame: a humiliating legacy that connects me to paternal biological figures, recruited through three generations to military offensives. I saw it as a fitting consequence for crimes against humanity, a natural consequence of exposure to mustard gas, Agent Orange, to boot-licking, to PTSD (post-traumatic stress disorder), to alcoholism. Disability scholar-activists demand we release moralism from our meaning-making (Wong, 2020).

I am thankfully in more of a position to let go of my anger and fear over having an unruly aging body that will one day die and channel it into an analysis of how power and privilege operate. My background in gerontology extends from my deep connection to Dr. Carroll Estes, who has mentored me and written extensively about freeing aging from biomedical perspectives and exposing the political economy that profits from immiseration and structurally entrenches the dominant paradigms and ideologies of austerity (Estes, 1979; Estes & Binney, 1989). Dr. Estes provides much-needed strength through a legacy of radical maternal figures, including her mentor Maggie Kuhn, who underlined the sweetness of survival: “outliving your enemies.”

The dominant paradigm for studying and treating inflammation extends from an ableist and ageist legacy. The framing of “inflammaging” (coined by Franceschi et al., 2000) proliferates biomedical approaches that emphasize positivistic empirical inquiries about aging, illness, and mortality. This focus employs data that advance ageist and ableist discourses, hallmarks of normative functionalism: what is healthy, what is dangerous, and how to master processes that render our bodies mortal and susceptible to disability. Biomedicalization inscribes embodiment with ableist logics that bind the body as a commodity to be managed. This often obfuscates social analyses of disease and disparity; as demonstrated through Marya and Patel’s (2021) book exploring the “anatomy of injustice,” inflammation can provide political sites of inquiry about inequality, epistemicide, and action toward embodying a praxis of care.

Several frameworks assist with countering functionalist dominance. Liberation health and emancipatory science perspectives resist this winnowing of reality into biomedical events to be managed, challenging access to knowledge production and confronting power structures that maintain inequality. Psychoanalytic thinking also provides opportunities for challenging the certainty that goes hand-in-hand with normativity. Warzer (2022) beckons for apophenic psychoanalysis to employ abolition skepticism in the face of the repressive explaining-away typical of dominant models of psychological theory. The burgeoning field of *mad studies* offers anti-oppressive, anti-ableist resistance to functionalist biomedical frameworks that pathologize experiences of mental distress and neurodivergence (Beresford, 2020). Mad studies challenges the legitimacy and qualifications of medical perspectives that enforce saneism by excluding survivors of psychiatric harm (Cranford & LeFrançois, 2022).

Learning to look at the world and hold ourselves, value our minds and bodies—their desires and aches—in a way that doesn’t impose imperatives of health frees us from delusions of immortality, avoidance, neutrality, and disaffection and thwarts recruitment into the doxa of neoliberal hegemony. Thinking about inflammation, especially with its connections to psychosis, through a radicalized symptomology queers embodiment—freeing the body-mind from its role as something to manage, and allowing pain, confusion, and mental distress, as well as pleasure, relief, and sensuality, to speak. Symptoms and their recognition disturb the tension between public and private, blurring the site specificity of teaching–learning that lives beyond cleaning up aftermath.

Traumatology riddled with traumatophobia impedes this responsive and reflexive attention to the politics of inflammation. Traumatophobia (Saketopoulou, 2023) leans into the medicalization of trauma, particularly the sexual. In her keynote at the Spring Meeting for Division 39, Saketopolou challenged those in attendance to recognize the ways that rape has been employed to harness moral legitimation for genocide while it can simultaneously disappear from historical memory as a weapon of war and racial violence. Traumatophobia positions subjects for reparation or vengeance, binding allegiance to moral positions that make them susceptible recruits to institutions and legitimizing enactments of colonial violence. In my clinical experience, most of the patients I work with who

experienced abuse gain the most from beginning to recognize identifications with a perpetrator/abuser, especially through insights gleaned through often very messy and shameful enactments where they have harmed others in their orbit.

