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MEGAN OBOURN

## Octavia Butler's Disabled Futures

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**P**rominent theorist in queer disability studies Robert McRuer points to a generic affinity between disability theory (or as he terms it, “crip” theory) and science fiction when he vows, “It’s a crip promise that we will always comprehend disability otherwise and that we will, collectively, somehow access other worlds and futures” (208). McRuer’s statement suggests that thinking differently and creatively about bodily norms and standard expectations for health and ability is a path to imagining “access to other worlds and futures.” Lee Edelman, speaking from a queer perspective, has warned us of the potentially exclusionary nature of politics that rely on the fantasy of better futures, particularly those that come in the form of heteronormative reproduction and the fetishizing of the child as a symbol of innocence who must be protected at all costs. Edelman proposes that “reducing the assurance of meaning in fantasy’s promise of continuity” could allow us to see the political conservatism and violence inherent in such ideologies of “reproductive futurism” (39). Edelman and McRuer both gesture toward the possibility of a future that does not promise continuity, security, or assured meaning. A “crip” promise for the future is not about the child as fetishized product of a teleological drive, but rather about broader collective access to resources and alternate understandings of bodies and ability. McRuer’s promise crips the logic of reproductive futurism and repositions future-oriented thinking from a political teleological space to a literary speculative space such as that of science fiction, a genre that is

already, as Michael Bérubé suggests, “as obsessed with disability as it is with space travel and alien contact” (568).

Following the logic of these connections between queer futures, disability, and speculative fiction, this essay explores how Octavia Butler’s Xenogenesis trilogy (*Dawn* [1987], *Adulthood Rites* [1988], and *Imago* [1989]) offers similar ways of comprehending “otherwise” via access to “other worlds and futures.” I choose to focus on the Xenogenesis trilogy not because Butler’s other work fails to address issues of disability, gender, sexuality, and race, but because the trilogy deals most directly with medical narratives of cure while resisting a utopian/dystopian dichotomy.<sup>1</sup> I read Butler’s science-fiction trilogy through a critical lens of disability that is flexible enough to incorporate, without overshadowing, queer, feminist, and critical-race approaches to the novels. In so doing, I suggest that Butler’s trilogy presents what I will call a “disabled futurism” that revalues injury, impurity, and lack and thereby resists “the compulsory narrative of reproductive futurism” (Edelman 21) while retaining a feminist narrative that values motherhood (specifically black motherhood) as a historically determined and embodied social identity and political position.

Most critical work on Butler’s trilogy argues that the novels provide alternate narratives of, or narrative distance in relation to, womanhood, blackness, sexuality, and social identity. These approaches are generally poststructuralist and read the experiences of the main character, a black American woman named Lilith Iyapo, in relation to the Oankali aliens as rewriting narratives of colonialism, slavery, motherhood, and restrictive ideologies of pure or essentialist identity.<sup>2</sup> Most critics note, as

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1. Jessie Stickgold-Sarah describes Butler’s trilogy as dystopic in that her futures “echo the negative features of our own,” while also “looking to the future with an optimism that always believes something better may come” (416).

2. For example, Frances Bonner reads the Xenogenesis trilogy as an anti-utopian slavery allegory that explores the troubling “intermingling of slavery and desire” (53); Amanda Boulter reads it as a rewriting of black womanhood via “homeopathic reworking that imbibes the violent structures of the past to create something new” (181); Elizabeth Billinger reads it as a narrative estrangement from humanity that provides a perspective from which to see and critique ourselves; Naomi Jacobs argues that the Oankali-human hybrids represent a hope for a posthuman future that no longer “clings to”

Donna Haraway puts it, that “catastrophe, survival, and metamorphosis” are “Butler’s constant themes” (*Simians* 226). Given that disability narratives are also often structured in terms of catastrophe, survival, and growth/change, it is striking that not many critics have read Butler through a disability lens.<sup>3</sup> A disability focus helps to explain, if not resolve, the paradoxes and contradictions that arise when queer readings of Butler’s texts attempt to deal with race, and when critical-race and black-feminist readings attempt to deal with the trilogy’s challenges to identifiable and consistent social identities. A disability focus also helps us to revalue the histories of pain and interdependence that constitute minority social identities, as well as to think about how one might narrate race and gender “otherwise” without losing them as sites of identity and identification.

A central concern within disability studies is the issue of accessibility (to physical spaces, employment, and political and cultural representation) for persons with bodies that don’t match what our culture deems normal or healthy. A second area of concern is that of recognizing the interdependence of all people so that those who have particular types of needs—such as home care or physical or chemical assistance in performing tasks that others of us do without them—are not stigmatized as a drain on society. Disability theory points out the ways in which we are

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the sense of individual agency and identity that troubles Lilith (97); Éva Federmayer perceives an allegory and critique of U.S. slavery that also acknowledges the black female body as a “bridge” between master and slave (98); Patricia Melzer observes a multiplicity of simultaneous discourses that “juxtapose affirmation of difference with experiences of colonization and slavery” (36); Aparajita Nada sees the trilogy as a posthumanist response to colonial exploitation; Melzer and Traci Castleberry see the ooloi as representations of alternate sexualities; and several critics—including Boulter, Stacy Alaimo, and Christina Grewe-Volpp—read *Xenogenesis* as a deconstruction of the nature/culture binary that has historically underwritten oppressions of women and people of color. Finally, and perhaps most famously, Donna Haraway argues that *Dawn* “draw[s] on the resources of black and women’s histories and liberatory movements” to “interrogat[e] . . . the boundaries of what counts as human” and to create a cyborg heroine in Lilith (*Simians* 226).

3. One critic, in fact, performs a clearly antidisability reading when she suggests that the *Xenogenesis* trilogy reveals “the weakness of the human form” as “a universal dissatisfaction and one which any consideration of the human race would seek to transcend” (Billinger 98).

all dependent on one another, though some structures of dependence are less visible and more normalized than others, and looks for ethical political and social models that value interdependence and reciprocal care. Butler's *Xenogenesis* trilogy can be read as a speculative representation of social models of accessibility and interdependence that revalues disease by presenting able-bodiedness and xenophobia as conditions of illness. As Lilith is made to experience lack of independent access to physical spaces, clothing, and food, she becomes more aware of the limitations of her able-bodied ideology. Ultimately, she must learn to live within an interdependent public culture. Her race and gender figure as aspects of her identity that reinforce a reliance on ideals of able-bodiedness and independence, as well as making her more adaptable. Her children's narratives in the second and third books rewrite, echo, and repeat Lilith's story, inheriting, if not precisely embodying (and thereby crippling without losing), Lilith's social identities.

