

Research Article

Time, Care, and Solidarity in Decolonial, Anti-Racist, Anti-Ableist Undergraduate Program Building

Patricia Hoi Ling Ki^a, Rachel da Silveira Gorman^a, Jessica Vorstermans^a, Agnès Berthelot-Raffard^a, Sean Hillier^a, and Yasaman Delaviz^b

Abstract

This article reflects on the development process of a new undergraduate program, Racialized Health and Disability Justice (RHDJ), at the Critical Disability Studies program, York University from the perspective of the core program development team. The RHDJ program aims to centre the contributions and scholarship of Black, Indigenous, racialized, disabled, and Mad peoples, in response to mounting evidence demonstrating the ongoing marginalization and neglect of these groups in terms of their health and well-being across the Canadian state, and their exclusion from participation, recognition, knowledge production, and leadership within the colonial structures of academia. We reflect on how graduate students and faculty were involved in working toward the program’s central aim of teaching and enacting racial and disability justice. We ask, what difference does it make in our program development process to begin from a disability justice ethos, in our negotiations within a structure that the program resists at the same time as it relies on it for its existence? Since the program aims toward the transformation of care for communities who have been marginalized, we also consider if theories of care ethics can inform our process in implementing disability justice principles as we navigate institutional barriers, organization of labour, and collaboration. By sharing our process and reflections, we hope other collectives with similar disability justice goals may consider and build upon our experiences, in the service of building different tools for a different, more livable future.

Keywords:

Disability justice,
ethics of care,
knowledge
decolonization,
transformative
education, program
development

a. Critical Disability Studies, School of Health Policy and Management, York University, Toronto, Canada

b. Office of the Dean, Faculty of Health, York University, Toronto, Canada

Contact: Patricia Hoi Ling Ki ki.patricia@gmail.com

Introduction

Those of us who have been forged in the crucibles of difference... know that survival is not an academic skill. It is learning how to stand alone, unpopular and sometimes reviled, and how to make common cause with those others identified as outside the structures in order to define and seek a world in which we can all flourish. It is learning how to take our differences and make them strengths. *For the master's tools will never dismantle the master's house.*

(Lorde, 1984/2007, p. 112, emphasis in original)

The dreaming, planning, strategizing, thinking, writing, and countless hours of labour for the proposed Racialized Health and Disability Justice (RHDJ) undergraduate program have been unfolding for several years, led by Professor Rachel da Silveira Gorman, in collaboration with professors Jessica Vorstermans, Agnès Berthelot-Raffard, Sean Hillier, and Educational/Curricular Development Specialist Yasaman Delaviz, in the Critical Disability Studies program at York University. Patricia Ki was a doctoral student and graduate assistant who worked with the team in 2021–2023, particularly in the area of course proposal development.

The new RHDJ undergraduate program is so named because all who are involved in its development envision a world in which Black, Indigenous, and racialized peoples will have what they need to support their optimal health and wellbeing. We believe that disability justice principles offer promising tools for building this world that can hold with care different needs, different experiences, different relationships, and different ways of being. The development of this program proceeds from these aspirations because we are acutely aware, from each team member's research, professional, and personal experiences, that there is mounting evidence demonstrating the ongoing marginalization of Black, Indigenous, and racialized peoples' health and wellbeing across the Canadian state¹ through state neglect, colonial violence, and everyday racism (Essed, 1990). Moreover, we have either experienced or witnessed too many incidences in which Black, Indigenous, and racialized learners and scholars are excluded from participation, recognition, knowledge production, and leadership within academia due to ongoing institutional racism and epistemic colonialism (Bhakuni & Abimbola, 2021). As such, in this proposed program, we insist on centring the contributions and scholarship of Black, Indigenous, racialized, disabled, and Mad peoples in curriculum and program development. We envision that, through this program, learners

¹ The term Canadian state is used, as opposed to Canada or so-called Canada, to highlight the fact that this state is built on stolen Indigenous land. It is a refusal to simply and ubiquitously refer to this land as "Canada" as all-encompassing and thus eliding the inherent sovereignty of Indigenous nations and peoples on this land.

will gain knowledge and skills to work in health and disability justice settings from decolonized and person-centred methodologies. More specifically, the program aims to support learners to recognize ways in which existing healthcare, social services, and education can harm racialized and disability communities. As such, the proposed curriculum includes a multitude of opportunities for learners to practise creating anti-racist and anti-ableist health and mental health programming; working with communities, agencies, and councils to build alternatives that promote health and well-being of Black, Indigenous, racialized, and disabled people; and building creative modes of communication to advocate for social and community transformation. With these objectives, this program is one way we hope will bring us closer to the collective vision of “a world in which we can all flourish” (Lorde, 1984/2007, p. 112).

Disability justice movements build their knowledges and practices by drawing on the extensive histories and ongoing developments of disability, Mad, anti-racist, anti-cisheteropatriarchal, anti-colonial, and anti-capitalist activisms, which emphasize mutual aids, collective care, interdependence, and building solidarity across differences (see for example, Berne, 2015; Graham & Jackson, 2016; Kafer, 2013; Lakshmi Piepzna-Samarasinha, 2018; Spade, 2020). We wish this program to embody these social justice principles and theories that we aim to teach at its very foundation. In *As We Have Always Done: Indigenous Freedom through Radical Resistance*, Nishnaabeg scholar Leanne Betasamosake Simpson (2021) teaches that theory and praxis are necessarily interdependent in co-producing knowledge for a different future, particularly of Indigenous resurgence. She writes, “If we want to create a different future, we need to live a different present, so that present can fully marinate, influence, and create different futurities” (p. 20). Similarly, in *Teaching to Transgress*, bell hooks (1994) asserts that when our theorizing comes from processes and lived experiences of resistance and efforts of collective liberation, then there is no separation between theory and practice; moreover, “what such experience makes more evident is the bond between the two—that ultimately reciprocal process wherein one enables the other” (p. 61). As we build a program to share and teach ideas about working toward different and resistant ways of being, as endeavours that can contribute to decolonial futurities, we ourselves aim to *embody* different and resistant ways of being, starting at the envisioning and development of program protocols, curriculum, and courses. This iterative process of putting theory into practice, or producing knowledge through doing, can be understood as a practice-based, reflexive methodology that involves collaboration between people with different experiences and perspectives, navigating and reflecting on differences, critiquing and modifying process, and theorizing from their learnings and shortcomings (Betasamosake Simpson, 2021). Therefore, as we will further discuss in this article, a major component of this work was inviting faculty members, graduate students, activists, and community educators from within and outside the

Critical Disability Studies program, with specializations and expertise in Black scholarship, Indigenous studies, disability studies, Mad studies, Deaf scholarship, critical Asian studies, Latinx studies, African studies, critical migration studies, queer and trans studies, and transnational feminist theory, to develop course proposals through collaboration and co-learning in small teams. This can be understood as a dialogic process—it is a way of investigating and pushing back against institutional racism, colonialism, and ableism by creating space and inviting people for collaborative dialogues, through which we actively temper and shift the institutional structures that reinforce discrimination and exclusions.