In *Hatred of Sex*, Davis and Dean (2022) identify the ways traumatology demands fidelity to a model that promotes suggestibility and sacrifices skepticism in the name of moral order. This allegiance to explaining away insists on obedience to this model that refuses identification with the perpetrator, thus splitting against alterity and limiting experiences of multiplicity. It also promotes a way of commercializing trauma and obscuring the wear and tear, the material degradation of working through and with things saturated in political violence. The traumatology machine also seems to refuse room for experiences of psychosis, instead privileging a concretization of narrative and agenda to restore linearity to narratives of harm.

Renegade desire and unruly affect shatter normative fantasies of health and deepen relationality that encompasses multiplicity. There is more to living and dying than desiring to become or possess the desirable. Ableist tautologies of desirability (especially as a trauma-free/healed status) refuse realities of place and time and collapse the shape of aging into one of certain despair, consumed by a fever dream of nostalgia and constant interventions to fulfill that anti-aging fantasy of stasis. The normative Ideal relies on authoritarian delirium that attacks and undermines the worth of anything that disobeys its fascist logics or draws attention to the state's violence enacted through carcerality and colonial logics of apartheid. Disobedience, like encampments, walkouts, and self-immolation, demonstrates agentic possibility against interpellation and signal the vitality of refusal. The mad gesture to appreciate inflammation as an embodied speech act of the psyche counters the dominant medical allegiance to tame or quell its rebellion. Psychoanalytic process embraces the ideas that such recognition is a precondition to metabolize experience. Questions emerge: "What do health and happiness during a genocide mean? What do we do *with* and *in* analysis?" These existential questions pull against our functionalist anxieties for reassurance that we will succeed and survive.

Kristeva (1980/1982) suggests that *abjection* serves as a preconscious condition and strategy intending to excise the materiality of death. The abject disturbs the order of things and "draws attention to the fragility of the law" (p. 4), and in this way it exists in the blatant repressory violence and measures that the state employs to maintain domination and the semblance of mastery. The condition and structure of settler colonial domination turn everything into property for exploitation and extraction (Glenn, 2015), rendering the native into "the wretched of the earth" (Fanon, 2007). Fanon warns that experts and electors will attempt to relativize legitimacy, which can explain how aesthetics of diversity, equity, and exclusion (D.E.I.) initiatives serve as a simulacra of restored sovereignty while failing to change the power structure or, as Lorde might say, "the Master's house" (Lorde, 1984). Fanon writes:

it is in order to try to fend off such a situation that experts in social science, particularly sociologists or political scientists—well-intentioned and always inventive—undertake to imagine new, quasi-institutional systems capable of locking popular power and expert power into the same body. (Fanon, 1962/2007, p. 142)

Biomedicalization essentialized embodiment, reducing it to settler property and recruiting it in the state strategy to demarcate citizenship through metrics of health (a metaphor introduced by Susan Sontag in *Illness as Metaphor*). Austerity is another such strategy that explains away the limits of emancipation. Arguments for "privatization" and the will of a "free market" relieve the state of accountability, "organize abandonment" (Gilmore, 2022), and justify attacks against the marginalized. Karatzogianni and Robinson (2017) elaborate how the psychic structure of austerity as ideological terror becomes reinforced and reified by apartheid logics:

Material scarcity arising from capitalist/statist resource grabs can reinforce tendencies for networks to become reactive. With conditions of life put at risk, irrational mass attachments resurface, channelling [sic] in a distorted way the new class contradiction between included and excluded. (p. 290)

Embracing the political realities of inflammation and abjection counters these logics by encouraging us to “give up the ghost” and be with each other, in the messy mortal in-between. Traumatophilia—that is, turning to what hurts with curiosity, excitement, and dedication—counters the suppression of how these embodied realities speak back to power (Saketopoulou, 2023). As Kimberly Akimbo (in the eponymous musical) counters the prematurity of her parents’ despair, she sings: “Let’s give up the ghost, just be with me instead. I know I might be dying, but I’m not dead.” Here is a method of mourning that doesn’t try to kill loss through anticipation and resignation.

Mark Fisher warns of what we do with ghosts: “The future is always experienced as a haunting: as a virtuality that already impinges on the present, conditioning expectations and motivating cultural production” (Fisher, 2012, p. 16). Serge Leclaire (1975/1998) confronts that even giving this up requires some killing:

To give it up is to die, to no longer have a reason for living. But to pretend that we can hold on to it is to condemn ourselves not to live.