Butler does not present queer, critical-race, and disability narratives as neatly overlapping or always liberating. The price of interdependence and accessibility is revealed to be a loss of historical identity. And the bodily and environmental changes needed to create a more interdependent and accessible future rely on practices of genetic engineering designed to eliminate humanity as a disabled species. The trilogy presents what Leonard J. Davis has referred to as a "dismodern" future—one in which "the ideal is not a hypostatization of the normal (that is, the dominant) subject, but aims to create a new category based on the partial, incomplete subject whose realization is not autonomy and independence but dependency and interdependence" (241). Butler's trilogy examines what a dismodern future might look like and some of the paradoxes and violences that one might find on the road to it and within it. I argue that Butler does present us with a possibility for an interdependent, dismodern future, but one that is not future-oriented in a utopian or dystopian teleological sense. This future has to incorporate pain, loss, impairment, and appreciation for the value of disability, both in terms of bodily difference and in terms of identity construction.

## Sacred Image of the Same, Sacred Image of the Different

Xenogenesis unfolds in large part as a story of motherhood.<sup>4</sup> In *Dawn*, which is divided into sections titled “Womb,” “Family,” “The Nursery,” and “The Training Floor,” Lilith Iyapo awakes aboard an Oankali ship in a small, bare room with no doors and is interrogated by voices whose source she cannot see. Earth has been nearly destroyed by human nuclear war. The Oankali, her alien captors, are working to repair Earth as they keep those humans who survive in a naturally induced, suspended-animation sleep. As the novel unfolds, Lilith becomes part of an Oankali family, is selected as a parent figure for the newly awakened humans, and eventually becomes pregnant with a human-Oankali baby conceived via her relationship with an ooloi (the Oankali third gender), Nikanj, and her now-dead human mate, Joseph.

The next two novels take place on Earth and follow the development of human-Oankali hybrid communities and human-only resister communities. The hybrid communities live on constructed landscapes made of the same biological material that constitutes the Oankali spaceships. They live in family groups of five: a male and a female human, a male and a female Oankali, and one ooloi, the third-gender, gene-mixing Oankali. The human-only communities are places of violence and sadness, largely because the Oankali have extended human life but made it impossible for humans to reproduce without mating with an Oankali. Their rationale is that it would be unethical to allow humans to reproduce due to a “genetic flaw,” namely an inherited combination of hierarchical tendencies and advanced intelligence. The Oankali—while physically drawn to humans in part because of this genetic anomaly—believe that it is their moral duty to repair any illness they find in individual bodies and to prevent a purely human line genetically programmed to destroy itself to continue to procreate.

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4. In fact, the trilogy is currently published under the title *Lilith's Brood*. Motherhood has been noted as a central trope by many critics of Butler's work, leading them to read Lilith as either an allegorical figure of black women's historical sexual oppression or as a role model for and originator of a freer, postidentity future. For examples of the former reading, see Bonner, Federmayer, and Melzer; for the latter, Boulter, Parisi, and Jacobs.

*Adulthood Rites* is focalized through Akin, one of Lilith's male Oankali-human children (these children are first referred to as "hybrids," but for most of books 2 and 3 they are called "constructs," the term I prefer and will use here). Akin is taken at an early age by resister humans and becomes sympathetic to their desire to continue the human race, despite its genetic flaws. He lobbies and receives permission for a Mars colony of humans who will be given back their reproductive abilities. The final novel, *Imago*, is the only one narrated in the first person, by Jodahs, the first human-born ooloi construct. Jodahs needs others, particularly human others, to have a self and in fact takes on physical characteristics to please the humans it desires to mate with. Jodahs finds a community of humans who have not been altered by the Oankali: they have nonenhanced life spans and have been reproducing, but given the effects of the war, the small number of people in the town, and the presence of genetic diseases, they have bred children with deformities and diseases. Many of these humans accept the human-Oankali ooloi as a potential mate, thus beginning another cycle of heretofore unknown reproductive practices.

Once one begins to look at the discourse of disability, health, reproduction, and medicalization in the trilogy, concerns central to disability theory become just as important and inextricable as those derived from feminist, postcolonial, and critical-race readings of the text. Butler allegorizes rehabilitation and accessibility as models of social change which align with African American political movements—rehabilitation most strongly with the Black Women's Club Movement and a politics of racial uplift, and accessibility most strongly with civil rights demands for equal access.<sup>5</sup> Rehabilitation and accessibility also represent the

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5. The Black Women's Club Movement was a subset of the broader Women's Club Movement of the mid-nineteenth through early twentieth centuries. At a time when women did not have direct access to political power, women's literary, church, and social justice clubs allowed them to share knowledge and effect social change. The Black Women's Club Movement was composed of predominantly middle-class African American women in the Northeast and focused on gaining equality for black women via education, the cultivation of skills and talents, and successful assimilation into a middle-class lifestyle. Mary Church Terrell, in her address to the National American Women's

two central approaches to disability in the contemporary United States: the individual, body-oriented medical approach and the socially oriented civil rights approach. Butler's texts reveal the ways in which narratives that focus on progress toward accessibility often also rely on aspects of the rehabilitation model. The trilogy suggests that both models have the potential to reproduce ideals of bodily purity, thus pointing to some paradoxes that arise in imagining a shift from our world to a more accessible and interdependent one.

*Dawn* begins with a set of oppressions based on a lack of physical accessibility. The Oankali ships are made from organic material that responds to Oankali biochemical touch, allowing the Oankali to open and close doors, to access food, and to create beds, tables, and separate rooms, such as the one Lilith awakes in:

The walls were light-colored—white or grey perhaps. The bed was what it had always been: a solid platform that gave slightly to the touch and that seemed to grow from the floor. There was, across the room, a doorway that probably led to a bathroom. She was usually given a bathroom. Twice she had not been, and in her windowless, doorless cubicle, she had been forced simply to choose a corner.

