

## Disability History Association Podcast

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Interview with Leah Richier

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**Caroline Lieffers:** Hello, and welcome to another episode of the Disability History Association Podcast. I'm Caroline Lieffers.

**Kelsey Henry:** And I'm Kelsey Henry.

**Caroline Lieffers:** And it is our pleasure today to be in conversation with Dr. Leah Richier. Leah, thank you so much for joining us today.

**Leah Richier:** Yeah, this is gonna be great.

**Caroline Lieffers:** So Leah, can you start by telling us a little bit about your journey to becoming a disability historian and then where you are today?

**Leah Richier:** Yeah, so I think one of the things that's different about my experience than other people is mental illness and disability was a part of my life. Partially because it's everywhere, actually, but also because my mom is a psychotherapist, my dad is also a US Vietnam veteran and he has post-traumatic stress disorder or PTSD. And so, mental illness and disability was just a part of my growing up, right? So it was the same thing as going to summer camp and eating meals with the family, and I just accepted that as completely normal. Which, of course, it is actually.

And so as I grew up and got more and more into history, I was really interested in people like my dad, so other US Vietnam veterans. He's from New Orleans, and so I was very interested in other Southern US Vietnam War vets, right. But I was also curious, I'm white, my dad is white, and I was curious, and also the Black Southern experience, and I got in contact with a group of US Vietnam veterans with PTSD. Almost all of them had 100% disability with the Veterans Administration, which is really high. And they had had that since the 1970s, right, 1980s. And that was my senior thesis for college, is trying to speak to these people, not about, really, what everybody wants to talk about - which is, tell me the person that you killed and how long you cry at night, which I think are really gross questions, but actually questions that are more sincere. So the big thing I actually talked to them about was, what were the things they wanted to come back home to, right? So as southern vets, what were you interested in? And so a lot of them said a cold beer. They thought about a cold beer a lot in Vietnam. And a lot of them talked about a place called the Varsity. The Varsity is in Atlanta. It's like a diner. And they were like, I really wanted a Varsity milkshake. And I just love that kind of visual like a cold beer and a Varsity milkshake while you're in the jungles of Vietnam. And, like still to this day you're struggling with, like, kind of the tension of what happened decades ago to you.

And so, when I decided I wanted to get a PhD in History, I said to myself, well, I wonder how far back we can take PTSD. Obviously, the US Civil War is our big war that we have here in the United States, and so I was curious if there were people with PTSD back then. And as you would suspect, yes, of course, because it's just an eternal condition that happens to humans when we're exposed a lot of trauma. And one of the exciting things and probably disturbing too, is that medical records from the US Civil War, both for

civilians and soldiers, is available at a lot of state archives, particularly in the South, in the US South. And so I had access to them and I learned a lot about those people.

And so what has happened since I've gotten my PhD is the realization that exploiting the suffering of disabled people is probably ethically completely wrong and those medical records should not have been available to me. They are still, right. And so I didn't particularly agree with the idea of financially or professionally benefiting from the suffering of others, and so I decided instead to leave academia and go into, now, high school teaching. And so my kind of path has been all over the place, but really the kind of line of being a disability historian has been ever since I was a kid, and still is up to today.

**Kelsey Henry:** Thank you so much for sharing the many circuitous routes that you took into disability history. I love this question about how people get into the work, because often, like, when folks do that self-examination they find that their route isn't really about books that they read but it's baked into the fabric of who they are. So thank you for sharing that with us, about kind of the deeper roots of your work in disability history. This is a bit of a pivot, but I wanted to hear a little bit more about the work that you did, specifically on the history of murder suicides covered by newspapers in the 19th century, I think this was a part of your dissertation work if I'm right about that?

**Leah Richier:** Yeah, so, what was really interesting for me is I wandered around with my dissertation topic. Almost everything had to do with violence and that makes sense to me. Violence is, again, one of those essential components to the human experience. And so I was very, very interested in seeing when violence shows up in the 1800s that isn't just these moments of medicalization, right? So like what does the media look at with violence? And in particular, the thing that I kept running into was a very interesting phrase, which is "domestic tragedy." And so once I realized that was some kind of strange code word in the 1890s for basically a murder-suicide, I got totally obsessed and I made a gigantic database of them. And so they were fascinating.

One of the questions that then was posed to me was, can you really nail down the mental illness component of this? And so that's where I suddenly went into the medical records of people. And that's where I got lost, actually, into these lunatic asylums, and instead switched over to them. Murder suicides are really amazing but, basically, what happens after they have a media report on them, they just disappear. There's no other records. And so, sometimes you would see it happened once and it would never show up again, and so I was compiling, just, I don't know hundreds, thousands of these murder suicides. But they were just these almost clickbait kind of stories of people. They were really sensational, but then they were like flash-in-the-pan, they were like lightning strikes, they were just gone. And so I was like no I want a deeper understanding of these families. And so that's where I had to switch over to these basically medical records and then try to find them from there.

And so murder suicides were, were completely fascinating and I, every single one of their stories was unbelievably sad. So there's like a gendered component for a lot of murder suicides, right. Men do a lot of murder suicides. They typically kill family members or people who they're sexually or romantically interested in. Nowadays, we have mass suicide events, or mass murder suicide events, right, where school shooters or like the Las Vegas shooting. And we don't see that in the 1890s. We haven't developed that yet. But I think the more interesting thing for me, which I, was one of the reasons why I thought these lunatic asylum records was where actually I should be spending my time, is women were killing their children in the 1890s. That was happening a lot and the newspapers were really, really interested in them and they didn't cast them as villains, which is unusual for us in modernity, because we went through a whole phase here in the

