Introduction

Disability and Its Histories in the Arab World

This book explores what it meant to have disabilities in the Ottoman Arab world. The first stumbling block in the path of anyone wishing to study disability in the Arab world is the absence of an Arabic word for “disability” until fairly recently. “The disabled” and “disability” as discrete categories are products of modern Europe.¹ They did not appear in the Arab world until the twentieth century, and it is thus not surprising that the current Arabic equivalents of the English words “disability” (i‘āqa) and “disabled” (mu‘awwaq; also ma‘ūq and mu‘aq) are of correspondingly recent coinage. They both derive from the verb ‘āqa, “to hinder” or “to hamper.”²

This does not mean, of course, that awareness of impairments did not exist prior to the modern period. In fact, a distinctive characteristic of Arabic literature well into the eighteenth century is works or chapters of works devoted to “people with defects” or “people with blights,” variously referred to as ahl al-‘āhāt, asḥāb al-‘āhāt, or dhawā al-‘āhāt. Kristina Richardson has noted that the word ‘āhā, “blight,” “defect,” or “damage,” “is not a word intrinsically linked to the human body – it could also be applied to crops, for instance – and does not

necessarily connote physical disability. Rather, it suggests a mark that spoils the presumed wholeness, integrity, or aesthetics of something.”

Hence, “blights” encompassed a wide range of mostly physical traits as varied as blindness, leprosy, flat noses, and even blue eyes.

One of the earliest and best-known representatives of this genre is The Book of the Leper, Lame, Blind, and Cross-Eyed by the famous Abbasid belles-lettrist al-Jahiz (d. 868/9). It addresses a wide array of physical defects, from skin disorders to lameness, google-eyes, hemiplegia (paralysis of one side of the body), leprosy, hunchback, scrotal hernia, warts, absence of eyebrows, short necks, and baldness.

In the centuries that followed, other Arab authors followed this literary trend. To mention but two examples from the Ottoman era, the Meccan Hadith scholar Muhammad al-Makki (d. 1547) wrote a treatise on people with physical “blights” that described men who were blind, cross-eyed, had hunched backs, or were bald. Al-Makki gathered information from the Hadith, biographies, and various anecdotes, and stated that his purpose was edification and entertainment, not slander.

The entertaining aspect of this type of literature is even more salient in the work of the Egyptian belles-lettrist Ahmad al-Hifnawi al-Bishari (fl. 1769), which contains anecdotes, poems, jokes, and stories about judges, poets, doctors, the insane, thieves, and many others. One of al-Bishari’s chapters is devoted to “people with blights”: those who were blind, one-eyed, cross-eyed, had hunched backs, were bald, those suffering from bad breath, and those with very long beards.

---


5 Richardson, Difference and Disability, especially 9–13.


7 Shihab al-Din Ahmad al-Hifnawi al-Bishari, Bughayat al-Jalis wa-l-Musamir wa-Nashbat al-Areeb wa-l-Khawatir, MS, Chester Beatty Library, Dublin, Ar. 4853. I was unable to find biographical information on al-Bishari beyond the fact that he was
Introduction

It is evident, then, that the category of “people with blights” is not synonymous with “people with disabilities.” It encompasses a much broader range of conditions than today’s “impairments” and “disabilities,” which are intrinsically connected to individual performance and productivity. Some, like hemiplegia, fall within our modern conception of disability; others, such as flat noses, bad breath, or freckled faces, do not. In addition, because it refers to visible defects that mark the body, ‘ābā excludes physical, cognitive, sexual, and reproductive impairments that are difficult or impossible to identify by sight.

To complicate matters further, the phrase “people with blights” only rarely appears in nonliterary sources like medicine and the law. One possible explanation is that many “blights,” such as short necks and very long beards, did not require or were not amenable to medical treatment and did not affect a person’s legal status in any way. Islamic law, for its part, employed the words zamāna, “chronic illness” or “chronic condition,” and zamin or zamin for “someone with a chronic illness or condition” in certain contexts in reference to physical impairments like missing limbs, partial paralysis, muteness, and blindness. One context was work: a chronic condition might prevent a man from earning a living, which would entitle him to financial support from his relatives (this was a moot point for women, because according to Islamic law, they ought to be supported financially by their fathers, husbands, or other male relatives).