(5)

While one might read this room as a jail cell or slave quarters, Lilith's isolation and the description of the room as sterile, white/grey, and furnished only with a standardized bed recall a medical institutional setting. The separate bathroom that she "usually" has access to indicates a space constructed through medicalized discourse, in which privacy is nominally acknowledged as important but not consistently granted as a right to those marked as ill. Additionally, Lilith is not made to perform labor (though later she will be impregnated and perform reproductive labor without her verbal consent), nor is she being punished. She knows she has been operated on due to "the long scar across her abdomen," which turns out to be where the Oankali

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Suffrage Association in 1898, declared black women "handicapped" only because of their sex and race, not in their inherent abilities (8).



have removed a cancerous growth (6). Lilith finds herself in the position of a patient without full control of her own care, both grateful for her bodily health and angry at her lack of ownership of her body: "It enraged her . . . that there had been moments when she actually felt grateful to her mutilators for letting her sleep through whatever they had done to her—and for doing it well enough to spare her pain or disability later" (6–7). Here we can already see the competing discourses of medical health, focused on saving/curing individual bodies, and social accessibility, focused on gaining access for all bodies to the same spaces and resources. Lilith's situation can be read as an allegory of slavery, colonialism, and violence done to women's bodies. But each of these readings must also take into consideration that Butler puts Lilith in a position in which she must learn to live as an institutionalized, diagnosed subject, with a dependent body, who lacks the ability to affect her environment and achieve the same access to physical spaces and necessities as those with contextually normative bodies.

The likelihood that Butler used Henrietta Lacks as one model for the Lilith character also suggests a reading of the trilogy as a direct response to historical uses of medical discourse. Lacks, the African American woman whose cancerous cells (which came to be known as HeLa cells) proved to be an "immortal" line that led to the discovery of a polio vaccine, in vitro fertilization, cloning, and gene mapping, was never compensated for her contribution to medical science, nor was her family. Rebecca Skloot explains in her book on Lacks that part of the excitement surrounding the HeLa cells was the possibility that they might hold the key to human life extension or to the making of "designer babies"—rather like the Oankali are able to do with gene manipulation (216–17, 214). As Priscilla Wald notes, "With her interest in science and race, Butler was almost certainly familiar with the famous donor. But whether or not she had Henrietta Lacks explicitly in mind when she created [her] protagonist . . . , the *Xenogenesis* trilogy[] addresses the ethical questions surrounding the famous case" (1908). These include questions about autonomy in medical treatment and bodily ownership as well as the impact of social identities (such as race and gender)

on access to medical treatment and legal rights to one's own body (1908).

The Oankali interpretation of humanity as disabled reinforces a medicalized reading of Lilith's experience. The Oankali believe that they are helping the humans whose "own bodies handicap[] them" (38) and hope that after their rehabilitation, humans will voluntarily mate with the Oankali, thus breeding out the "handicap." But Lilith hopes that if humans can come to understand their captors and learn to live on Earth again, they can escape and still survive. Lilith's rebellious plan reads as a parable for consciousness raising and community building among the enslaved or colonized who have been kept isolated from one another by oppressive power structures. Yet the disability rhetoric involved in that oppression is never addressed. While the humans don't want to have "alien" babies, they never discuss the Oankali representation of humanity as illness but rather continue to treat their human bodies as individual agential entities over which control and ownership should be maintained. The disability politics that could help the humans to survive and to respond to the demands of the Oankali are not available to them as resources. To some extent, Lilith's and the other humans' weakness lies in their treatment of their situation purely as one of race-based enslavement or colonization, and their nonrecognition of or inability to deal with the paradoxes of the medical and disability models involved in their subjection and captivity.<sup>6</sup>

While Butler does allow us to read the humans as oppressed by the medicalizing and isolating practices of the Oankali, the Oankali in fact present alternative discourses and lived models that enable a more universally accessible and interdependent

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6. This same nonrecognition of disability models leads to limitations in some critical readings of the trilogy as well. For example, Frances Bonner, who reads Lilith as a figure of the enslaved woman, can't understand why Butler and Lilith would accept the "rape" of the humans by the Oankali. She writes: "it seems to me quite reasonable to apply [the term rape] to the early instances of inter-species sexual activity. . . . Yet the language used would not be all that inappropriate at the getting-to-know-you party" (57). Part of Bonner's frustration comes, I think, from not recognizing the simultaneous disability and queer discourses at work in Lilith's relationships to both the Oankali and the other humans.

world, based on a biological rather than a social model.<sup>7</sup> The Oankali can communicate through sensation rather than speech, which allows them to connect to one another and come to communal consensus when making decisions that affect them as a whole. In their use of living materials for their ships and modes of transportation, they have to maintain mutually beneficial relations between themselves and their environment—an environment that is fluid and provides accessibility and comfort to multiple body types (of which the Oankali have many due to their history of gene-trading). Additionally, the Oankali revalue human categories of disease and illness, ability and disability. While they see the human species as carrying a genetic disability, they see certain diseases, such as cancer, as bodily “talent” (22).<sup>8</sup> Their investment in human health is not about creating a perfect-looking body, or even a particular type of body, but one that can live well in its environment. The Oankali tell Lilith that she has “been given health. The ooloi have seen to it that you’ll have a chance to live on your Earth—not just to die on it” (33).

What becomes clear, however, is that both the social-rebellion model of the humans and the medical-health model of the Oankali rely to some extent on rehabilitative ideologies of ability and bodily perfection. To escape or to be allowed to go to Earth, the humans must be rehabilitated physically and mentally. Any genetic disorders are “fixed” by the Oankali, and any humans who do not cooperate or who demonstrate anger, mental instability, or violent tendencies are kept aboard the ship. These ideologies of health and purity increase in *Adulthood Rites* and *Imago*, which take place on the more dangerous and unknown regenerating Earth. The human-Oankali communities on Earth are able to embrace physical and sexual fluidity, indeterminacy, and change. They have children who are mixed Oankali and human and who won’t know their adult forms or genders until after metamorphosis. At the same time, they maintain fixed

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7. J. Adams Johns has suggested that Butler uses the Oankali to engage with the discourses of sociobiology, including biological essentialism and genetic determinism.

8. Again, this echoes society’s treatment of Henrietta Lacks’s cancerous cells as a medical miracle while denying medical care, knowledge, and monetary reimbursement to her and to her family.

understandings of what a healthy body is and refuse to entertain the idea that disability can have value, believing that anyone who does not seek the medical attention of the ooloi is suffering from self-destructive mental illness.

The “disease” that the Oankali cannot allow to continue is the condition of being human. The combination of hierarchical tendencies and intelligence that is a symptom of this disease must be eliminated because it might lead to death. But Butler critiques the Oankali diagnosing and “treating” of this disease without the humans’ consent as a limiting and potentially violent response. The trilogy pushes for more knowledge of the disability, not the erasure of the person who carries it, focusing on characters who challenge the Oankali approach via an identification with the disabled humans. As Butler has commented in an interview:

[H]ierarchical behavior is definitely inborn and intelligence is something new that we’ve come up with and like I said, I happen to think that the combination is lethal. I think that it doesn’t have to be lethal if we deal with it. But unfortunately, the ways in which we tried to deal with it in the past have not really acknowledged the problem. Too often when people start talking about inborn characteristics, they start talking about who shall we eliminate, who has the negative characteristics. And we get to decide what’s negative and we get into the eugenics and the real nasty stuff where people use something that could be and is in fact part of behavior science as a reason to put somebody else down to get rid of your enemies, using science for hierarchical purposes.