United States where we saw women who killed their children as like the very worst of humanity. We really didn't give them the excuse of mental illness. Instead we said, you have to go to straight to the death row. And some of those famous cases I think colored my understanding of how people would be in the 1890s. And what I found out was, actually, across the 1800s they are very sympathetic towards women who are killing their children, like absolutely from the South to the North, they don't have the same kind of intensity of hatred or discomfort. There's a lot of sorrow involved. And what was strange for me is seeing women say so similar things to what we see now with women who have postpartum psychosis, right? So there was a lot of like, I heard people talking about killing the baby, right? So like there was someone outside saying that, except for, like, it's the 1890s so they're like, people like passing by in the wagon were telling me to kill my baby, right? These are really unique to the time period, but they were all kind of saying the same thing, like, I have to clean the baby, I have to clean, to make it clean and then, when you know scour the skin off the baby. And so you're like, oh, postpartum psychosis women who kill their children now say very similar things, right? And so, for me, I was trying to figure out, like hang on what, what is going on? Like how? Why is society treating these women so differently? And I mean honestly, it was shocking because what I was finding, particularly when I started to redirect my focus to the US South, to these lunatic asylums, was a lot of these women would come in having killed the child already, being very violent and they would be in the asylum, they basically would go through their psychotic episode, return to relative normal state, right? And then they would be released and then they would do it again. So they would attack their new child, because they would get pregnant, have the new child and they would attack the new child. And they would come back. And so, my murder suicide work kind of fed into trying to understand that whole situation better, which then eventually led me to these lunatic asylum reports to get the, kind of behind the scenes like what is going on in these people's households.

**Kelsey Henry:** Now, I, admittedly, I will say that I am familiar with the coverage of infanticide, like more contemporary coverage of infanticide because I listen to a lot of true crime. [**Leah:** Yes, yes] And I know it's, it's a very popular sub genre of true crime, podcasts, literature, murder suicides particularly looking at mothers and children. And I know that, like late 20th century, like 21st century coverage, as you stated, is more keen on criminalizing those women in in the media, instead of pathologizing them within a more medicalized framework. [**Leah:** Right] And I'm really curious I mean I'm fascinated just looking at historical context and circumstance under what, what circumstances are mothers who kill their children seen as sick? And under what circumstances are they seen as bad? [**Leah:** Right] And what's the difference? Which kind of brings me back to another question that I have for you – the, the connection between murder suicide and insanity is not a straightforward. But that's what was really drawing you in, kind of the rationale for these crimes as being acts of insanity, coming from a place of illness. And I'm curious about what, what was going on, that you found in the 19th century that would lead to a more sympathetic evaluation of these mothers by labeling them as insane rather than criminal?

**Leah Richier:** And so I think one of the fascinating things about that, right, is the immediate question of what's going on with gender in the 1890s that's not happening in the 1990s, right? So like what's happening? Why have women changed so much? And it's obviously not women who are changing, it's men who are changing their decision on what women are like and what women are capable of. And so I think it was, it was so interesting to read some of these cases, because, you know, you would see like a woman who clearly, like, everybody in her family, her husband, her brother, her father they're all doctors, okay. So this is a real person. And she has the experience, where clearly she has postpartum psychosis as we would say today. She's very unstable like very, very, very

unstable and her husband has decided we're not going to institutionalize. So we're not going to put her in an institution. She's going to stay at home. And he actually writes a medical paper about this, that it's best to have your mentally ill loved ones at home instead of being in an institution. So, she's very unstable, she's probably exhibited violent symptoms already. He doesn't quite admit that in his medical report. She decides, she's left alone. Her husband has left to work. She has two servants, right, because she's a wealthy white woman. So they have two servants, she sends one away to get something, and she tells the other one, the other one is still here, and sends that one away to get something. And she brings her three kids up to the top room of their house and she blindfolds them, each of them, and she shoots each of them, saying that this is a game that they're playing and then she kills herself. And it is this intense 10-minute period where her, her father, her brother, and her husband are all kind of realizing almost simultaneously, I think she's actually alone in the house with the kids. And they all rush to the house, right? And it's this horrific scene of like bloodshed, right everywhere. And one of the things that was wild to me was like this would be the moment where you would say, you know, how could you? Like, you should have institutionalized or she kept away from the children. And instead, there's three little coffins and her coffin and they're buried at the same time. It's an enormous funeral. There's people in the streets. It's just huge sympathetic story, like the little coffins all have flowers on them, she has flowers on hers. And it's this interesting outpouring of emotion from working class people for this incredibly wealthy family, in part because of the media representation as very sympathetic. It's a sensational drama, it is a domestic tragedy, right. And so the whole thing is understood as insanity as being like a really sympathetic thing. Like she's affected by insanity. And like she couldn't help herself, even though to us this feels like, wow this is incredibly premeditated. And like, you might just have wanted to say, no she's a murderer, she's a bad person, she's a murderer, and so when you look at, you know, these kind of events today right. What you're saying is totally true, Kelsey. There's a lot of attention because we find this really grotesque and a lot of people get really cruel about it very quickly, where there is no, this has nothing to do with mental illness, this was an intention on your part to drown your children in the bathtub. And it's not like that for women for postpartum psychosis, they really are not aware of what they were doing in the same way that you or I would. It's not like that. And so somehow we forgot that in about a 100-year span. But the amount of sympathy for these women in the 1880s, 1890s is really unreal. And so we clearly have shifted our understanding of what's happening with women when they do that. And by we, I really do mean probably men, and probably the medical view of this whole situation, which is we've taken out mental illness from it and put, I think, darker ideas into what mothers are even doing in these situations, which is, you know, you hate children, you hate your children, you hate being a mother. And so the answer, for I think for a lot of states in the United States is okay well, then you should be executed too. And that's really not what's happening in much of the 1800s across the United States, they really are not saying okay, well now, you should never be around children or you should be executed. They really are saying, oh, you need treatment if you've survived your suicide attempt, and you can have children again.

**Caroline Lieffers:** That's really, really interesting. I mean, we often hear about labels like insanity as being stigmatizing. And it's really interesting to hear an example of how, in this case actually they're kind of a channel into a more sympathetic understanding to a situation. So, Kelsey and I think are both really interested in hearing more about the archive that you arrived at, right, for your PhD dissertation. I know you said you've looked at a couple different institutions. So, can you tell us more about these archives? About the significance of this archive? And then, of course, the ethical concerns that you alluded to, when you engaged with these stories? I think, if you could just expand on that we'd be really interested.