Although there was no category for “the disabled,” either conceptually or linguistically, people with impairments of the body and of the mind are everywhere in Arabic sources dating from Ottoman times. The reason for this striking frequency may be, at least in part, a function of the sheer numbers of people with impairments who lived in Arab towns and cities. People acquired impairments for much the same reasons that people acquired them all over the world: war, poverty, congenital anomalies, injuries, illnesses, and diseases, including the waves of bubonic plague that ravaged Greater Syria and Egypt.

But there are at least two additional causes that are particular to the region. The first is consanguineous marriages, also known as “cousin...
marriages,” which are associated with a relatively high incidence of certain congenital malformations and of conditions caused by autosomal recessive genes, including hereditary deafness, certain types of blindness and muscular dystrophies, neurological disorders, and disorders of sex development. Historically, marriage between cousins has been practiced widely throughout the Arab world and Southwestern Asia. Cousin marriage occurs most commonly among paternal first cousins, including double first-cousin marriage (two siblings who marry two siblings who are their first-degree cousins). It is a cultural, not religious, norm that may be rooted historically in the desire to keep property within the family. While more common among Muslims, it is practiced by non-Muslims as well. The rate of consanguinity in the Arab world is one of the highest in the world: clinical geneticists estimate that to this day an average of 40 percent of marriages in many Arab countries are consanguineous, and that the percentage may be as high as 90 percent in certain Bedouin communities.⁸

Second, the emerging field of medical geology is beginning to reveal surprising clues about the relationship between geological features and the prevalence of certain impairments in the Middle East. Iodine deficiency is a case in point. Iodine is a chemical element that is needed for the correct functioning of the thyroid glands. It is not produced by the human body and can only be acquired through food. An insufficient supply of iodine can cause goiter (enlargement of the thyroid) and, in the children of women who had iodine deficiency during pregnancy, deafness, stunted growth, and damage to brain development. In fact, iodine deficiency is the most common cause of preventable congenital cognitive disabilities in the world. Medical geologists have discovered that the main origin of the deficiency in parts of Lebanon and Syria is that the soil itself does not retain iodine, which is thus not bioavailable.⁹ It follows that iodine deficiency and the impairments it produces were historically endemic in the Eastern Mediterranean region well into the second half of the twentieth century, when

---


the deficiency was recognized as a serious public health issue and salt started to be iodized.

Although people with impairments were an integral part of the social landscape of the Ottoman Arab world, they have been almost entirely ignored by scholars. Even social historians, who are usually sensitive to the lives of the marginalized and the disempowered, and who have written about most facets of the human experience in depth and with nuance, have hardly displayed any interest in disability. Indeed, the pithy observation by U.S. disability historian Douglas Baynton that “[d]isability is everywhere in history, once you begin looking for it, but conspicuously absent in the histories we write,” applies perfectly to the scholarship on the Arab world.10 To the best of my knowledge, the only book-length historical study of disability anywhere in the Arab lands in any period and in any language is Kristina Richardson’s recently published *Difference and Disability in the Medieval Islamic World: Blighted Bodies* (2012). It is largely a literary history centered on the writings of six male Sunni Muslim scholars in fifteenth- and sixteenth-century Cairo, Damascus, and Mecca who wrote about “blighted bodies.”11

While not about the Arab world, M. Miles’s study of the deaf at the Ottoman court (2000) and Ayşe Ezgi Dikici’s MA thesis, “Imperfect Bodies, Perfect Companions? Dwarfs and Mutes at the Ottoman Court in the Sixteenth and Seventeenth Centuries” (2006), are useful studies of disability in Ottoman Turkey. Firoozeh Kashani-Sabet’s pioneering article on the history of disability in nineteenth- and twentieth-century Iran (2010) offers interesting insights for comparative purposes, and the late Michael Dols’s *Majnūn: The Madman in Medieval Islamic Society* (1992), remains a classic despite the fact that it was not written from the perspective of disability studies.12