(“Black Scholar” 17)

The Oankali, while constructing an ethically minded approach to bodily health, still rely on a paradigm of control of the body, and one which is used in a hierarchical manner. Butler here addresses a central question of disability studies. As Susan Wendell puts it: “Even supposing that everyone involved in [the effort to perfect humanity] were motivated entirely by a desire to prevent and alleviate suffering, what else besides suffering might we lose in the process? And would they know where to stop?” (84). The Oankali, even with their honest and honorable intentions, are characters who demonstrate that there can be severe and unacknowledged loss as a result of medically ori-

ented models of bodily control. While Butler is not suggesting that the human tendency to kill one another is by any means a good trait, she highlights a distinction important to people with disabilities. Most people with disabilities would want themselves and others to live long lives and be cured of pain, but the idea of curing a population by preventing those with disabilities from being born carries with it a genocidal logic.

Even the more human-oriented and human-activist Oankali and construct (hybrid) characters see disability and illness as an absolute evil that any rational, ethical person would seek to eliminate. "How stupid to be sick and know where there was healing and decide to stay sick," says Akin (318). Later, Jodahs reflects: "There used to be Humans who adapted to not being able to see or hear or walk or move. They adapted. But I don't think any of them chose to be so limited" (609). Of course, Jodahs (and therefore, implicitly, Akin) is wrong. Harlan D. Hahn and Todd L. Belt, in considering what they call the "health locus of control" (454), argue that personal identity is linked to communal identity and that the assumption that "all disabled people are presumed to want to eliminate their impairments and that nearly everyone would accept whatever doctors prescribe for them . . . may not be applicable to all populations" (462). Hahn and Belt suggest that quality of life should be defined by those whose lives are being judged. Butler's representation of the Oankali approach to humanity suggests a similar ethic. Perhaps some humans will kill, die earlier than others, and get sick; humans might even die off as a species. But to disallow human choice in the acceptance or refusal of medical treatment and to ignore the psychological importance of existing as a group with a shared social identity is to take the medical model of control to violent and unethical lengths.

Butler's humans, in their willingness to accept disability in the forms of illness, the loss of reproductive capacity, and flawed human nature, nevertheless retain ideologies of racial health and wellness that rely on ideals of pure and normative bodies. First of all, the general human reaction to the Oankali is xenophobia, depicted largely as discomfort with Oankali methods of attaining sensory information: the Oankali sensory tentacles; Akin's

long grey tongue, which he uses to understand things and people through taste; and the various combinations of “human” and “alien” sense organs exhibited by the construct children. The constructs, like the Oankali, learn to act as though they are using their sense organs in an able-bodied human way to avoid negative reactions from humans. In *Adulthood Rites*, two little female constructs are taken in by a human community that cannot have children. The multisensory body of one of the girls, Shkaht, is described in detail:

She had a normal Human tongue, but each of her grey tentacles would serve her as well as Akin’s long, gray Oankali tongue. Shkaht’s throat tentacles gave her a more sensitive sense of smell and taste than Akin, and she could use her hands for tasting. Also, she had slender, dark tentacles on her head, mixed with her hair. She could see with these. She could not see with her eyes. She had learned, though, to seem to look at people with her eyes—to turn to face them and to move her slender head tentacles as she moved her head so that Humans were not disturbed by her hair seeming to crawl about.

(373)

It is hard not to read this passage as explicitly incorporating disability discourses in relation to, at the very least, the human condition of blindness. Shkaht cannot see with her eyes, but she perceives the world by other means. Because humans associate expected bodily behavior and sense-organ use with humanity as such, the constructs learn to mimic human sight in the same way that many visually impaired people do.

Shkaht’s and her sister Amma’s oppression as a result of human ability fetishism does not stop here. Several of the townspeople want to surgically remove (without anesthetic) the girls’ tentacles. This desire is explained by the surgery-crazed humans from an ability/disability perspective: “They’ll learn to use their Human senses. . . . They’ll see the world as we do and be more like us” (375). However, they can’t, according to Akin, “learn” to use their other senses: their eyes are not made for seeing, while their tentacles are. The text demonstrates that this antidisability discourse is gendered and sexed as well. “It was criminal to allow little girls to be afflicted with such things,” argues one of the townspeople: “Girl children who might someday be the

mothers of a new Human race ought to look Human—ought to see Human features when they look[] in the mirror.” Another asks, “How can little girls grow up to be Human women when their own sense organs betray them?” (391). Here the debate takes on connotations not only of sensory norms but of binary and essentialist gender norms. The humans use the same quality of life argument as the Oankali—that it would be “criminal” to allow Shkaht and Amma to live a life in which they would experience psychological and social pain. While one might argue that the Oankali approach is the more benevolent, in that they are attempting to save lives without physical pain, the text also reveals the parallel logics behind the human and Oankali approaches to bodies read as physically ill, inept, or malformed. Neither approach takes seriously the possibility that social change could lead to higher qualities of life; both look to “fix” bodies through medical intervention.

The assumptions behind debates such as these have been addressed in intersex studies. Anne Fausto-Sterling points out that medical discourse promoting surgery on intersex children whose bodies challenge binary gender norms reproduces ideologies about ability and disability, health and illness: “Generally doctors inform parents that the infant has a ‘birth defect of unfinished genitalia’” and that physicians can “identify the ‘true’ sex that lies underneath surface confusion” (50). Fausto-Sterling argues that the ideology of binary gender is presented as a sign of medical wellness to justify unnecessary surgeries that can cause physical pain and loss of genital sensation and function. She responds in a twofold manner to quality of life arguments, which rely on a logic of reproductive futurity and are similar to those used by the humans and Oankali. She argues first that quality of life cannot be predicted ahead of time. Second, she argues that the “medical imperative” to surgically or genetically “cure” what is essentially a social problem can cause more injury than it alleviates.