**Leah Richier:** Yeah so, when I was trying to figure out where would I find lunatic asylum records, I thought, well, surely there's none of those available. And the answer was strange. It was, particularly for Georgia, I got my PhD at the University of Georgia, so I said to myself, well, I can find local people's stories and South Carolina obviously is adjacent to Georgia, and so I said, okay, well, I can go there. And actually it didn't make my dissertation but I did the same with Virginia. Virginia actually has a multitude of lunatic asylums. Their population is more but actually really they're just paying a lot more, like literally paying more for mental health facilities. And so those are the three states initially. There's so much information on Virginia, I had to drop it, but all three of the lunatic asylums put their records into the state archives. And when you look at the state archives, so, if you look at the finding aid, it says particularly the Central State Hospital, for example, so like the latest name, right, and so, when I am dealing with it it's the Georgia State Lunatic, Idiot, and Epileptic Asylum. It changes names right, and eventually at some point is called the Georgia Sanitarium because that was like a fancy way of saying somewhere between lunatic asylum and hospital. And so what's cool about this is for me, a young graduate student, I was like oh wow I can go an hour and a half, and I can see these records? That's great. And then, when you go there and you open up the microfilm, when you put the little roll on, and you turn on the light, it really was like seeing just ghost after ghost after ghost after ghost and I was not prepared for how deep in some ways, these medical records were going. These medical records particularly in Georgia talk about women's menstrual cycles, they talk a lot about people ripping off their clothes. They talk about people vomiting. You know, they talk about traumatic injuries that they've given themselves or other people. And they do it very quickly and easily right, because these are medical records. They are also incomplete and I can tell why no one has looked at them before, and it wasn't ethical problems that, no, it was because these are incomplete records and to tell these stories is really difficult, and so people just ignored them. And I actually resented that idea so terribly much that I was like, no no no, these are disabled people. They have stories. We need to talk about them. Their suffering was real and their story deserved to be told because they are worthy people. The problem, though, that increasingly happened is I then went to South Carolina and saw the same thing, and then I went to Virginia and I saw the same thing, was, OK, but no really, this is the suffering of disabled people. They were marginalized in their time, they're marginalized in mine. Every time I spoke to people about my project when it was just a PhD project, people said the creepiest things to me, where they were like ooh mental illness that's so hot right now. And I was like, oh, that was the grossest thing you could have possibly said, oh no. You know, lots of just really like, oh man you're going to get a job. And I was like, because I'm studying people's worst possible moments? And like that's where your brain went? And so I I struggled for years on even how to organize this thing, right? Because I have something like, I think it ended up being 1300 in Georgia, and like 2600 or something in South Carolina and it probably was like 5, 10 thousand people in Virginia. So that was a massive amount of people, and so, like, I can tell individual stories, I can do data analysis which I did on the larger populations, and this was only for the 1800s, in particular, the 1860s. And so to really even do the whole thing would have been like so many people.

And so what ended up happening for me is even though I loved going the archive and I love seeing these people, it became kind of disturbing ethically. Because I know, disabled people, my father is obviously a person with post-traumatic stress disorder, but, but those are my people. And so then to be like oh, my medical records, your medical records, her medical records, their medical records could one day be in someone's dissertation, could one day be in a book that makes money on Amazon. I was like, oh this feels very strange, I don't particularly know if I want to be a part of this. Particularly since like I've told y'all already, it's like, you know, these are like really intense moments in people's lives it's like

their deepest deepest moments. And I was interested in the 1860s right, and so in the US South that means right before the US Civil War, during the US Civil War and right afterwards, which is a period called Reconstruction. And so Reconstruction is where enslaved black folks suddenly became free. And these US Southern states they're very weird about that, and so a lot of these people come in and they are in terrible condition, both physically and mentally. And these are some of the only records I've seen that describe these people like this. And so it was like well, I want to tell that story, but then again like, how do you tell that story without dishonoring them? And also not in any way benefiting from their suffering? And I was like, oh I can't. I was like I'm gonna back off from this for a few years, one day, maybe I'll figure this out, but like certainly in this kind of ugly pursuit that academia has right now for, well you got to get a job, you got to get a job, I was like, I can't do that to these people. Like they, they did not suffer this way, they did not struggle this way for me to really succeed off their debts, right. I'm not going to do that. And so you know the archives are there, I know other people have used them I know other people have published some of their lives and deaths. And that's fine that's completely fine. I personally just couldn't do it. At least thus far I haven't figured out a way to do it responsibly.

**Caroline Lieffers:** It's really interesting to hear you talk about this Leah, and I have to credit my colleagues Mark Sandle and Will Van Arragon for this insight. I'm not Jewish, but there's a Jewish practice -- sorry, I don't speak Hebrew so apologize to our Jewish listeners because I'll probably mispronounce this -- but it's something like *hesed shel emet*. And it literally means something along the lines of a charity of true loving kindness, or an act of true loving kindness. And it refers to the practice of caring for the dead. And of course as historians that is our job, right? We care for the dead. And I think we often feel that to care for the dead means you have to sort of like resurrect them and show them to the world, that is how you care for them. But, in fact, the thing that makes this act so sacred in Jewish understanding it is an act of loving kindness that cannot be reciprocated. So you, as the person who cares for the dead really can't get anything back from it. It is an act of complete giving right. And perhaps as historians, we need to think about caring for the dead by letting them rest? Yeah, it makes sense, what you're saying. I agree.