Similarly, how this article came together reflects the program development process. Tentative theories about racial justice, disability activism, and transformative pedagogy emerged through conversations, especially between the first two authors, sharing experiences and ideas that continued to propel their work in various academic spaces, particularly the core values and beliefs that informed their involvement in the RHDJ program development process, despite setbacks, discouragement, and frustration. In this way, this reflexive writing process can also be understood as a method of “unforgetting” (Shotwell, 2016, p. 36), a concept formulated by historian Roxanne Dunbar-Ortiz as a tactic of resistance against state-sanctioned forgetting, denial, or normalization of colonial oppression and subjugation.

We reflect on two central questions:

1. What difference does it make in our program development process to begin from a disability justice ethos, in our negotiations within a structure that the program resists at the same time as it relies on it for its existence?

We contemplate the tensions between the dream and desire to build new tools for a new program toward a new world and the recognition that, ultimately, this new program does not exist outside of the dominant institutional academic structure. In fact, it relies on funding and resources provided by this structure, pending approval from those in positions of power in the institutional hierarchy. As we reflect on and write about the generative collaborations with and contributions from Indigenous, Black, racialized, disabled, Deaf, and Mad scholars and practitioners, we hold in our memory, and thus resist forgetting, our collective aspirations for social transformation, despite the multiple institutional constraints we encountered along the way. And when we also write about the tensions and contradictions in the program development process, we also contend with, expose, and therefore refuse to normalize or forget the ruling colonial and neoliberal structures that continue to prevent the RHDJ program from materializing—the very structures that compel the development of the RHDJ program in the first place.

2. Can ethics of care help us navigate institutional hierarchies and relations? Can it help us work through competition and survival in an often tokenistic, credential-oriented, individualist context within academia, and practise interdependence in our struggles and growth toward disability justice?

As the program aims toward the transformation of care for Black, Indigenous, racialized, and disability communities, we also turn to theories of ethics of care in the ways we build and organize the program. We wonder if an ethic of collective care and interdependence can inform our process in implementing disability justice principles in our program planning and organizing process, as we navigate relationships with the institution and with each other. Particularly, as many who have participated in the program development process are both students and educators, we wonder if ethics of care can help us navigate the dual location of teacher/learner.

This reflection is specific to our proposed program and its institutional contexts. However, we believe that the values underlying disability justice principles are relevant in the broader post-secondary context regarding program development. Regardless of degree level or topic of study, a core aim and responsibility of education is to ensure that various kinds of knowledge are learned and produced in the service of both people and our shared world. We hope that it will be helpful to read about our process and consider the tensions and contradictions, successes and downfalls, in working toward social justice within and through education institutions.

Ethics of Care: Tensions and Solidarity

We have been inspired by theories in ethics of care in the program development process, for we are convinced that in creating a program for people to learn how to care, we cannot replicate the violence of uncaring in the learning environment. Betasamosake Simpson (2021) describes the ethics and values from a Nishnaabeg worldview, long predating colonial interference, that individuals, families, communities, and nations use to live collectively with the land. She understands such ethics and values not as frameworks or laws, but as “series of complex, interconnected cycling processes that make up a nonlinear, overlapping emergent and responsive network of relationships of deep reciprocity, intimate and global interconnection and interdependence, that spirals across time and space” (p. 24). The primary tactics of colonization are the heteropatriarchal subjugation, devaluation, and control of people categorized as feminine or otherwise defying the gender binary (Betasamosake Simpson, 2021; Federici, 2014; Million, 2013), which shape all realms of life for Indigenous and settler communities across the colonized land, albeit with fundamentally different effects, from interpersonal relations to norms about being human. Theorization of care ethics by Western feminist scholars emerged in the 1970s and 80s in

response to patriarchal models of moral development, which deemed inferior and even pathologized ways of being that were ubiquitously characterized as feminine, such as emotionality and relationality (Gilligan, 1993; Tronto, 1993; Shildrick, 1997). Feminist ethics of care understands mutuality and interdependence as indispensable in human survival (Held, 2006; Kittay, 1999; Noddings, 1984; Ruddick, 1989; Shildrick, 1997). According to Noddings (1984), care is “an attempt to meet the other morally” (p. 5). Through enacting an ethics of care, feminist theorists argue that individuals can maintain and repair the world “so that we can live in it as well as possible” (Tronto, 1993, p. 145), and achieve broader aims of social justice (Held, 2006; Shildrick, 1997; Tronto, 1993). As such, it is not utilitarian calculations or the discernment of the greatest good for the greatest number of people that oblige care (Sherwin, 1992), but rather the ongoing re-entering into “impure entanglements” (Puig de la Bellacasa, 2017, p. 184) with one another that all beings co-produce, a web of interdependent care through ordinary practices and labour that arises in response to demands emerging from relationships (Laugier, 2009; Paperman, 2013; Puig de la Bellacasa, 2017).