In its similarity to debates surrounding intersex children, Butler’s presentation of Amma and Shkaht complicates a reading of the trilogy as only about racial oppression via heterosexual forced reproduction. Reading the trilogy through a disability

lens does not prevent us from seeing the Oankali as colonizers or the humans as racist, miscegenation-fearing purists. But it does help us to see that bodily violence often happens not at the level of an abstracting, dehumanizing “othering” but on a level that attempts, in the guise of the humane, to allow bodies access into the realm of the healthy and fully human. The humans in the trilogy cling to certain body types to reinforce a human identity; the Oankali insist on a fixed, gendered combination of family units in order to produce medically “better” bodies. A disability reading highlights the ways in which racial and gender violence, in its systemic nature, is related to specific individual bodies and their constructed and policed boundaries and functions. Additionally, it reveals how phobias about the disabled body infiltrate our understandings of gender and sexuality, as well as how fear of disrupting the two-gender system (which relies on bodies that can perform normative heterosexual sex) helps to construct which bodies are read as abled and which are read as disabled.

Fundamentally, then, both the Oankali embrace of diversity through genetics and biology and the human investment in maintaining a sense of cultural and racial identity by fighting their oppressors rather than submitting to change rely on culturally sacred images of health and bodily purity. This is not to say that there is not great value in searching for medical cures and in building communities based on a shared social identity. Yet these drives, when unchecked, lead to practices that devalue and attempt to eliminate certain bodies. Near the end of the trilogy, the group of humans who have had little contact with and have not been genetically altered by the Oankali still feel that “it was better to have no children . . . than to have un-Human children” (661). Jodahs responds by asking them, “Why should your people want to stay here and breed dead children or disabled children?” (637). Both viewpoints conflate a state of perceived disability with one of death. Here the politics of assimilation or of separatism as we might read them along racial lines become complicated by the question of disability. What in one reading looks like a political refusal to be forced into giving up reproductive freedom, in ways that echo the oppressions of U.S. slav-



ery, becomes in another reading its own form of genocidal drive to rid the world/universe of the bodily different.<sup>9</sup> What in one reading looks like a willingness to accept difference, otherness, fluidity, and change reveals in another a potentially genocidal drive to eliminate those with mental or physical impairments.

### Survival and Adaptability

Donna Haraway has described Octavia Butler's work as "survival fiction more than salvation history" (*Primate Visions* 378). I propose that the survival narratives at work in the *Xenogenesis* series are sites from which to read discourses of disability in relation to representations of raced and gendered experiences and to rethink the roles of women of color in colonization histories.

Near the end of the trilogy, Lilith tells the human Jesusa that she "did [have a choice], oh, yes," even in her captivity: "I chose to live." Jesusa, a much younger woman who has had little contact with the Oankali, disagrees: "That's no choice. That's just going on, letting yourself be carried along by whatever happens" (672). To a reader who has experienced the history of Lilith's struggles, Jesusa's comment registers as ignorant, immature, and judgmental, particularly as she herself has done little to get out of her own approaching forced participation in her human community's reproductive system.<sup>10</sup> Lilith does not defend herself, but in the silence she leaves us with, we as readers are asked to reflect on the truth of her statement that under certain circumstances, to continue to live is a choice.

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9. For example, Boulter's reading of the trilogy as an allegory for slavery that reworks histories of violence against black women's bodies causes her to overlook other kinds of violence against bodies in the novels and ultimately entails a reliance on an ideology of ability and health to heal the wounds of African American history.

10. While one could read Jesusa as representing the limitations of institutional religion, I think it makes more sense to see Lilith and Jesusa as a rewriting of pre-Christian and Christian mythology. In some versions of the Lilith myth, Jesus's coming will end Lilith's (the slave woman's) relationship with God, which she has tricked him into. Here Jesusa learns from Lilith's experiences, revaluing connections between women in a patriarchal mythology that has denied their importance.

Reading the humans' situation through the lens of disability theory helps to clarify how and when living becomes a choice. Waking up to find that one is disabled and no longer owns one's body, as Lilith does, changes the terms of what it means to "just go on." Now disabled, Lilith needs to deal with pain, a lack of independent access to resources, and the judgments of others. In the case of prenatal screening for disabilities—which provides a context for reading the way in which Lilith at first perceives her pregnancy ("[I]t won't be human," she says, "It will be a thing. A monster" [247])—parents are explicitly given a choice about someone else's "just going on." This reading complicates Lilith's role as a version of La Malinche, a woman of color who aids colonization by translating for or reproducing with the colonizer and is generally read as either a race traitor or a rape victim. In making this a choice not about loyalty or treason, purity or corruption, agency or abjection, but rather about the ethics of living with disability or caring for another who does not read as fully healthy or fully human, Butler opens up narrative possibilities for colonized motherhood as a choice made within highly restrictive, oppressive, and self-negating circumstances.

Rayana Rapp and Faye Ginsberg argue that American ideologies of gendered and privatized caretaking restrict social inclusion and support for persons with disabilities. Presenting a cultural dialectic between perfectibility and inclusion as opposing narratives generated by medical technology and disability activism, Rapp and Ginsberg identify kinship as a primary site for assigning meaning to disability. They demonstrate how choices about children with disabilities are often presented as the individual choices of mothers, who then "face contradictory options that exceed the extant framework for ethical deliberation" (544).

In the trilogy, Butler stages these contradictory choices as a central narrative theme but does not fall prey to what Jane Stemp describes as the science fiction and fantasy trope of holding out "the image of magical cure for wounds and disabilities" (3). Nor does she repeat the typical science-fiction narrative of genetic revolution as a neo-eugenic dystopia of monstrous kinship. Traditional science-fiction narratives often replicate the binary eth-

ical framework at work in disability politics, structured as the harmful perspective of reproductive technology versus the liberating perspective of social movements to increase the rights of those with disabilities. Butler provides a less dichotomous approach by taking seriously the possibility of looking at monstrous kinship through a queer lens as a form of nonnormative kinship. We are made to see the horrors that Lilith experiences as her sense of bodily integrity is threatened and her options for survival are dictated by others who do not share her culture, history, or identity. We are also asked to recognize how a more communal, more interdependent model might take away a liberal American ideal of individual choice but also offers structures for family and community that are more accepting of bodily difference, more flexible, and more humane. The trilogy takes communal support and decision making seriously but also demonstrates how communal versus individual choice can injure people who experience it as racial oppression, lack of reproductive choice, and rape.

Xenogenesis foregrounds adaptability, as opposed to assimilation or xenophobia, as a way of choosing life and as a necessity for living. Adaptability is presented as a personal, individual, and bodily oriented change, but one that is required of everyone in order to mitigate the potentially violent effects of ideologies of health and wellness that reproduce restrictive understandings of ability/disability, human/other, and future/past. Akin and Jodahs, the protagonists of *Adulthood Rites* and *Imago*, respectively, represent and function as tools of exploration for the possibility of adaptation as life.