**Leah Richier:** And so I think Caroline's point is really, really interesting for me. Because it wouldn't be, I think, one thing to do, what I am pretty sure other historians have done when they've used this material, which is just go to the archive. It's on microfilm, right? Which is its own kind of glowing box of magic. There's also the ledger books themselves, which you can see, which I think is fascinating. I'm a very kinesthetic, physical person, experiential, and so I really love being like, this is the book that the doctor had where they were taking notes like that's so interesting, right? And so I think that's one version and I, it makes sense to me that detachment, that dissociation we have from the people themselves if you just look at those two things, right? This microfilm, this book. That's not what I did, though. I then went to where those people were buried right, so I went to where they live. Because I was like, I can do this, anybody can do this story, it's right there, right, and so I was like, no no no, I want to go find them like literally their bones, I want to find their bones in the ground. And that's difficult, I suppose, but I was like, this is the most important part, this is the most interesting part. And so you know, my partner, my husband, and Dr Derrick Angermeier, he went all around the South with me. Absolutely amazing that way you can see everywhere in Georgia, everywhere in South Carolina and we went to Virginia and Alabama and Florida too. And it was fascinating because you would find these people on these isolated hilltops. You know, their obelisks slowly shifting with the soil erosion, right and you would see him and you'd be like, oh it's AJ. I found him, I found AJ. And you would be like oh look at you, right here, I, I saw you on microfilm, I saw you on the book. And you know, you had suicidal ideation it's in the 1862,

you know, like in the middle of the Civil War, your family brought you down from Rome, Georgia, from Ellijay which is like nowhere small town, they brought you like hundred plus miles down to Milledgeville, like a middle of a war to try and find you, find you sanctuary and instead you leave, right, possibly everyone feeling oh you're cured. I find that same person in the mortality census here in the United States, we had a couple times, where we did amazing a death census, which is like a guy came to your door, he said, did anybody die last year, and you said yeah, my mom did, and they said what did your mom die of, and you were like, a cat scratched her, and they said cat scratched her, even if that's not what happened because, like it's just you whatever you say, right. And so I find AJ again in the mortality census, and he has committed suicide, he shot himself actually. And otherwise I just would have seen this medical record saying, oh, he has suicidal kind of tendencies and then I would have seen his obelisk, but now I have this third piece of evidence which says, oh no he committed suicide. And so that extra step for me, I think, has made it completely impossible to do this without, like really having to slow down, and I really didn't appreciate how academia pushed me to rush to publish, this publish or perish made it totally distasteful. Like, I was like ah y'all just being gross, this is gross. I was like, you can't go to some of these places that I've been to and been like yes, I can't wait to talk about you. You know it's like, I literally stood over these people's graves and watched you know, like, okay, this is where you were, this is where you are now. And for me to say okay, okay how am I gonna, how am I going to publish this in the right way to succeed, is so bizarre and strange and I was like, no no no no, I saw where you died. Like, I saw the Asylum, I saw your house, and now you're here, and so I have to be careful with this. I have to be really, really careful. And it's been fine for me, like I, I'm actually a successful person, so like academia is not the only route to like thrive in life. And so I still think one day I'm going to figure out exactly how to do this appropriately, and so I'm not worried. They exist without me. They have always existed since their deaths, and so knowing their stories I think benefits me emotionally, but for now I'm definitely not going to, I don't know, exploit them to have some other kind of renown or reputation.

**Kelsey Henry:** Everything that you just said, Leah, made me reflect more deeply on when I think about history and ethics and methodology. And I had never heard that phrase before, Caroline, about how like doing the work of history is caring for the dead and that just had a profound impact on me in terms of reframing the kind of work that we do. And I think that Leah, you really beautifully demonstrated what it means to care for the dead as a historian in practice. And you're so right that the pacing, the publish or perish model of academia that so many people are trapped in prevents, or like puts an outer limit on, I think kind of the ethical reach of historical scholarship in a way that makes me uncomfortable as well. And what you were just describing about really, like, not only looking at medical records to understand your historical subjects, but going to their homes and looking at census records and going and finding their headstones, like finding the places where they were buried demonstrates such a profound degree of care. And really illustrates how deeply you've thought about the ethics of historical work.

And the next question that I have is a truly, it's a complicated one given everything that you just said, because I'd love to hear more about, like, if there were particular stories or people that really grabbed you and impacted you deeply when you were doing the research that you were doing, but I also want to hold the ethical complexities that you're naming. I think that you're, you're stating kind of contradictory, if not contradictory, competing desires between honoring the marginalized dead, which I think is language that you use by exploring their, their records and their histories and wanting to, I mean, I think that the whole language in history around giving voice or restoring agency is really vexed. And there are a lot of ethical, ethical issues there, but I also think that the desire to make sure that those archives, what we have there isn't lost is also an ethical imperative. But of

course you don't want to profit off of those stories. So I think that you're demonstrating a conundrum in history between wanting to do some sort of recovery, the reparative work around the marginalized dead and records that could be otherwise lost, and not wanting to dishonor the dead by profiting off of their stories. And that's a, it's a really ethically tangled spot to be in and I'm wondering, speaking from that place, do you want to share stories about the people that you found? Do you feel like anonymizing those stories, but still telling them does some ethical work that is helpful or useful? Yeah I'll leave the question at that.

**Leah Richier:** Yeah I think one of the things that is actually really interesting is I've talked to a few UK disability historians who do mental illness and they make it anonymous. And it's, that was an interesting moment for me, because it was suggested to me, well just make them anonymous. And I was like, oh actually I'm not saying this is shameful. That's not actually what I think at all. So I don't read these people's stories, even people who, you know, seemingly are quote bad people, you know who murder people and end up at the asylum, I don't actually see any of this as shameful or stigmatized, like this is just a part of life, this is what happens when people have mental illness, sometimes they harm themselves or other people. And so that's, that's fine like there's nothing to do about that. And so to be like, oh well, their descendants might be upset, why? This is just reality. That that would be strange if no one in your gigantic ancestral line has, no one has mental illness? No one's ever done anything that's concerning to you, like? Probably no. There's probably been moments of mental illness and that's just reality, and so I thought that was very interesting. It's also, like I've told y'all, publicly accessible, other people have published on this, and so the archives are just going to keep that up. There's, there's nothing to do about it. My dissertation I think is available on the Internet at this point, and so you're like, well alright, you know. A lot of this material can be found, again, you know, on ancestry.com it's like the census, the mortality census describes people, as you know, idiot or imbecile, right, okay. And so I'm only creating a particular story, right, and so I don't want to make people anonymous. I think it's very interesting that these people struggled and suffered this way. I think that finding these very, very specific people and tracing their whole lives to their deaths and what's happened to their body ever since, that is fascinating. But doing so appropriately, carefully, responsibly, is where that gets very unsettling for me. Because I'm not worried about y'all knowing there's a guy named Dr Joseph Simpson and he served in this particular Confederate, you know infantry, and this is his family. It's like you could all find that. That's, I wasn't doing anything really magical or amazing. But how we then talk about Joseph is really the next problem, right. Joseph, he got typhoid fever in the middle of the US Civil War very early on. It kind of ran through his regiment, typhoid fever spreads, due to obviously contaminated kind of water, food, and you know it can spread from person to person at that point. He got a really, really severe case. It seems as if he had brain damage, like really extensive brain damage. He didn't die from it. He is paralyzed. He no longer can walk, he no longer can talk, and so he goes from being a confederate surgeon who you can find on the roster, right, you can find them on the muster roles, there he is with all of his Simpson family members. And typhoid fever ruins his brain, right, and thus ruins the rest of his mobility and intelligence and ability to talk. And so they put him in the lunatic asylum because that's where you put disabled people. And he's very young, but it doesn't matter. He's physically and mentally disabled at this point. And so it's this interesting question for me with people like Joseph, like how do you tell the story of a disabled Confederate? And there's lots of them, and this is something that I think there's other US Civil War people trying to work with right now. But the unfortunate truth of it is people like Joseph has a lot of material devoted to them, unlike the few Black people that are in the asylum during the War. After the Civil War, because the Confederates lost, what we see particularly in Georgia is they are forced to accept Black people. And when that starts happening, it is, like I kind of mentioned before,