Practising an ethics of care toward social justice within the context of colonial violence, however, involves more than recognizing care as a web of interdependent practices. It further requires that we interrogate and interrupt the uneven distribution of labour and harmful practices of care within that web of interdependence. As critical race and feminist theorist Sara Ahmed (2014) argues, when tactics of domination exercised by the ruling class are generalized as norms for the whole social body, people with proximity to this class are afforded varying degree of freedom “not to support the whole body when others provide this support” (p. 112). To maintain subordination, care may even be “a technique for keeping others *under* the social body” (p. 106, emphasis in original), as a form of “discipline *as* care” (p. 106, emphasis in original). Regarding disability specifically, it has long been documented that practices of care are far from experiences of mutuality, whereby care is often experienced by disabled people as “a layered form of oppression that includes abuse, coercion, a history of physical and metaphorical institutionalization, and a denial of agency” (Kelly, 2013, p. 786). In *Care Work: Dreaming Disability Justice*, disability organizer and scholar Leah Lakshmi Piepzna-Smarasinha (2018) contends that, as results of heteropatriarchal gender norms, racist stereotypes, and ableism, disabled Black and brown femmes are frequently expected to provide care labour while they disproportionately experience more barriers and violence when they seek care.

Practising an ethics of care toward justice therefore necessitates configuring solidarity between people who are differently situated but nevertheless interdependent. As Ahmed (2004) theorizes, solidarity is not predicated on the assumption that people’s experiences of struggles and

pain are the same, or even that they hold identical visions for the future. Instead, solidarity “involves commitment, and work, as well as the recognition that even if we do not have the same feelings, or the same lives, or the same bodies, we do live on common ground” (p. 189). From the perspectives of disability and transformative justice, this common ground is rife with conditions that foster precarity and violence (brown, 2017; Ritchie, 2023). The work of solidarity, then, is a commitment to care for each other’s needs with the aim of liberation from the violent conditions of colonialism, racism, cisheteropatriarchy, and ableism, even though we are not equally affected by them, and some of us may benefit from them. Describing crip solidarity, or solidarity among disabled people, activist Mia Mingus (2010) writes:

...wherever you are is where I want to be... If you can’t go, then I don’t want to go. If we are traveling together, sharing political space together, building political family together, then I want to be with you...We will weave need into our relationships like golden, shimmering glimmers of hope—opportunities to build deeper, more whole and practice what our world *could* look like. (paras. 1, 10, emphasis in original)

Commitment between people therefore emerges through meaningful relationship-building and generative collaborations in which each person feels dignified, valued, and a sense of belonging (brown, 2017), prioritizing space particularly for people who have been devalued and cast out of belonging. In this way, practices of care and solidarity resist and shift individualist and competitive ways of relating that produce precarity and are normalized and encouraged within neoliberal institutions. This shift in patterns of relating among a small group of people may be understood as fractal, which, according to theories of emergent strategies within the transformative justice framework, can shift entire systems when repeated over and over in different spaces (brown, 2017; Ritchie, 2023). The theories in ethics of care we have learned, such as those in the brief discussion above, offer a conceptual framework for imagining and working toward practices of care and solidarity, as well as navigating tensions between different subject positions and care needs. In this article we contemplate the application of these theories in our experience of collaborative program development in the racist and ableist context of higher education.

A foundational task was to push against punitive program policies in the department, faculty, and university in which we sought to establish RHDJ. These policies include course rules such as late assignment, course extension, and attendance, but most notably academic honesty and student code of conduct. We realized academic honesty hearings functioned as a pipeline for the criminalization of a staggering proportion of the students in the existing undergraduate program in our department. Proposing an entirely new undergraduate program, rather than a set of new

courses, is one way of pushing back against or even dismantling punitive policies and building new foundations toward care and justice. A new program would allow us to develop its own administrative structure, as well as management roles with individuals whose values align with the program objectives. Consequently, it would allow us to establish alternative program protocols and procedures that would make space for and centre relational processes to support students' learning and care needs when they encounter academic challenges. It would take into account their particular circumstances as well as institutional barriers related to racism and ableism, thereby allowing staff and faculty to practice care and solidarity with students. However, the program's embeddedness in the broader institution still requires us to ask how we can get around or underneath the universally enforced academic honesty policy. Even if we change program policy, all students are still required to pledge compliance to the student code of conduct to maintain active enrollment in the university registrar system. This pledge of compliance is then figured into the formal processes, such as investigation and hearing at program, faculty, or senate levels, through which students are held responsible for alleged breaches of academic honesty or misconduct (York University, 2011). An administrative process that makes it impossible to register in courses without agreeing to punitive measures in relation to academic conduct can be understood as tactics by a neoliberal institution to assert and sustain control over those who ultimately sustain its operations through tuition payments and academic participation.

As such, we still have to work with the overall structure. We asked ourselves if there can be possibilities of building completely outside of the institutional structure. We are then reminded, from our experiences, that often those who can be involved in alternative learning programs outside of academia are people who have access to free time and resources, and therefore do not need to rely on university credits to secure employment and maintain social status. Publicly funded universities can offer spaces for people who have been marginalized and excluded in dominant society, such as Black, Indigenous, racialized, trans, queer, Deaf, disabled, and Mad people, to access what they need for a more livable life and to engage in learning and work that are meaningful to them. We therefore believe that universities are public spaces that are worth struggling for—to take back control, to push back corporatization, to push forward a cultural shift toward disability justice and care—rather than abandoning the structure altogether and rebuilding elsewhere.

Following theories in ethics of care, we endeavour to transform the system through cultivating unity, interdependence, and mutual recognition of contribution in the program development process. Professors and graduate students collaborated on course proposals and program protocols, devising course structures free of exams and tests, with flexible assignment

due dates or grading strategies that weigh heavily on in-class participation. Rather than use standardized evaluative tasks that feel punitive and coercive, the proposal teams, informed by experiences and moments of building relationships and mutual understanding in the classroom, envisioned learning environments that centre meaningful engagement with different kinds of knowledge and value different ways of learning, being, thinking, and feeling. These too are ways that we envision cultivating collective care and solidarity between all participants in the classrooms of the RHDJ program. For example, a commonly incorporated teaching method in the course proposals is in-class, brief, written reflections on a reading, lecture, or guest presentation, which can become a way for the instructor to write back to students and extend the conversation, or bring back common questions or critical issues to invite the class for collective reflection without naming the students who wrote about the issues. The program proposal team also educated themselves on requirements for provincial student loans and internal funding opportunities, and planned for collaboration with program administrators to ensure students are eligible for loans and bursaries in the enrolment process, understanding that funding is a resource that people can use to meet a variety of material needs to support their learning.