A Black feminist hauntology offers a specifically anticolonial framework for giving up systems of domination. Saleh-Hanna (2015) insists, “An abolitionist lens for hauntology, a paradigm invested in articulating the historic foundations of contemporary struggles, could only emerge through Black feminist interpretations of ghosting” (p. 69). Joy James (2023) identifies the *captive maternal*, who include “Black people of all/none genders” who fight for freedom even from positions of confinement and state attempts to destroy, subjugate, and render them submissive objects. In contrast, she warns of *compradors*, stealthily enabling predatory policing and masquerading as helpers. Ghosts are racialized and recruited in the colonial matrix of power (Mignolo, 2013); whiteness and coloniality become embedded in the haunting, echoed through Fanon’s calls to consider the internalization of the colonizer in colonized subjects. Here is the “ghost in the machine,” as La paperson (Yang, 2017) describes that “decolonizing dreamers [...] are subversively part of the machinery and part machine themselves” (p. xiii). Decolonial hauntologies require multiplicity that reckons with traumatophilic integrity.

This does not suggest romanticizing illness, colonial suffering, or racialized harm as a noble struggle, but rather as methodology that embodies pain and fear in such with appreciation for what it can incite in regard to grief’s access to a register of reality that normative unconscious process (Layton, 2020) dissociates and disavows. These abject epistemologies signal and become realities of terrible Truth: attacks against the materiality of our collective and collusions with logics of despair. Debility (Puar, 2017) lays bare a map of power relations for who and how care functions, alongside landscapes of inequality and capitalist machines designed to exploit precarity. Control extends from politics of coercion and violent economies of scarcity, where delusions and stopgaps of safety get traded and so much is sacrificed to fear. The tens of thousands of children killed and maimed in Gaza reveal the extents of Zionist violence and imperial collusion in Palestinian genocide. The martyrs bring the decolonial hauntology for us to find and fight against the foreclosures of the necrotic preconditional structures of epistemicide: They reveal true sacrifice and confront the illusion of survival in a colonial system built to conquer and maim.

In “On Talking as Dreaming,” Ogden (2007) identifies “the analytic task of helping the patient to become more fully alive to his experience, more fully human” (p. 576) and co-creating “an experience in which patient and analyst engage in an experiment [...] to dream formerly undreamable emotional experience” (his “undreamt dreams”). Psychoanalysis may then consider the inability to dream to be a relational failure. Ogden differentiates dreaming from other ways of handling or rather discarding psychic phenomena—what he calls psychic evacuative: hallucination, excessive projective identification, manic defense, and paranoid delusion—and bemoans that “A person unable to learn from (make use of) experience is imprisoned in the hell of an endless, unchanging world of what is” (Ogden, 2003, p. 19). Genocide engenders the evacuative strategies of the colonial nation-state, as fascism recruits people to maim and insists that people must be

maimed, refusing and destroying the capacity to dream together. Abject pain and the hauntology of martyrs rupture the colonial fantasies of purity; disability provides an opportunity for the body's leakiness (refusal and failure to comply with "being well") to rupture the opacity of hegemonic aesthetics (Motley, 2024) of security, allowing new dreams to confront the insidious lies masking colonial intent.

Psychoanalytic theory that soothes inflammation and attempts to pacify with static reassurance requires questioning: Are abstraction and reflective space a seductive luxury that avoids material reality and maneuvers we learn to evade overwhelm? Truth resides in that confrontation with the terrible. Resisting internal disruption and external revolutions that leave us stuck in time and place against aging, against hauntologies where collective despair and grief may shake the foundations of what we know, challenges the bargains we've made for safety. My gratitude extends to Aaron Bushnell for self-immolating, putting his life and death to use in a way that revealed the site of the colonial wound (Mignolo & Vazquez, 2013), and I am so grateful to students and faculty resisting institutional complicity in the genocide against Palestine. My body in distress reaches toward the many martyrs to help me dream a decolonial future beyond the sanitized rhetoric of the academy and its role in manufacturing consent for genocide, reckoning with what it means to survive in such a system and what brave action it takes to dismantle the war machine, dreaming to burn and abolish colonial structure, embracing inflamed hauntologies in solidarity with Palestine.

Disclosure statement

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