it is really abysmal, the state of these physically and mentally disabled, you know, Black folks who were just enslaved right. And so seeing that level of suffering really impacted me because I wanted to tell that story. But then again when you look at people like Joseph who you're like, wow this is so fascinating to watch someone from the height of the white Confederate state to fall down here. We don't know where Joseph is buried. He's buried clearly at the lunatic asylum somewhere on their, they have a cemetery, but that cemetery has been partially taken over by a golf course. And so it's, they don't have headstones for the most part and so like somewhere is Joseph. And so, then I see all these black folks who were just enslaved things and where they are buried is also lost to time. They are buried seemingly at the lunatic asylum cemetery which at Georgia somebody pulled out all the headstone markers which are just numbers to make it easier to mow the lawn, and so we don't know where people are buried anymore. And so, Joseph and all of these Black enslaved people who are now freed but they're disabled and then they go to the asylum and they die, they're both in the same situation of like being lost to time. Like, we have these little mini records of their lives, we have more for Joseph because he's a white man and we tend to preserve white guy history and so all these Black folks who were enslaved and, you know, made out to be numbers in the slave census. Yeah, this is the one time, you see them. You know, one of my most troubling cases is a guy named William feels he's from he's from 1875. William is really, really, dear to me because most of the time when they kind of write about suffering particularly Black folks in the Georgia Lunatic and Epileptic and Idiot Asylum, they tend to kind of run through it quick. And for some reason I think they were really disturbed seeing William. He's an elderly black person and formerly enslaved, right, so they call him colored at the time. He's clearly very old and he is described as a, I think a breathing corpse and, you know, he's brought to them in a dying condition and he dies within days. And, you know, this is ten years after the war. And so, when you look at someone like William and then you look at someone like Joseph like these are fascinating people. But how do you tell those stories, how do you compare the two? Do you compare the two? Are they in the same book? Like, what do you do? I can't find out where either of them are buried. I don't know where William comes from at all, this is the only time I see him in existence in the historical record. Whereas I have so much about Joseph because his family are all these white Confederates. And so, do you tell more of Joseph's story because William had the unfortunate experience of being an enslaved person then kind of, I don't know, terrorized all through Reconstruction and then died at the asylum? And so, when you look at it like that, this, this becomes this other issue for me, right, where it's racialized, right? And so, who do you give preference to? The guy who was a lot of material? I wasn't trying to do that, that's why I was studying disabled people, I was trying to help them out and get their voices and stories out there, etc., like we all politely and happily say. But then, well, the voice still is the loud white guy, you know, and so I was never exactly sure how to do that. And obviously I wrote a dissertation and that's fine, but now it's the next step, right, and that question still lingers.

**Caroline Lieffers:** Yeah that's really interesting. I, I mean my next question was going to be, do you see disability history in the US South as being distinctive, you know, what should we be attending to when we're looking at disability in the South or in what ways does region matter? But I'm so aware of what you've been saying in the last couple answers that you've given about people like Joseph who are troubling binaries and making any simple distinction between victim and oppressor or wealthy and poor or freed and constrained or powerful and marginalized much more complicated, right? And it's also sort of inviting me to ask you know, obviously still in what ways does region matter, fine. But also, would it be a mistake to like overdraw that line between North and South, and make it to sharp. This is a really important binary as well, the north and the south, but you've been troubling a lot of binaries so far right, so, in what ways is the South distinctive, sure, but are there ways where it'd be a mistake to sort of silo off the South, right?