The organization of the course proposal teams, comprising both professors and graduate students and with the majority being scholars identifying as Indigenous, Black, racialized, disabled, and/or Mad, results from learning from graduate students' experiences within the academy. For example, it is not uncommon for exploitation to occur in teaching assistantships, when graduate students who hope to have a career in the academy are led to feel that their dissertation work, future career, and standing in the field will be negatively affected if they disagree with the course directors they work for. As supervisors and peers, through encounters and conversations with students the authors also regularly learn about racialized and disabled students' experiences of blatant racism, ableism, and sanism from professors. In these situations, the students often feel that there is nowhere to go to address the harm. When students invest energy in an academic program that is supposed to support them in doing what they feel passionate to do in the world, but are instead pushed down by acts of uncaring and subjugation, it can feel like the walls are caving in. The organization of the course proposal teams, with as many spaces for graduate students as possible, therefore attempts to flatten the hierarchy, make space for those who experience marginalization in the institution, broaden access and support for students to participate in departmental activities, and create conversations between communities of knowers—professors and graduate students who share similar values in enacting disability and racial justice. We believe that such conversations can help to remind all involved about why we are here studying and working within academia in the first place.

At the same time, theories in ethics of care remind us that in all relationships and collaborations there are necessarily tensions between contradicting needs, experiences, and perspectives. We draft course learning strategies that defy university grading structures, at the same time as we recognize the necessity to fit our alternative strategies into existing grading schemes in order for the proposals to be eligible for review at various governance levels at the university. We also recognize that team members have varying degrees of alignment with existing academic policies, uneven levels of investment in and benefits from the professor–student hierarchy, and different relationships with forces of oppression such as racism, ableism, and cisheteropatriarchy. Inevitably, there are people who have done harm to others, there are those who have been harmed, and there are likely many who have experienced both. We have found care ethics and disability justice to be helpful frameworks for recognizing our complicity in the oppressive operations of academia, and identifying ways to disrupt such operations, through purposeful organization that takes into account the different relations of power between those involved in the project and prioritizes the participation and contributions of people who have been subjugated under the academic institutional operations and policies.

Working in Circles: Care and Disability Justice

The concept and practice of circles working relationally are learned from Dr. Fyre Jean Graveline, Jean Tait, and Jennifer Vivian, Indigenous educators who generously collaborated with the first author in 2021 to organize open workshops involving both Indigenous and settler participants on decolonizing care practices in creative therapies. Drawing from the teachings of Graveline, Tait, and Vivian, as well as the core disability justice principle of centring the leadership of those most impacted by intersecting oppressions (Berne, 2015), we envisioned a series of concentric circles in which Black, Indigenous, racialized, disabled, Deaf, queer, trans, and Mad scholars would occupy space at the very centre, with other members of the project working to support their ideas and visions for the RHDJ program.

Historically, the knowledges, practices, and contributions of Black, Indigenous, and racialized peoples in the care profession have been marginalized or made invisible (Bhakuni & Abimbola, 2021). Their practices of collective protection from violence and resistance against interlocking oppressions are frequently dismissed as particular to specific groups, while white healthcare and social workers and the institutions they establish are documented, naturalized, and continually taught in training programs as the shared, and only, history of the professions (Chapman & Withers, 2019). This is a kind of socially sanctioned forgetting and dismissal, not only of the contributions of people who are deemed different and inferior by the logics of white

supremacy, but also of the ongoing social and economic harms to these groups caused by such dismissal (Shotwell, 2016). The RHDJ program seeks to resist and reverse this ongoing process of erasure that upholds the dominant, imperialist narrative about the care profession, through our endeavours to revitalize and prioritize subjugated and erased knowledges that tend toward liberation (Spivak, 2004).

We have learned, from our past experiences in activism and employment in non-profit organizations, directory boards, and academic institutions, that the idea of centring the voices of those who have been marginalized can often turn out to be merely symbolic—a checkbox to meet funding requirements, a tactic to improve publicity. Examples of symbolic inclusion or tokenism we have repeatedly witnessed include service user advisory councils that do not have real decision-making roles within the organization, meetings between volunteer service user groups and staff teams in which the interests of staff are prioritized, and management teams or boards that make decisions against the recommendations of the advisory groups without providing reasons.

For the RHDJ development process, we seek to facilitate unity amongst all involved, but we strive to never lose sight of the centre. To prioritize those at the centre, we necessarily push back against traditional Western philosophical theorization of utilitarian ethics, which has been naturalized as the common-sense ideas of fairness, with the claim that every person's interest has equal weight in determining the greatest good for the most people (Ahmed, 2014; Sherwin, 1992). This rhetoric has long resulted in the subjugation of those whose ways of being challenge the stability of the normative ideal (Ahmed, 2014). As such, for all the new course proposals, we invited Black, Indigenous, racialized, disabled, and Mad scholars and graduate students to lead in designing the course content and structure. Each proposal team also involves one faculty member who specialized in the subject matter of the course, but may or may not identify as racialized, disabled, or Mad. This arrangement is to support graduate students who may not be familiar with the university's course proposal process, and to garner and expand ongoing support for the RHDJ program from faculty. However, all team members are informed that the content for each course must be based on literature and knowledges primarily produced by Black, Indigenous, racialized, disability, Deaf, Mad, queer, and trans scholarship. The course proposals then undergo editing by the curriculum developer, program lead, and program coordinator according to the university's standards, to maximize likelihood of approval at senate level, while being careful in preserving the intentions, contents, and structures set out by the proposal teams. After editing, the proposals are returned to the proposal teams for final review, and the final versions are circulated to the broader departmental committees for their information, before submitting them to the senate level. In this way, we attempt to work in concentric, relational circles, with the contributions of racialized, disabled, and Mad graduate students—those most impacted by intersectional institutional

oppressions in this project—at the centre, supported by faculty and administrators who work around their ideas in ways that will move them forward and through the institutional structure.