11 Richardson, *Difference and Disability*. See also her article titled “Disability?” Despite its title, Fared Haj’s *Disability in Antiquity* (New York: Philosophical Society, 1970), where antiquity is defined as the period spanning from the rise of Islam to 1258 CE, is primarily a medical history and is dated in terms of sources, approach, and methodology.
12 M. Miles, “Signing in the Seraglio: Mutes, Dwarfs and Jestures at the Ottoman Court 1500–1700,” *Disability and Society* 15, no. 1 (2000): 115–134; Ayşe Ezgi Dikici,
Although not works of history, of much value to historians are Fedwa Malti-Douglas’s groundbreaking article on blindness in the medieval period (1989), Yusuf Sadan’s study of “blights” in Arabic literature (1983), Mohammed Ghaly’s a meticulously researched book on disability in the writings of prominent Muslim theologians and jurists from early Islamic times to the present day Vardit Rispler-Chaim’s legal history entitled *Disability in Islamic Law* (2007), and Muhammad Hawwa’s study of “people with special needs” in Islamic law (2010).


Introduction

and, more recently, a brief chapter in Vardit Rispler-Chaim’s *Disability in Islamic Law* (2007). Rispler-Chaim is the only scholar who has approached intersex as a disability.14

This dearth of scholarship is not unique to the Arab world or the Middle East but extends to all other non-Western societies, both pre-modern and modern. To the best of my knowledge, with the exception of Kristina Richardson’s *Difference and Disability in the Medieval Islamic World* (2012), there are no histories of disability before the nineteenth century in any part of the world besides Europe and the United States. Disability history in the West, on the other hand, has made spectacular strides and is now a vibrant field, tackling topics as diverse as blindness in nineteenth-century France, “ugly laws” in the United States (laws that as late as 1974 ordered people with disabilities regarded as unsightly not to appear in public), eugenic programs in Nazi Germany, war veterans, prosthetics, freak shows, and much else in between.15 In the last few years a cluster of publications has centered on disability in the European Middle Ages, a welcome and promising antidote to the general presentism of the field.16

14 These articles and chapters were published, respectively, in *The Search: Journal for Arab and Islamic Studies* 7 (1986): 128–170; *Die Welt des Orients* 20–21 (1990): 99–114; in *Women in Middle Eastern History: Shifting Boundaries in Sex and Gender*, ed. Nikki R. Keddie and Beth Baron (New Haven, CT: Yale University Press, 1991), 74–95; *Disability in Islamic Law*, 69–75. Abdelwahab Bouhdiba devotes about three pages of his *Sexuality in Islam* to hermaphrodites. He assumes that Muslim jurists were greatly embarrassed when faced with cases of hermaphroditism. His discussion, in addition to being cursory, is flawed by a misunderstanding of the Arabic terminology pertaining to hermaphrodites, whereby he conflates the term and concept of *khunthā* (hermaphrodite) with that of *mukhannath* (effeminate). Abdelwahab Bouhdiba, *Sexuality in Islam*, translated from French by Alan Sheridan (London: Saqi Books, 1998. Originally published in 1975), 40–42.

15 Although more than ten years old, Catherine Kudlick’s review article “Disability History: Why We Need Another ‘Other,’” *The American Historical Review* 108, no. 3 (2003): 763–793 still offers one of the clearest and most comprehensive overviews of the development of the field.

16 Irina Metzler is one of the most prolific scholars in this field. See *A Social History of Disability in the Middle Ages: Cultural Considerations of Physical Impairment* (New York: Routledge, 2013); *Disability in Medieval Europe: Thinking About Physical Impairment During the High Middle Ages, c. 1100–1400* (London: Routledge, 2006); “Disability in the Middle Ages: Impairment at the Intersection of Historical Inquiry and Disability Studies,” *History Compass* 9, no. 1 (2011): 45–60. See also Joshua R. Eyler, ed., *Disability in the Middle Ages: Reconsiderations and Reverberations* (Burlington, VT: Ashgate, 2010); Wendy Turner and Tory Vandevert Pearman, eds., *The Treatment of Disabled Persons in Medieval Europe: Examining Disability
Disability in the Ottoman Arab World, 1500–1800