Akin is the first male construct (Oankali-human hybrid) born to a human mother. The Oankali see human males as exhibiting the most violent symptoms in relation to their genetic illness of hierarchical intelligence; hence a construct male born of a human mother might, they fear, have the abilities of the Oankali but the illness of the human. Akin, then, is an experiment in adaptability. The Oankali have a queer understanding of gender to the extent that they see it as ideally fluid and individually choice-based, but due to their fear of reproducing illness, they have enacted binary (and racially coded) models that restrict individual

choice. They likewise have a fluid and socially constructed model of race that applies to both humans and Oankali. The Oankali thrive on “gene-mixing” to create new racial forms and in fact must do this to live; thus adaptability to new forms and identities is part of their understanding of themselves. Human understandings of race are also figured as historically constructed. Akin’s male Oankali parent explains to him that “the differences [he] perceive[s] between Humans—between groups of Humans—are the result of isolation and inbreeding, mutation, and adaptation to different Earth environments” (262). His reading leaves out adaptation to historical violence, oppression, and geographical migration, but as human readers, we can be assumed to add these factors to the biological evolutionary explanation of the Oankali. Given his inherited ideologies of race and gender, Akin should be one of the most open, adaptable, and accepting beings yet created. Even he, however, carries fears of otherness, not in relation to race, gender, or sexuality *per se* but rather in relation to bodies that he perceives as ill or disabled—perceptions that inevitably intersect with and impact his readings of race, gender, and sexuality.

While Akin is curious to know more about the resister humans, he is repelled by their inherited health problems and their decision not to go to the Oankali for treatment. “It was *wrong*,” he thinks, “to allow such suffering, *utterly wrong* to throw away a life so unfinished” (326). It is not until Akin is abducted from his multispecies family and forced to spend an extended period of time with humans that he gains an understanding of them as “a truly separate people” (378). This captivity narrative recalls U.S. racial histories and highlights how captivity narratives both enable understandings of difference and disable normative modes of being for the person taken captive. It is Akin’s development of disabilities, in an Oankali sense, that allows him to comprehend that there are different ways of perceiving and experiencing the world. When he returns home from the human resister village, he is an outsider: “his world was made up of tight units of people . . . who could not let him in, no matter how much they might want to” (429). His isolation is due in large part to his lack of development in Oankali ways

of communicating and interacting: "He could remember a time when blending into others seemed not only possible but inevitable. . . . Now, though, because he had not been able to bond with [his closest sibling]," he "spent as little time as possible with it" (429). Akin has taken on human ways of being that read as a disability within his own community, but which also give him an experiential knowledge of otherness that cannot be learned even through Oankali sense organs.

Before his captivity, Akin had feared Oankali forms with sense organs different from those he was familiar with. At a young age, Akin is given a sensory image of a caterpillar-like form of Oankali that speaks "in images, in tactile, bioelectric, and bioluminescent signals, in pheromones, and in gestures" but is deaf, with "throat and mouth parts [that] won't produce speech" (262–63). To Akin, "this seemed terrible . . . Oankali forced to live in an ugly form that did not even allow them to hear or speak" (263). At this point Akin is unable to imagine the experiences of those with different bodies and modes of perception. After his captivity, when he, too, feels not fully capable of communication, he is taken to the Oankali ship to meet one of the caterpillar creatures and realizes that this strangely embodied creature is "[a]s Oankali as Akin himself" (453). From this Oankali, Akin learns about interdependence rather than difference. Akin is afraid to merge with the Oankali, an experience "greater than any blending Akin had perceived." He wonders how one can, in such a state of connection, "continue to think at all as [an] individual[]" (453). At first, the experience feels "like drowning" (454), for Akin understands himself as a bounded individual body, and merging is a threat to his sense of self. But he leaves the experience understanding that "no matter how closely he was joined to the . . . ooloi, he was aware of himself . . . somehow . . . he was still himself" (455). Akin takes away from his experience on the ship a willingness to give himself over to others, as well as a new appreciation for the Akjai's body as "strong" and "versatile" rather than horrific (456).

*Adulthood Rites* ends with Akin successfully making the case for an Akjai-human community on Mars. Like Lilith in *Dawn*, Akin has had to reconcile acknowledgment of the experiential

otherness of others with a willingness to be affected by and even merged with others whose ways of being feel like a threat to his understandings of bodily health. Both of these ways of seeing come to him through a shift in his perceptions about ability and disability.

Jodahs, the ooloi protagonist of *Imago*, is also indoctrinated into the Oankali ideology of ability. Jodahs views the human plan to reproduce on Mars as a dead end: “[T]hey would suffer so. And in the end, it would all be for nothing” (530). It tells the humans, “if you want to see the future, take a look at some of the third- and fourth-generation constructs” (529) who are “free of inherent flaws” (530). Yet Jodahs’s surprising metamorphosis, which reveals it to be becoming ooloi rather than male or female, puts its own body in a differently abled and potentially disabling position. Jodahs is perceived by the Oankali as a construct “gone wrong” (536). The worst outcome for Jodahs, according to the Oankali, would be if it were “flawed” in any way, if it did not have full control over itself:

A flawed natural genetic engineer—one who could distort or destroy with a touch. Nothing could save it from confinement on the ship. Perhaps it would even have to be physically altered to prevent it from functioning in any way as an ooloi. Perhaps it would be so dangerous that it would have to spend its existence in suspended animation, its body used by others for painless experimentation, its consciousness permanently shut off.

(542)

The paradoxical logic, then, is that a differently abled body must be perfect and in control in every way so as to be safe and responsible to others; the only other choice is institutionalization and the Oankali equivalent of a lobotomy. Jodahs is not always completely in control. What keeps him from confinement to the ship is Nikanj’s (the same-sex parent’s) protection, guidance, and ability to see beyond what Oankali would normally consider ethical or healthy. Nikanj changes its own perceptions of the world to make room for Jodahs. Jodahs understands this as learning to live with disability. “I was like a blind Human,” it says, “trampling what I could not see. . . . What I was missing was something I had never had—or at least, something I had never discovered”

(569). Nikanj encourages Jodahs and its sibling, Aoor, who will also become ooloi, to “Do what your bodies tell you is right. This is a new relationship. You’ll be finding the way for others as well as for yourselves” (567). Nikanj’s parental role leads it to deny what its own body tells it in order to allow for the safety and well-being of its newly embodied offspring. At one point, Nikanj suggests that Jodahs carry a machete for self-protection, a sign of adaptability quite striking given the essentialist biological perspective of the Oankali, who “had no history at all” of violence: “violence . . . was against their flesh and bone, against every cell of them” (564).