While centring a particular group in this process, the authors recognize that they do exercise power in their positions within the project in deciding how the process will go, and how particular students are included in the process while others are not. Inevitably, there will be differences of opinions about these arrangements and decisions, particularly when we circulate the final versions of the course proposals to the broader circle. As Stevenson (2012) writes, what does it mean “to care for another—‘care’ understood in a dual sense as the way someone comes to matter and as the corresponding ethics of attending to that other who matters” (p. 595). We continue to draw on the idea of concentric circles, ethics of care, and disability justice principles in centring the people and knowledges that historically did not come to matter in academia, in our approach to complaints about unfairness in decision-making and involvement in this project. As well, the majority of the core program development team recognize that we ourselves also identify as disabled and racialized, with limited energy and time. We therefore preserve our energy to attend to people who are most impacted, rather than spending energy appeasing those who seem unable or unwilling to understand the values behind the RHDJ program at this time. Working from a trauma-informed perspective, which understands trauma not only as an extraordinary event in the past but as ongoing and cumulative experiences of violence and oppression (Million, 2013; Stevens, 2016), we also choose not to create potential conditions of harm in which individuals who have been known to express discriminatory views are positioned to work with people whose contributions we are prioritizing. We therefore provide information and rationale for the program and its corresponding development process to the broader circle when the proposal documents are completed, and respect individuals’ ability to sit with and process the information over time, thereby being responsible for their own change process.

Outside of the course proposals, the core program development team has also been working in a collective approach as co-conspirators over the past several years in their negotiation with the broader department and faculty to establish the RHDJ program. When encountering barriers at the department and faculty level, the core team collectively strategizes how to break the rules together. For example, in faculty meetings the team continually takes a stance to insist that, rather than following the standard academic honesty policy, the RHDJ program will operate with a different protocol that is relational and non-punitive. Two team members take on the task of gathering evidence from students about their experiences of the harms of academic honesty policies, using the tactic of framing the research as “key informant interviews” to move through the institutional system with language familiar to administrators. This is also a way of centring those most

impacted, an ethics that involves subverting institutional hierarchy by examining a policy based on the experiences of those subjected to the policy, thereby challenging the taken-for-granted measures of compliance to the policy as the only way to examine policy relevance and effectiveness (Chapman, 2013). The team anticipates institutional pressure to give up on the idea, and as such the whole group understands the necessity of pushing the idea forward in unity. If the idea is rejected at the provost level, then the group will come together and continue to strategize, rather than the program lead taking it away and making their own executive decisions, which risks making everyone else on the team a symbolic advisor. The core team therefore moves together as a group, keeping each other accountable, and preventing the situation in which the person with the most access to institutional mechanisms of power aligns the program proposal with established rules in order to move it through the systems (Tronto, 1993). In the first three years of program development, the core team has overcome barriers with the Dean's Office for the overall structure of the program, which moves the project to a place where it now becomes a priority of the Office and entitled to the paid labour of the Office's curriculum developer for support. This in turn makes it possible for the team to invite graduate students' involvement in the course proposal development process through a number of paid graduate assistantships. The support of the curriculum developer ensures that the course proposal process would allow flexibility for graduate students to engage and contribute based on their capacity and would not create undue burdens, thus protecting their labour. This maneuver of institutional processes echoes the practice of administrative activism discussed by Liboiron (2020), which involves those in decision-making positions shifting, mobilizing, or redistributing resources to enact care, reciprocity, and solidarity within the collective, including graduate students and researchers. As such, the core program development team can be understood as its own circle, and the ways it functions in unity supports and works in relationship with the circle of those most impacted, who are developing the course contents and foundational pedagogical tools for the program.

Time in Resistance

Grounded in the care practice and disability justice approach of working relationally within and between circles, the course proposal development process centres the relationship people have with one another. We first invited graduate students and faculty members whom we knew were likely to be interested in contributing to the social justice goals of the RHDJ program. We are aware that not everyone starts on the project from the same place in terms of their relationship with anti-racist, anti-colonial, and anti-ableist work. Our hope however is that a collective and transformative process may occur as we exchange different kinds of knowledge and build

experiences in our conversations and collaborations, such that over time we can hold new understandings and beliefs that we previously could not accept or imagine (brown, 2017).

The course proposal process of organizing a team of three to four graduate students and a faculty member for each course aimed to create space for collaboration, co-learning, and relationship-building, particularly among Black and racialized students, and between students and faculty members, to mitigate the experiences of isolation and competition that are commonplace in academia. As adrienne maree brown (2017) writes, “Relationship is everything” (p. 28): meaningful connections are crucial in a long-term transformation process, which is the broader goal of the RHDJ program in shifting the structures and practices in academia and healthcare. Understanding that racialized and disabled scholars have long been marginalized within academia, our approach is not to invite a select few racialized and disability scholars to develop a series of courses for the program, but to make space for many Black, racialized, disabled, and Mad scholars to gain exposure for their various kinds of knowledge and advance in their careers, in order to push back against academic spaces where partial or surface access to resources and leadership is performed. While graduate students would surely appreciate guidance from faculty members in pedagogy and administrative requirements with course proposals, many graduate students in Critical Disability Studies also have backgrounds in disability activism and direct service in care professions, and therefore have much to contribute on the applications of critical theories beyond academia, in the service of those who are most impacted by ableist social structures.

Inevitably, this team-based work is contingent on individuals’ contributions. Individuals are unlikely to decline an invitation to join a social justice-oriented project. However, we are aware that it is unrealistic to expect that contributions would be equal amongst all involved, and that differing capacity, levels of investment in the goals of the RHDJ program, and the reasons for joining the proposal work may impact the ways that each person contributes. Certainly, the COVID-19 pandemic and its various effects in all aspects of life have major impacts on most people’s capacity to contribute to a project such as RHDJ. What the pandemic also teaches us in this process, however, is the importance of designing a program in which students will have the flexible space and consistent care they need to learn. As we ask the course proposal teams to consider this approach of flexibility and care in course design, we engage in a parallel process with the course proposal teams in making space and inviting collaboration while considering each person’s capacity to work. Learning from approaches of collective care, which centre interdependence, we understand that contradicting experiences of care and harm are produced precisely because the entitlements and subjugations ascribed to individuals’ differing social positions are interlocked in relations of interdependence (Kelly, 2013). Nevertheless, Lakshmi

Piepzna-Samarasinha (2018) describes radical, collective care and solidarity as grounded in the shared goal of supporting alternative ways of being that resist neoliberal and ableist ideals of productivity. Importantly, we do not wish for this project to replicate or contribute to the process of what Berlant (2011) describes as “slow death” (p. 95)—the biopolitical tactics that sustain the optimistic pursuit of a good life, signaled by productivity and social desirability, which enable people to endure long periods of wearing-out through precarious and undercompensated labour. As such, we consider how race, gender, class, and disability intersect in shaping capacity, on an ongoing basis asking who has access to resources that enable them to contribute time to this work, and how we normatively measure productivity and approach timelines in our coordination of the project.

