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During my final year of undergraduate studies at the University of California, Los Angeles, I was studying at a café and had with me Seth Mnookin's controversial new book, *The Panic Virus*.^[1]

While I was reading, I was approached by a woman who happened to be waiting for her order by my table. Intrigued by my reading choice, she struck up a conversation with me about my studies and ultimately about Mnookin's defense of vaccination.

An accessible, timely piece of science writing, *The Panic Virus* offers a scathing critique of how anti-vaxxers hijack reason through fear tactics and emotional appeals. The disturbing irony, for Mnookin, is that the casualties of this extensive rhetorical and ideological war are the parents and their children who have taken a stand against what they perceive to be the limitations and biases of scientific knowledge. Before I could finish my two-minute pitch for the book, the woman cut me off to tell me she had no plans to vaccinate her young son. "*Chickenpox you can get over, but autism is a life sentence.*" She then insisted that she was a firm believer in the concept of natural immunity, and that she and her fellow moms frequently scheduled "chicken pox parties" whenever one of their kids at school came down with chicken pox. "Chicken pox parties" involved the deliberate gathering of unimmunized children who were then made to play with the child who was evidently symptomatic of chicken pox. What I first thought was an occasional event, these parties became annual social gatherings that children expected and even looked forward to attending. "*I'm not anti- anything. I'm just pro-disease, she concludes. They don't even know what's going on! Just another play date and, and it's all done naturally.*"

Part of the formation of my research interests in the history of the anti-vaccination movement, particularly at the moment of vaccination's inception and popularization in the eighteenth and nineteenth centuries, begins with this lingering encounter. On one level, what was remarkable was the woman's conviction – one marked by an all-too-familiar affect of certainty that rendered anything I had said or could have said irrelevant. On another, as a twenty-two-year old man just beginning to understand the contours of his own scoliosis-related disability, I lacked at the time the vocabulary by which I could express my reservations about what she was not so implicitly advocating. I chose to return to this moment in my past because it crystallizes so much of the ethical stakes layered within what we call the "anti-vaccination movement" (a mishmash of different movements and ideologies, many of which are in tension with one another). If I have learned anything since my encounter with this woman, it is that we cannot so simply designate her as a representative of all anti-vaccinators nor can we assume anti-vaccination to be a monolith,

where simply understanding her particular “mommy” logic means that we understand all of the anti-vaccination logics. But working through the impasse of this encounter is how I hope to begin thinking through a disability politics that can better recognize and address such problematic logics, particularly during such quotidian scenes of encounter that too often render such discussions difficult.

To return to the woman’s claims, I want to put pressure on her temporal distinction between chickenpox and autism. For her, the permanence of autism generates a more acute sense of fear than what she frames as a temporary case of chickenpox, however contagious it can be among the children (and the adults). Because varicella can usually be overcome relatively easily, especially by young children, it is, according to the woman, worth contracting the virus, if at all, via “natural” means as opposed to “unnatural” vaccinations whose contents may be hazardous or dangerous when given all at once to infants. The lethality of chickenpox aside, especially in older people who also risk developing shingles, I am most troubled by her description of autism as a “life sentence,” which suggests a punitive understanding of autism as that which consumes, overrides, and marks out that individual with a fate worse than death.

While it is slightly perverse to consider this woman’s position in relation to the medical model of disability, disability is a condition to be lamented as an unjust and unfair lot in life that, in her estimation, can be prevented and avoided entirely through “good choices” (i.e. conscientious objection to vaccination) coded as protective parenting. Such preventative logics characterize what Anna Mollow has termed *rehabilitative futurism*: “Indeed, futurity is habitually imagined in terms that fantasize the eradication of disability, a recovery of a crippled (or hobbled) economy, a cure for society’s ills, an end to suffering and disease.”[2] Many anti-vaccinators hold the troubling view that autism is a fitting consequence for an unthinking subscription to the medical establishment’s unsubstantiated recommendations for infant and young adult vaccination.

“*What do you expect will happen if you’re shooting your kid up with mercury?*” the woman asks me as I fumble with a response, “*I’d rather prevent any of this from happening in the first place.*”

In a biometric age of prenatal genetic testing and CRISPR’s promise of gene editing, we must consistently ask what it is we are trying to prevent and why. As opposed to embracing a eugenic prevention of disability, can we move toward what Rosemarie Garland Thomson has called disability conservation?

[1] Mnookin, Seth. *The Panic Virus: The True Story Behind the Vaccine-Autism Controversy*. New York: Simon and Schuster. 2011.

[2] Mollow, Anna. “Is Sex Disability?: Queer Theory and the Disability Drive.” *Sex and Disability*. Durham: Duke UP, 2012. 288.