Jodahs, it turns out, relies less on physical violence than on physical desire: Jodahs can be in control only when it has found mates. Thus its safety and the safety of others is based on a sexually oriented interdependence. It spends most of the novel looking for human mates and finally finds them in a colony of humans who have been reproducing among themselves, and reproducing illness and physical deformity. What Jodahs reads as terrible and repulsive disability—not only the humans’ diseases but also their “short” (pre-Oankali-enhanced) life span—becomes essential in its ability to bond with them. First of all, it is Jodahs’s body’s queer (transgendered and nonnormative) and not entirely controlled reactions to its environment that allow it to take on forms attractive to its chosen mates. And it is ultimately a mutual recognition based on nonnormative physical characteristics that allows Jodahs to be recognized and accepted by its new mates, Jesusa and Tomás, as itself—that is to say, as ooloi, hybrid, and substantially different than they are. One of Tomás’s early reactions upon seeing Jodahs in a less controlled form (covered in scales after being away for too long from others who might stabilize it) makes Jodahs laugh. Tomás comments, “My god, man, you must frighten more people than we do!” (620). Similarly, Jesusa later identifies with Jodahs’s Oankali sensory spots and tentacles via her own visible tumors, remarking, “Actually, I think mine are uglier” (634). Jesusa’s and Tomás’s experiences with their own disabled bodies allow them to accept Jodahs’s ooloi gender identity, whereas other humans either

insist that the ooloi are male or find them somewhat illegible creatures.

Jodahs as a person who must learn to deal with its body as something ultimately beyond absolute knowledge, control, or individual agency is, like Akin, a rewriting of Lilith's story from a differently embodied position.<sup>11</sup> Jodahs is named after an Oankali who died helping the Mars emigration. His name memorializes a history that, like Lilith's, involves sacrifice for a people one does not see as one's own. Additionally, "Jodahs" recalls "Judas," thus suggesting a connection to betrayal in general, but also to Lilith more specifically, who often refers to herself as a "Judas goat" in *Dawn*. What are we to make of the fact that for the Lilith character to end up relatively happy, with a future of her own, she must be rewritten stripped of female, black, and even human identity? Is Butler calling for a postidentity politics? I argue in the following and final section that Butler explicitly links the possibility of ethical futures to histories of identity that are never fully escapable, and that often rely on an identification with wounded pasts. These futures are nonideal but recognizably interdependent and accessible.

### Disabled Futures

Wendy Brown has argued that the identificatory aspects of identity politics can become "wounded attachments" that produce *ressentiment*, blame, and a cycle of attachment to pain and marginalization. Lennard J. Davis's disability-informed theory of "dismodernism" echoes Brown's critique in that he argues that the political aims of postmodernism in relation to social identi-

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11. Worth noting in this regard is Butler's use of the term "imago" as the title to book 3 of the trilogy. Critics have pointed to its scientific definition of an insect after its last metamorphosis, and certainly Butler had this meaning in mind, but its psychoanalytic sense is also significant. (Grewe-Volpp notes the dictionary definition "idealized mental image" without tracing its source in psychoanalysis.) Jodahs, I would argue, is a performative model of the Lacanian mirror stage in that it takes on its imago from its erotic relations and its environment. Hence "imago" comes to mean both a final stage and a constantly emerging sense of self that is derived as an image from one's environment and the others in it.



ties are “indefensible rationally,” because “[t]he idea of maintaining a category of being just because oppressive people in the past created it so they could exploit a segment of the population does not make sense” (235). Davis, however, revalues rather than rejects the wounds that inform social identity, arguing that all minoritized identities are built to some extent on experiences of being made disabled through unequal access and violence to bodies. We are united by our shared bodily limits. A politics that recognizes disability as a shared foundation for an alternate vision of politics and a fully accessible world could prove more liberating than one that tries to distance itself from a disabled position.

Octavia Butler’s novels exemplify disability theory’s insights that (1) something that is wounded is not necessarily something we want to be rid of; (2) wounds can be a site for social identity and pride; and (3) an ethical politics of identification aims to ameliorate the pain of these wounds without erasing them from existence or memory as a site of identity and identification. Brown argues, “Politicized identity . . . enunciates itself, makes claims for itself, only by entrenching, dramatizing, and inscribing its pain in politics and can hold out no future—for itself or others—that triumphs over this pain” (406). Butler’s novels suggest that a future that “triumphs over this pain” may cause other kinds of pain, including the loss of a sense of social identity, and therefore cultural selfhood, a loss (as Brown notes) that has in large part caused the historical suffering of minoritized social groups.

Many disability-studies critics argue that liberalism as a social and political ideology is not sufficient for negotiating questions about the future for those with disabilities. As Hans S. Reinders points out in *The Future of the Disabled in a Liberal Society*, liberalism upholds “free choice and personal autonomy” (35) as its central “procedural values” (34).<sup>12</sup> Reinders asks us to look elsewhere for the values we might rely on to make political decisions in relation to those with disabilities and posits the experiences

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12. In addition to Reinders, Rapp and Ginsberg and Shelley Burttt address liberalism’s ineffectiveness on issues of social equality and disability.

of parents of children with disabilities as sources for ways to “sustain strategies of inclusion within a liberal model” (36). This approach aligns with Butler’s use of a story of mothering to explore the ethics of reproduction, but in valuing the family as a political model it also risks reinforcing the reproductive futurism that keeps us from imagining “otherwise.” Thus to some extent we see contradictions, or at least differences, between queer and disability perspectives on family, citizenship, and identity-based politics.

As Edelman acknowledges, disabled characters such as Tiny Tim function as cultural symbols for social ills that must be cured in the service of reproductive futurism. Edelman’s theory, however, does not leave much room for a nonfascist, nonheteronormative way of experiencing motherhood or for thinking about actual bodies with actual disabilities. The bodily and mental messiness of childbirth, parenthood, and female sexuality is written out of Edelman’s account, just as reproductive futurism writes that messiness out of proper subjecthood. Is there, then, a way of thinking about a queer future that values aspects of illness without advocating its embrace nor seeing it as a problem for political inclusion?