When conceptualizing a collaborative process, a key question that we ask ourselves is, when might collaboration become obligation, and how might obligation in turn stifle relationship-building and meaningful participation in this work, and even reinscribe ableism and sanism? We recognize that even if individuals are interested in a particular project, the tasks associated may feel obligatory or even oppressive when there is a lack of choice around how people can participate. Therefore, from the beginning we suggested different ways of participation and access to support for various levels of engagement with the project, which may be understood as a form of accessible care that takes into account how care needs are always and inevitably shifting and conflicting (Kelly, 2013). Our strategies have included setting up a web-based file-sharing system for team members to work together on course proposal forms, either synchronously in small groups or asynchronously in the shared documents; meetings between the program coordinator and team members for them to verbally share their input, the coordinator taking notes for the course proposal forms; and weekly virtual office space (offered over one semester as open Zoom sessions), where program core team members were available for questions and check-ins about what support each team or individual needs to do their work with the capacity they have. The virtual office space also offered breakout rooms for course proposal teams to meet. The efforts in organizing these offerings are practices not only of relationship-building but also reciprocity for the time and labour that team members, particularly graduate students, are contributing.

Recognizing the differing capacities and investments in this project, our approaches and communication to the course proposal team have aimed to convey the option to not contribute labour if it does not feel possible for individuals to do so. Individuals’ disengagement is an important indicator for the program lead and coordinator to determine where and with whom to extend their time and support, and when to let go of connections with particular individuals and the subject matter expertise they bring, while also maintaining an open enough structure that individuals may reconnect and find ways to participate when they can. After all, from decades of

training within the punitive and competitive structures of the academy, the primary coordinators of the program development team understand intimately the experience of being excluded from participation when our performance is not delivered in the exact way that is required by the normative rules and orders of the academy. At the same time, while the coordinators commit to organizing as much flexible space as possible for all involved, they too have a limit of capacity and time to follow up, to send reminders, to reschedule, to wait for responses. It is also important to acknowledge that the form and extent of flexibility that can be offered is never outside of the constraints imposed by the requirements and deadlines of the university administration, which the core program development team is responsible to meet in order to move the proposal upward through the bureaucratic systems. Nevertheless, attempts to creatively and collaboratively modify workload for others while being accountable to our own boundaries and refusing to abuse our own capacities is one way to contribute to the sustainability of this project in particular, and a practice of the broader disability activism work in general (Mingus, 2019).

Different Tools to Build a Different Future

The development of the RHDJ program was first initiated by faculty members of the Critical Disability Studies (CDS) graduate program. Over time, questions emerged from those teaching in CDS: Are there places for graduates to practise what we are teaching? Are disability justice, anti-racist theories, and anti-colonial approaches priorities in the other disability studies programs across Canada at which CDS graduates may seek teaching opportunities? Where will the graduates' knowledges, research, and academic experiences be valued, especially for those who have historically and ongoingly been positioned in subjugated social categories, including students who identify as Black, Indigenous, racialized, trans, gender diverse, queer, Deaf, neurodivergent, disabled, or Mad?

The RHDJ program is therefore also borne out of a desire from educators/activists in disability justice to create a space where students and graduates can sustain their livelihoods while continuing to build knowledges and expand connections in this work. As such, the development of this program is also about cultivating collective care and ongoing solidarity—building a structure that we ourselves have been trained to engage in, finding ways to care for the students and educators who come after us, dreaming toward a project that is larger than us, that will extend beyond us.

We understand that if we are going to build a different world we need different skills and ways of thinking. When thinking about course content we asked: what if caring for one another is

the priority as we practise disability justice? What would it take to build learning spaces in which the different care needs of all who are in the space are met?

We begin with a foundational approach of inviting differences in the course proposal process. We ask those involved in course proposal development, “if there is a dream course you’d like to take, what would it entail?” In response, in the course proposals team members describe processes of asking students, what is it that you need today? What is it that you want to learn today? (nancy viva davis halifax & Annalise Clarkson, personal communications, September 29, 2021; Mo Thunder, personal communications, Jan. 27, 2022) These questions open up opportunities to extend care while not knowing ahead of time what everyone’s needs are. This is not to say that the course outlines are not built with thoughtfulness and evidence about what students will need to learn to find employment in healthcare. However, we ask ourselves: what if we build in an element of unknown, in resistance against the taken-for-granted, banking model of teaching in which the teacher with assumed expertise fills the student with knowledge like an empty vessel (Freire, 1970/2000)—what if we invite students’ participation as contributors with other kinds of knowledge of their own? What if we ask what students want or need, and invite them to practise attending to each other’s needs as a collective and a community? What if we cultivate spaces caring and supportive enough for people to imagine, for creativity to unfold, for each person to connect with what is deeply important to them and what brought them to this work?

In this way, the course content delivery aims to cultivate learning spaces in which ethical relations can develop between each person, faculty, and students alike. Levinas (1979) uses the term “Infinity of the Other” (p. 80) to describe the irreducible singularity of the other that transcends one’s understanding and therefore commands recognition as an equally unique being rather than an extension of one’s knowing (Rossiter, 2011). The foundation of ethical relations can therefore be understood as centring unknowability, whereby a being can only be in relation “with what it cannot absorb” (Levinas, 1979, p. 80). The resulting ethics is therefore concerned with solidarity across differences (Rossiter, 2011). It is a system of happenstance: proceeding without assuming that life has a definite shape or direction, being redirected by what is encountered, and re-creating a sense of purpose with what is found (Ahmed, 2010, 2017).