The need for histories of disability in non-Western contexts is particularly urgent if we aspire to avoid Euro-American centrism, a narrative that is circumscribed by the experiences of Western Europe and the United States. To quote Helen Meekosha, “contemporary disability studies constitutes a form of scholarship colonialism” whose implications extend well beyond academia. An estimated 80 percent of the world’s disabled people live in the Global South. Although usually well meaning, the ways that agencies such as the United Nations, the World Bank, the International Monetary Fund, USAID, and nongovernmental organizations such as Oxfam choose to frame and finance disability-related projects are almost invariably predicated on Western models of rehabilitation and development based on liberal philosophies, with little knowledge of different non-Western local community practices.

This “disability imperialism,” as we might call it, is bitterly ironic when millions of people in the Global South become disabled as a result of the appalling conditions of many of the sweatshops that produce cheap manufactured goods for the North, or as the direct or indirect consequence of the wars waged by the United States and its allies. For example, recent medical studies have exposed some unexpected repercussions of the U.S.-led wars in Iraq. It is widely suspected that depleted uranium was used in the 2004 bombings of Fallujah. The rate of cancers, congenital anomalies in newborns, including ambiguous genitalia, and other health problems since then has soared dramatically, possibly exceeding that of the survivors of the U.S. nuclear bombing of the Japanese cities of Hiroshima and Nagasaki in 1945.¹⁸


Introduction

In this context, the strategies employed by disability rights activists in the United States are not necessarily the most appropriate outside North America. Take, for example, Disability Pride, a movement grounded in minority identity politics and inspired by Black Pride, Gay Pride, and others. Whereas Disability Pride has been effective and empowering in the United States, it may be a less beneficial tool in locales where focusing on prevention is more urgently needed than focusing on promoting pride.

Scholarship on the contemporary Arab world highlights the dire conditions in which many people with disabilities in the region live. Negative attitudes toward disability are widespread, and, as in many other parts of the world, women and people with intellectual disabilities suffer double discrimination. The problem with some of this scholarship is that it displays the tendency to project backward in time today’s relatively low social and economic status of disabled people and to assume that it must be the relic of the past. Some writers impute this lamentable state of affairs to the supposedly discriminatory statements of the foundational texts of Islam, the Qur’an and the Hadith.
Disability in the Ottoman Arab World, 1500–1800

Given the historiographical near void on disability in the Middle East, however, these backward projections are simply not warranted. This book hopes to contribute a historically grounded perspective to this conversation.

Framing This Book

To the extent that the sources permit it, I am interested in recovering and documenting the lived experiences of people who had impairments. How did Arabs view and treat people with impairments? In what ways did impairments disable individuals? Were impairments fundamental constituents of a person’s identity? How did they inform social, economic, and reproductive relations? Were people with impairments ostracized, marginalized, or integrated? Were their conditions attributed to divine punishment or to moral failing? What role did religion play in the construction of and attitudes to impairments? In what ways were the experiences of impairment influenced by gender and by socioeconomic class?

Like most historians of disability today, I believe that disability is as essential a category of analysis as the more familiar triad of race, class, and gender. And like many historians of disability today, I take a social constructionist approach that employs the “social model” of disability. The “social model” replaces the earlier “medical model,” according to which disabilities are medical problems that reside within the individual and, as such, are pathologies in need of correction and rehabilitation, existing independently of historical processes and cultural practices. Earlier histories of specific diseases (leprosy, for example) were usually framed within the medical model of disability.

Some scholars maintain that the social model is premised on a distinction between impairment and disability. An impairment is whatever a given society regards as an anatomical abnormality or physiological loss of function and is built on a belief about function, whereas disability is the systemic societal response to perceived impairments. In other words, while impairments are not transhistorical, they are more “objective” than disability within a given society. Thus in the United States in the twenty-first century, nearsightedness (myopia), a physiological condition of the eye, can be considered an impairment...