**Leah Richier:** Yeah so I love the question which I always pose to my students when I teach the US South: what is the South? Can we, so we, we make a list of all the words that people associate with it, and then then I'm like okay, what are the States that are southern, guys? And so then inevitably they start fighting each other. You know, they're like Arkansas it's not Southern, and then you're like okay okay, Florida is not southern you know, and so, then other people are like it's really Southern, you know and so it's fascinating doing that. Because, obviously we, we know it gets fuzzy particularly state-wise right, so you can be like certain parts of Virginia that way. And so like whenever I taught at Washington and Lee up in Lexington, Virginia people were like DC is not southern. And so, when I taught in Jacksonville, Florida people would say it is in the northern part of Florida, where we are, but the southern part of Florida is not southern. And I was like just let you know, no one else makes the distinction like y'all just did outside of the state, but that's that's good. And so what was interesting for me doing all my research in the 1800s in particular, trying to understand what does the US South look like? It's like certainly the colonies that became southern states, that makes sense, those are definitely southern, right, and then there are places like Alabama and Mississippi, Louisiana, Texas, and Florida that got really fluid and confusing. They are still a frontier, you know and people don't want to think about it like that, but they really are for a lot of the 1800s. You know Florida doesn't have an asylum, Alabama doesn't have an asylum, Mississippi, Louisiana, Texas, they, they don't have asylums for a very long time. And so, once you start realizing, okay, those people are literally sending their disabled people back to Georgia, or even to South Carolina, it's because a ton of South Carolinians go to Florida, and so, once you start tracking that migration, right, so white folks bringing their enslaved Black folks to Florida, once you start noticing that, certain things start to fall into place right? The US South is growing, right, and so to be like, there is a US South, there is a US north. That's really hard to do and say because they're not even sure what Texas is, frankly, you know, Robert E Lee is really, really into Texans but he really abused them, he's like, they're Texans. He's really excited about them because they are very happy to die for the cause. But it's in part because they're just transplants from other parts of the US South, right and so like what makes a Texan a Texan is something that develops over time, right, so the guy who signs the US Constitution for Georgia was from, I think, Rhode island he had only been around for like less than a decade and then he signed for Georgia. And you're like all this early US South stuff is like we are working on it, it is a process, right. And so, certainly what you can tell is there's a massive tension between white folks who are free, obviously, and Black folks who are mostly enslaved, but there are some free Black folks. I have free Black folks in my lunatic asylums. I have a lot of people who are fascinatingly, like, right there on the edge of these like, strange spaces that you're like, oh, I knew you existed but I never thought I'd find you here in these disabled spaces. There's a category of Black person, right, it's like a literal category called "brown," in Charleston and Savannah, so Charleston, South Carolina and Savannah, Georgia. And they are Black people who are not slaves, they often haven't been slaves for possibly, like, one plus more generations, maybe three or four, and they often own Black people, so they've enslaved other Black people, they live in the city, and they earn, they consider themselves "Brown." They're Brown, they're part of the Brown society. And they are absolutely trying to differentiate themselves, right. That's why they are not saying Negro or colored, they are Brown, capital B. And so finding those people in the lunatic asylums is very interesting. Because you suddenly realize, no no no, of course there's not a binary. If you are trying to not only say you're a different kind of Black person by literally saying you're a different colour. Like, when of course if you're a very racist white person, like, that's very difficult, I'm sure they just said, you know, you're a slave, right, you're Black, you're a slave person, right. But the same thing started to happen when I occasionally would run into Native American people, right? So there's Native American people at the asylum. They pass for white. And so if you look at

just medical records, they look white. And then if you do more research, you realize, oh, you are Cherokee. You know, I always describe this as being, having to push on the record. And so, like, pushing on the US South is very necessary, right. Like, if you just want to look at like, there's a lack of education, they're poor. Actually, they're the wealthiest region. You know, and so it's like, OK, what do we do here? Like, is there really only two categories. Of course there's not. Some people would say there are three categories. So White, Black, Brown. And then you would add the other one – there's Native Americans. And then there's, people love to talk about this, and I ran into these people too, in the lunatic asylum. There's Jewish folks, and like, lots of interesting Jewish folks in our major cities here in the US South, and guess what, a lot of those people are really for the Confederacy. Because they view themselves as white. They view themselves as the highest class. And so some of those people enslaved Black people. And they do not feel like, we're a marginalized group and we're gonna help out other marginalized groups. Like nuh-huh. There's a multitude of things happening here. And so the lunatic asylum records really just demonstrated over and over and over again, this, like, oh, there's a lot going on. Like, the South is exploring itself, it's deciding on who it wants to be. And so when I think about, like, what do these records do for the US South? They just kind of like help show that it's a prism. There's all these different reflecting rainbow moments, right? And some of them are incredibly ugly, and some of them are really beautiful, and some of them are ugly and beautiful. And that's just how the US South is to me, right? It's very complicated and interesting.

**Kelsey Henry:** I kind of want to stay on this through line of troubling binaries which you do so much other than your work and pivot away from thinking about troubling regional divides between the South and the North and moving towards the ways that your work troubles kind of temporal divides between the past and the present. We actually checked to see if the South Carolina Lunatic Asylum or the Georgia State Lunatic, Idiot and Epileptic Asylum if they were still operating in some form today, and the answer seems to be yes. So there are still mental health institutions on these sites and this got us wondering what kinds of continuities or ruptures do you see between the history that you researched and the present day, and do you feel like there are any echoes reverberations that should be attended to?

**Leah Richier:** Yeah so um, yes, they are obviously not called lunatic asylum anymore, they call them hospitals right? Which I think is just also a fun way to see how language shifts. Because hospitals would suggest there's a medical, rational response to this, and I think what's happening with asylums is exactly what the word would suggest, right? It's the sanctuary. It allows you asylum, and like I think that's a lot more pleasant than what happens now with a lot of mentally ill people. So being institutionalized is, I think, really traumatic for a lot of mentally ill people who are obviously already struggling with something that causes them to be institutionalized, unless it's forceful and not their choice right, so they're not actually having difficulties but someone has decided they are, and so now they're being institutionalized. I certainly would say that we should have a place for people who are struggling, right? And I think one of the unfortunate things that happened to both of these lunatic asylums which became hospitals, is that they became warehouses, right, for disabled and mentally ill people. And so, if you were a problem you got put in the asylum. And so, you know, the Georgia State Lunatic, Idiot, and Epileptic Asylum called becomes Central State because it's in the center of the state and so Central State becomes one of the largest places for mentally ill people in the whole world. It's incredibly overpopulated and there's no reasonable rational care at that point for mentally ill people, right, so they are being abused and exploited by the system. It's just a problem that's going to happen actually all throughout the United States, and it certainly happened in South Carolina and Georgia. Pretty much every state's going to get their own hospital for

insane people quote quote, right. But what's unfortunate about this is a lot of the southern states have one. And everybody goes there. So, like, you can even see it in the old title for the Georgia State Lunatic, right, so mentally ill people, idiot, intellectually disabled people, epileptics, people who have epilepsy, and that continues, right, through literally World War II, the 1960s. Add in, like I've explained previously to y'all, that there's criminally insane people, right, so people who have killed people, that the court system has said, okay, well you're, you're insane, and so they don't go to the prison, they go to the asylum, right, or the hospital at this point. And so the asylum is just unnaturally full of people. The resources are limited, the funding is terrible. And so, all these folks become increasingly abused and neglected by society, who certainly don't want them, right. We go through a whole time period in the United States where eugenics was kind of favored idea on how to deal with disabled people. And we can see that, by putting folks aside in these hospitals.