Within these processes and relations of unknown, however, what anchors the collective is the fundamental belief that we all have the capacity to care for one another towards healing of the individual and the world around us (brown, 2017). In the proposed curriculum we have created space for several participatory arts-based courses. Arts-based disability activism teaches us that creative processes can be instrumental for skills-building in reflecting on, articulating, and analyzing power relations (Rice et al., 2016), which shape practices of care and equity (Kelly, 2013), both within the classroom and in relations to broader social structures in disability and

healthcare. For example, from the second author's experience, creative exercises such as poetry, found image/object collage, and theatrical technique of tableau can offer ways for learners to compose self-representing narratives and identify symbolisms and ideas that are meaningful and inspiring to them. Learners may then build skills in self-reflections and decoding images to unpack ideologies in relations to power, social positions, and identities. With the use of the arts, it is therefore all the more important that a participatory approach is centred in teaching. As an artist, art therapist, and educator who had been consulted on many research and educational projects, the first author has commonly witnessed the proposal or implementation of compulsory arts-based components in projects with disabled participants led by researchers who are unfamiliar with arts-making. Such processes risk alienating and misrepresenting the participants, leading to a mistrust of the arts and precluding their potential for imaginative social transformation. In some proposed courses there is a focus of practising writing proposals, artist statements, or publications that would be shared with a broader audience to provide an explanation for a social justice-oriented project. It is a practice of translating the creative process back into language. Deaf educator Joanne Webber (personal communications, Dec 2, 2021) explains that engaging the arts is the pathway to language and communication, which is central to self-determination. Cultivating language to communicate new ideologies can resist naturalized narratives that are ableist and oppressive, shift the dominance of particular modes of communication such as audism and the privileging of academic texts, and protect knowledges by communities who have been marginalized from being taken without permission, decontextualized, depoliticized, or misappropriated.

Epilogue

While not all courses proposed for the RHDJ program involve arts-making, we believe that the program development has been more generally a creative, collective, and participatory process, in the service of people, particularly people who have historically and ongoingly been marginalized and denied access to resources for a livable life. At the start of writing this article in 2022, the RHDJ program proposal was already over five years in development and at various stages of review within the university. At the time of writing, in 2024, the program's launch date is still uncertain; its fate remains unknown. It does not feel fitting to write a conclusion, because the RHDJ program proposal never definitively concluded with either an approval or rejection from the administration. Moreover, if we were to follow the praxis of care ethics and justice movements, we may understand this particular undergraduate program development process, carried out and documented through an iterative, cyclical, collaborative, and reflexive methodology and interdependent, reciprocal relationships, as a fractal that encapsulates aspirations and attempts

shifts toward a different future (Betasamosake Simpson, 2021; brown, 2017; Ritchie, 2023). Now teaching in a different postsecondary program, the first author continues to apply the praxis learned from RHDJ, attempting pedagogical methods that are relational rather than punitive, flexible in honouring creativity and care needs, reciprocal in resisting individualist competition, and collaborative in building solidarity across differences. A fractal repeating itself is a process that does not end. We hope that by sharing our process, other projects and collectives that are also working toward similar disability justice goals—whether in adult education, transformative education, healthcare, or other areas—may build upon and extend our ideas, in ways beyond our imagination, in the service of a more livable shared world for all.

Acknowledgements

We thank the graduate students, alumni, subject matter experts, and faculty who participated in the RHDJ program development process for their contribution of knowledge, efforts, and time.

Disclosure

No potential conflict of interest was reported by the authors.

Notes on contributors

Patricia Hoi Ling Ki is an immigrant-settler of Chinese/Hakka descent living in T'karonto. She holds a PhD from Critical Disability Studies at York University. She is an artist, a registered social worker and art therapist, has practised as a mental health worker and educator over the past decade, and is currently the executive director at the Toronto Art Therapy Institute. She published papers, poetry, and artwork on the discourse of trauma and ethics of care.

Rachel da Silveira Gorman is an Associate Professor in the Graduate Program in Critical Disability Studies at York University. Current projects include disability data, AI bias, and AI-prototypes, and biochemical mechanisms of the social determinants of health. Da Silveira Gorman's writings on ideologies of disability and race have appeared in *American Quarterly*, *thirdspace*, and the *Journal of Literary and Cultural Disability Studies*. Da Silveira Gorman also works in choreography and curating.

Jessica Vorstermans is an Assistant Professor in the Critical Disability Studies program in the School of Health Policy and Management, Faculty of Health at York University. Her research makes critical interventions into the field of international experiential and service learning and

global citizenship, engaging plural ideas of human rights, disability, and equity in our current neoliberal world.

Agnès Berthelot-Raffard is a political philosopher and ethicist. She is an Associate Professor of Critical Disability Studies at the School of Health Policy and Management (York University). She published several papers in the fields of feminist ethics of care and vulnerability, Black feminist thoughts, and philosophy of public health.

Sean Hillier is a queer Mi'kmaw scholar (Qalipu First Nation). He is an Associate Professor and York Research Chair in Indigenous Health Policy & One Health at the School of Health Policy & Management, Faculty of Health at York University. He is Director for the Centre for Indigenous Knowledges and Languages at York and Co-Chaired the Working Group on Anti-Black and Anti-Indigenous racism in the Faculty of Health.

Yasaman Delaviz is an Educational/Curricular Development Specialist in the Faculty of Health at York University. Yasaman earned her PhD in Biomedical Engineering from the University of Toronto.

ORCID

Agnès Berthelot-Raffard: <https://orcid.org/0000-0003-0896-9847>

Yasaman Delaviz: <https://orcid.org/0000-0003-4858-6584>

Sean Hillier: <https://orcid.org/0000-0003-3874-9212>

Patricia Ki: <https://orcid.org/0000-0001-7561-7118>

References

Ahmed, S. (2004). *The cultural politics of emotion*. Routledge.

Ahmed, S. (2010). *The promise of happiness*. Duke University Press.

Ahmed, S. (2014). *Willful subjects*. Duke University Press.

Ahmed, S. (2017). *Living a feminist life*. Duke University Press.

Berlant, L. (2011). *Cruel optimism*. Duke University Press.