Without diminishing the differences between queer theory and disability theory, I want to argue that combining aspects of each can help us to discover how Octavia Butler utilizes narratives of disability in relation to parenthood as models for political ethics while resisting the heteronormative (and white-privileged) fetishism of reproductive futurity. *Xenogenesis*, while focused on parenthood—and black motherhood in particular—crips the parents as a moral paradigm model by revealing the historically differential experiences of parenthood for different people, the power structures inherent in who gets to parent and how, and the ideologies of motherhood that reproduce certain forms of care but also limit mothers’ autonomy to choose to care or not. Lilith as mother lies at the limits of intelligibility yet at the same time is a figure already conscripted into historical narratives of nonwhite womanhood and impure sexuality.

Even in the far future, in outer space, and among a race of alien beings, Lilith is read and reads herself as a version of La

Malinche, or a slave mother—the “Judas goat” woman of color whose sexuality is used in the service of forwarding white dominance, colonization, and the killing and exploitation of non-white bodies. This narrative challenges models of reproductive futurism that figure the unprotected child as the emblem of a future. As a woman whose role as mother is coerced and who identifies with a genealogy of other such women, Lilith cannot fully perform reproductive futurity. Additionally, Butler’s model of the futuristic reproductive family unit presents desire and drive as part of coerced sexuality and motherhood *and* as part of the dynamic of care. After all, it is the irresistible chemical attractions between human and ooloi that enable Lilith’s cooperation with the aliens, her pregnancy, and the bonds later developed between Jodahs and its mates. As Haraway notes of *Dawn*, “it is a fatal pleasure that marks Lilith for the other awakened humans, even though she has not yet consented to pregnancy” (*Simians* 229). It in fact figures a possible nonfuture for humanity itself.

The trilogy tells the story of a character without a story—a queer, black heroine of science-fiction and adventure narratives. This is a narrative without fully socially intelligible models.<sup>13</sup> In fact, Butler has to look to Lilith, the apocryphal first wife of Adam, to find a cultural figure analogous to Lilith Iyapo. In ancient Sumerian and Hebrew mythology, Lilith was Adam’s wife before Eve; she refused his power over her and left him to bear a brood of demon children. She was thought to cause barrenness and to harm children. In some versions of the story, she had to make a pact with God to see a number of her own children killed each day (Patai 296). This Lilith is a figure who is not fully legible both because she is noncanonical and therefore unknown to many and because she is a nonidealized mother. As Michelle Osherow notes in her reading of Butler’s use of the mythological

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13. When I’ve taught *Dawn*, students have argued that the book does not provide enough evidence to prove that Lilith is black. Amanda Boulter has noted that readers of *Dawn* have interpreted Lilith as white and attributes that misapprehension to the hegemony of white male perspectives in science fiction. I’d suggest that the threat to human culture and memory and the recontextualization of humanity in relation to the Oankali also disrupt many of the sign systems that allow black womanhood to register.

Lilith, “we are culturally encouraged to maintain maternal idealizations to so great an extent that the mother we cannot idealize is unacknowledged” (77).

Butler’s use of the Lilith myth recognizes our necessary conscription to the narratives that precede us. It reminds us that women have to use others’ texts for their “wounded identities” to exist as identities at all. A sense of oneself as freer in relation to one’s social identity in the future relies on an understanding of one’s social identity through the texts that have constructed it, and those texts, particularly for those with minoritized identities, are usually authored by another. Butler’s choice of Lilith as her model for the wounded history of nonpure, nonwhite, nonpassive, nonideal womanhood is a reappropriation of another’s text and a reliance on that text—oppressive aspects included—to make a space for the future. As Judith Butler reminds us, “fantasy is part of the articulation of the possible” (28), and “to survive is not really separable from the cultural life of fantasy” (29). Octavia Butler’s fantasy is about survival into a future that does not rely on the logic of reproductive futurity: the child is not the fetishized symbol of the future for the mythical Lilith.<sup>14</sup> Thus *Xenogenesis* attends to disability theory’s positing of parenthood as a valuable political model, as well as to Edelman’s critique of the dominant model of the fantasy of futurity, a model that is heteronormative, child-oriented, and exclusive of the very anti-future-oriented *jouissance* that created and sustains it.

This negotiation also resonates with some of the conclusions that Reinders comes to in thinking about an ethical future for those with disabilities in a democratic society. Reinders’s conclusion asks us to see “the good life” not as a progression toward specific achievements but rather as the willingness to “accept vulnerability and the loss of self” as prerequisites to opening

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14. In an interview, Butler states in relation to reproduction and the future: “In one neighborhood the girls living on both sides had decided that they wanted to prove they were women, so they got pregnant, and one of them more than once. I looked at them both, and I saw *no future*” (“Radio Imagination” 70; emphasis added). Here she makes clear the important gender and racial dynamics at play in the reproductive futurism that Edelman critiques.

oneself up to finding “meaning” (205).<sup>15</sup> Octavia Butler’s trilogy echoes these hopes for the future, while also preventing us from using such a theory to posit the vulnerable child as once again the ideal to be protected and the ideological fodder used to disallow others into the realm of the human.

Ultimately, Lilith’s black womanhood is represented in the novels not as a set of disabling wounded attachments but as an enabling set of understandings and strengths, rooted in an inherited history of wounds.<sup>16</sup> Lilith’s social “disabilities”—her womanhood, her blackness, her humanity—are identified with her resources for survival, resources passed down to Jodahs. “I could handle the intensity and complexity [of Oankali, human, and construct],” Jodahs tells us near the end of *Imago* (742). Jodahs sees this complexity metaphorically in Lilith’s hair: “The whole business was like Lilith’s rounded black cloud of hair. Every strand seemed to go its own different way, bending, twisting, spiraling, angling. Yet together they formed a symmetrical, recognizable shape, and they were all attached to the same head.” Here the complexities of human bodies and societies contradict the ideology of straightness, purity, and perfection reproduced by both the humans and the Oankali in their various forms. Butler suggests that a future without pain is no future at all for many of us. The recognition of a future that might inevitably entail pain does not undermine an ethics of accessibility or an ethics of medical care. But it does suggest that those ethics require that we sometimes accept pain, disability, and painful memories as part of our temporal future, a future that looks neither to the perfectibility of bodies nor to full redemption from our social and political pasts.

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15. Susan Wendell articulates this sentiment as follows: “I have concluded that I am always sick and often happy, and this seems very peculiar in my culture” (63).

16. As Federmayer notes, “[Lilith’s] textual figuration . . . is kin to those other ‘sturdy black bridges,’ including Harriet Jacobs’s grandmother in *Incidents in the Life of a Slave Girl*, Claudia’s mother in Toni Morrison’s *The Bluest Eye* or, for that matter, Octavia Butler’s strong grandmother, Sister Butler, who, under the most adverse conditions, managed to sustain life as well as hope in their community” (105).

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