The thing that happens, though, is when Ronald Reagan becomes the President he decides he's going to deinstitutionalize these places, particularly here in the US South and so in the US South all of a sudden these places are emptied out. Well, just to let you all know, you can follow people for decades through the hospital right, so the records show there are people who are there since 1910. And so, all of a sudden it's 1980 something and they've been there since they were a kid and just letting them out on the street is like an alien world, you know. Even imagine the difference of a couple decades, right, so before we entered World War II might have been when you showed up at the asylum as a schizophrenic person and then now, I have to leave the hospital and it's the 1980s. It's like not only did we, by the way, how whole world war, we've had the Korean War, we've had the Vietnam War, by the way we landed on the moon, there's been a Civil Rights movement, like, we had all that kind of tragedy of the 1970s, and now you're out on the streets. And so this is such a fascinating -- I loved the word earlier you said, Kelsey, conundrum -- because certainly, no I don't think we should be warehousing disabled people and neglecting them, where they, you know, die of mysterious causes and get buried out in the back. That's a completely terrible situation, no, absolutely not. But then to have no place where mentally ill and disabled people can go for real help, not just medicalized, kind of restraint, and kind of neglect, is, is a really weird binary that I think we found ourselves into, right? Being institutionalized for 72 hours because you are a threat to yourself or others is not actually going to help anybody, frankly, I mean it helps you in that moment, perhaps, if you are having a psychotic episode and you've, you know, already attacked somebody. But what's really going to happen here is there's a lot of privatization of how then you as a disabled or mentally ill person are going to have to deal with this. And so a lot of families deal with the burden themselves, which is very costly. And so, particularly when I think about how quote idiots were put in these asylums in the 1800s and so now, obviously we have all these, like, thankfully we have all these opportunities for intellectually disabled people, like through the public, right, so we have K through 12 programs, we have you know college programs. But it becomes a lot of burden and responsibility for the people who take care of those disabled people, those intellectually disabled people and I don't think it's always the most simple or easy task for parents.

You know, I have been blessed multiple times by having intellectually disabled people in my classroom and it's always been really exciting for me, like I really love teaching history to all different kinds of folks. And it was an option for me at the University of North Florida to either accept or deny that student into my classroom. And I said, why would I deny them? They're a student. They're a student at the University of North Florida so, like, come on in. And I talked to their parents afterwards and they thanked me profusely for accepting them in my classroom. And I was like, Why, why are you like thanking me this much? And they were like a lot of professors say no, we don't want them in the classroom.

Because, maybe they're disruptive. And I was, trust me and a lot of able bodied able minded students are incredibly disruptive. And I was like, no, that was, that was so fun, that was so great, you know. And it was just an interesting moment to really kind of be like, oh like we're not actually doing intellectual disability perfectly yet. Like, we are also still in process, right.

And like if you are really, really, really involved, you can really, really help out your kid, but that means you have to spend a lot of time, effort, and money and there's like a lot of, what is that, being an advocate for your child, and then at some point, and this is true for a lot of people who take care of their disabled loved ones, you're worried about you dying. And so, then you die, and what happens to them? Who's funding this? Who's taking care of them? And that's stressful because we as a society are just like no, no, no, it's up to you, it's up to you and the family, it's up to you. But like, that person has to exist for the disabled person to get their full rights as like, literally just a human. But certainly as a US citizen. And so that's a tension that bothers me a lot in the world that we live in now. Like certainly what we were doing in the 1800s was an idealized dream that then fell into this kind of nightmarish decay. And I understand, in part, why like Reagan was like, no, no, you can't do that but sending people on the streets and then making it the private sector or the family's responsibility, I think, is too far. And so, I'm not at all suggesting there's ever going to be a good way to balance this out. But we stretched in the other direction now, where society's like it's, it's your thing go on Facebook, get it go into a Facebook mom group. And like talk to each other and y'all figure it out. And it shouldn't be an option for me as a professor to deny access to anybody. Like, that's bizarre, no. I don't appreciate that, but I can tell y'all, University of North Florida, that was a program that they were, like we are one of the few programs that do this. And the University of Georgia does not do that. Washington and Lee does not do that. It's only certain places, because parents have advocated to have that program started. And that's, that's troubling for me like. That requires too much on the individual and not on society. And so it's interesting to see how far we've come and like inevitably because of time we'll see something else happen and I'm very curious about it.

**Caroline Lieffers:** that's really interesting and certainly I've heard other folks talk about all these Community based programs right that were promised to people and then the funding just never materialized, right? But one of the things that I'm noticing is that a lot of the stories that you found in the archive are stories of people who are quote criminally insane. They're often involving violence, right, you used words like struggle and suffering. But I'm also thinking of the many folks you know who do mad activism or mental health awareness, who are really insistent that we should remember, right, that people with mental health disabilities are more likely to be victims of crime than perpetrators of crime. And I'm wondering how you navigate this, and if you feel that we should tell like as historians, we have a responsibility to frame or tell stories in a certain way, so as not to amplify stigma on present day communities? Like I'm just really interested in your thoughts on this issue.

**Leah Richier:** I think one of the weird things that I have witnessed and it's been a problem for me having looked at as many records as I have is a lot of people are like, people don't belong in asylums, they weren't mentally ill. And you're like, they definitely were mentally ill, like the vast majority of those people were mentally ill or physically disabled, right. And so there's this kind of hope and goal of some people that like, no they were just rebellious women. And really in the US South, the only reason you're going to be put there is because something has gone very wrong. And you can kind of feel that, particularly in the earliest records, because they describe the situations in which some of these people are coming from. And they're really horrifying, right. So they obviously can

tell when like their loved one is quote not right. And so, a lot of people, before the lunatic asylum existed just isolated them a lot, I mean seriously, maybe like three or four people they described this in Georgia, were just put in sheds. And then at some point the family was like, oh, the lunatic asylum has been established, we'll bring you to the lunatic asylum. And so, when I read stories like that, and then I read, I think, some people who like the later nineteenth-century story of, it's a woman who wanted women's rights and they said you're crazy and they put you in the asylum, perhaps that's happening in the US North, perhaps that's happening other places. In the US South the people who end up in the asylum are people who are really having, like, issues that their family has decided this is too much. We can't handle it. Like you can feel in these archives, the family, really, really being protectively involved.