Berne, P. (2015, June 10). *Disability justice—A working draft by Patty Berne*. Sins Invalid.
<https://www.sinsinvalid.org/blog/disability-justice-a-working-draft-by-patty-berne>

Betasamosake Simpson, L. (2021). *As we have always done: Indigenous freedom through radical resistance*. University of Minnesota Press.

- Bhakuni, H., & Abimbola, S. (2021). Epistemic injustice in academic global health. *The Lancet*, 9(10), E1465–E1470. [https://doi.org/10.1016/S2214-109X\(21\)00301-6](https://doi.org/10.1016/S2214-109X(21)00301-6)
- brown, a. m. (2017). *Emergent strategy: Shaping change, changing worlds*. AK Press.
- Chapman, C. (2013). Cultivating a troubled consciousness: Compulsory sound-mindedness and complicity in oppression. *Health, Culture & Society*, 5(1). <https://doi.org/10.5195/hcs.2013.140>
- Chapman, C., & Withers, A. J. (2019). *A violent history of benevolence: Interlocking oppression in the moral economies of social working*. University of Toronto Press.
- Essed, P. (1990). *Everyday racism: Report from women of two cultures*. Hunter House.
- Federici, S. (2014). *Caliban and the witch: Women, the body and primitive accumulation* (2nd ed.). Autonomedia.
- Freire, P. (1970/2000). *Pedagogy of the oppressed*. Continuum.
- Graham, M., & Jackson, K. (2016). Divided no more: The Toronto Disability Pride March and the challenges of inclusive organizing. In C. Kelly & M. Orsini (Eds.), *Mobilizing metaphor: Art, culture, and disability activism in Canada* (pp. 279–288). UBC Press.
- Gilligan, C. (1993). *In a different voice: Psychological theory and women's development*. Harvard University Press.
- Held, V. (2006). *The ethics of care: Personal, political, global*. Oxford University Press.
- hooks, b. (2014). *Teaching to transgress: Education as the practice of freedom*. Routledge.
- Kafer, A. (2013). *Feminist, queer, crip*. Indiana University Press.
- Kelly, C. (2013). Building bridges with accessible care: Disability studies, feminist care scholarship, and beyond. *Hypatia*, 28(4), 784–800. <https://doi.org/10.1111/j.1527-2001.2012.01310.x>
- Kittay, E. (1999). *Love's labor: Essays on women, equality and dependency*. Routledge.
- Laugier, S. (2009). L'éthique comme politique de l'ordinaire. *Multitudes*, 3(37–38), 80–88. <https://doi.org/10.3917/mult.037.0080>
- Levinas, E. (1979). *Totality and infinity: An essay on exteriority*. Martinus Nijhoff Publishers.
- Liboiron, M. (Guest). (2020, June 17). Solidarity chat 9: Max Liboiron [Audio podcast episode]. In *Contra*. Critical Design Lab. <https://www.mapping-access.com/podcast/2020/6/10/solidarity-chat-9-max-liboiron>
- Lorde, A. (1984/2007). *Sister outsider: Speeches and essays*. Crossing Press.
- Million, D. (2013). *Therapeutic nations: Healing in an age of Indigenous human rights*. University of Arizona Press.
- Mingus, M. (2019, May 5). *Dreaming accountability*. Leaving Evidence. <https://leavingevidence.wordpress.com/2019/05/05/dreaming-accountability-dreaming-a-returning-to-ourselves-and-each-other/>

- Mingus, M. (2010, May 3). *Wherever you are is where I want to be: Crip solidarity*. Leaving Evidence. <https://leavingevidence.wordpress.com/2010/05/03/where-ever-you-are-is-where-i-want-to-be-crip-solidarity/>
- Noddings, N. (1984). *Caring: A feminine approach to ethics and moral education*. University of California Press.
- Paperman, P. (2013). *Care et sentiments*. Presse de l'université de France.
- Piepzna-Samarasinha, L. (2018). *Care work: Dreaming disability justice*. Arsenal Pulp Press.
- Puig de la Bellacasa, M. (2017). *Matters of care: Speculative ethics in more than human worlds*. University of Minnesota Press.
- Rice, C., Chandler, E., & Changfoot, N. (2016). Imagining otherwise: The ephemeral spaces of envisioning new meanings. In C. Kelly & M. Orsini (Eds.), *Mobilizing metaphor: Art, culture, and disability activism in Canada* (pp. 54–75). UBC Press.
- Ritchie, A. J. (2023). *Practicing new worlds: Abolition and emergent strategies*. AK Press.
- Rossiter, A. (2011). Unsettled social work: The challenge of Levinas's ethics. *British Journal of Social Work*, 41, 980–995. <https://doi.org/10.1093/bjsw/bcr004>
- Ruddick, S. (1989). *Maternal thinking: Toward a politics of peace*. Beacon Press.
- Sherwin, S. (1992). *No longer patient: Feminist ethics and health care*. Temple University Press.
- Shildrick, M. (1997). *Leaky bodies and boundaries: Feminism, postmodernism and (bio)ethics*. Routledge.
- Shotwell, A. (2016). *Against purity: Living ethically in compromised times*. University of Minnesota Press.
- Spade, D. (2020). Solidarity not charity: Mutual aid for mobilization and survival. *Social Text*, 38(1), 131–151. <https://doi.org/10.1215/01642472-7971139>
- Spivak, G. (2004). Righting wrongs. *The South Atlantic Quarterly*, 103(2/3), 524–581.
- Stevens, M. E. (2016). Trauma is as trauma does: The politics of affect in catastrophic times. In E. Wertheimer & M. J. Casper (Eds.), *Critical Trauma studies: Understanding violence, conflict and memory in everyday life* (pp. 19–36). New York University Press.
- Stevenson, L. (2012). The psychic life of biopolitics: Survival, cooperation, and Inuit community. *American Ethnologist*, 39(3), 592–613. <https://doi.org/10.1111/j.1548-1425.2012.01383.x>
- Tronto, J. (1993). *Moral boundaries: A political argument for an ethic of care*. Routledge.
- York University. (2011, February 17). *Senate policy on academic honesty*. York University. <https://www.yorku.ca/secretariat/policies/policies/academic-honesty-senate-policy-on/>