A lot of this ends up, too, being surprising for me because I entered the records thinking, okay well there's gonna be a lot of people who are depressed, right, so there's a phrase, having melancholy, and so I was like, okay, well there's going to be lots of melancholy. And there's not. Not in the US South. They are not depressed. They are kind of struggling in all these other ways, right. There's a lot of things that today we would say, oh that's a traumatic brain injury, that's why he has epilepsy, right. So they would describe somebody who you know was outside on their horse and the they fell off the horse and hit their head really hard on a rock, and ever since then they've had epileptic fits. And you're like, well, they have a traumatic brain injury, okay. And so it's a lot of those kinds of stories, like an acute event happened or there's a chronic issue that's now increasing, it's escalating, typically in their 20s, right, or 30s. Like they become, like, the family no longer can control them, and so they want them to go to the asylum, and this is kind of one of those tragic things. You can kind of tell they hope the asylum is going to fix them, right, it's going to be a quick cure, like they'll be there, briefly, then they'll come back home. Like you have the answers and then you'll come back to us And so, you know, when I think about victim and oppressor and these stories, right, that, you know, trying to cast mentally ill people as like passive people walking around existence, it's like, well, no there's also able bodied, able minded people who are also incredibly violent. And so, when you try to figure out like, okay, how are we going to talk about these people in the asylum, they live in a violent world, so when they're too violent they end up at the asylum. And so, some of these people are definitely there because they're having these other experiences that people have decided, okay, we can't have you at home anymore.

So one of the families that I think is most unsettling to me is called the Gully family. They are from Clark County, which is where the University of Georgia is, and that's where I got my PhD, and so seeing Clark County over and over in the record was really interesting for me. And the entire family is intellectually disabled. Like the mom and dad probably have an intellectual disability of some kind. What's happening, though, is every time they have a kid, that kid is intellectually disabled. And so in the census and in the asylum records they're called idiot. And so, none of them are actually violent or anything like that, but they clearly are no longer able to be taken care of by their parents. The dad dies at some point so then it ends up with a mom. She gets rid of the boys and so she keeps the girls. And then, at some point she gets rid of the girls. And so, like all of these kids end up at the lunatic asylum because it also houses quote idiots and epileptics. And so, when I think about, okay, like what's the kind of activist story here. I understand why there's like a lot of people who want to look and see, okay, well there are narratives about mentally ill people being violent and that's what's dramatized, that's what's exciting, that's what ends up on podcasts and TV shows. But that does happen. And there's also stories like the Gully family which, I don't know exactly what made each of these times where suddenly there's kids that go to the asylum. I don't know if there was an aggressive moment or there's just too many mouths to feed. But like suddenly they're not home anymore, right. And so

they're in the asylum, the same time, you know, as formerly enslaved people who are just literally for the first time ever, not being controlled by white people. So they're just abandoned and out in the street in 1865. And so it's suddenly in the middle of winter and you're an elderly Black person, elderly Black woman and so what's, what's going to happen to you. And maybe this is just dementia or Alzheimer's, who even knows, but they put you in the asylum. You're at the asylum the same time as intellectually disabled people, the same time as traumatic brain injury people. They're all in the same place right. And so I really, I get bothered when people try to say, oh, you know, you're making people out to be kind of like the worst thing, where it's like, there's not a best version of this. Victim doesn't mean the best, right. There are certainly people who, when I look at their records, you can tell, they are really, really abused, right. So these people who were put in sheds. You know there's one woman who is beaten really ruthlessly by her uncle. And I question what her mental illness is, right or if she's just an abuse victim. It's very difficult to tell. You know, I question sometimes when I read particularly about formerly enslaved people in 1865-1866, you know, when it's kind of like, are you here because everyone else is just neglecting you, and you're actually just like a physically sick person and they decided, like your physical sickness is like a mental illness, is it's like a disability and so we're going to put you here? And so that's where there's like this interesting tension between is this a place of sanctuary and cure, or are we seeing the beginnings of like warehousing, right? Where he's like this is the catch all, like this is where all of the bad parts of our society go. And so, you know, to try and binary it out is confusing to me because it's like, oh well, no, some people are victims in some moments and then some people are not, in like five seconds later, and then they're victims again. And so, trying to look for easy, simplified explanations of what's going on, I think, is where we get into trouble, particularly with disabled people. I'm not trying to find inspiration porn in the records. I'm also not trying to find demons in the records. They're just who they are echoing through time and I'm looking at them and trying to understand fully what's going on with them. Which is difficult, because these are just medical records.

**Caroline Lieffers:** Yeah, the fact that you're only getting that one sliver and it's told from a particular perspective is probably also a major challenge. I mean, this is a related question, right, is that you have done, as you've already mentioned, a lot of work wandering around cemeteries, right? Thinking about cemeteries. And you have a number of photos on your website that honor places where marginalized people were interred. And I think Kelsey and I would both just like to really hear you say more about that. Why you, you know, began this project, what its meanings are for you, where you are with this now, any of that.

**Leah Richier:** So I love cemeteries. I love them, I love them, I love them. I think one of the most fascinating things in existence is that we all share one thing in common, which is we're all going to die. And so, like congrats, like the three of us are definitely going to die, and I have no idea when. I hope we live forever, but like, I teach students all the time, I'm like, y'all are all going to die. All of the professors I've ever had, they're going to die. Some of them have already died. And you're like, okay, so what's going to end up to my human form, my fleshy vessel thing? And that's the most interesting question of all, because I'm dead so y'all are going to deal with it. And so we have to question, okay do the people in your life, who are around your corpse, deal with it in a way that I can see through time and space? And how limited is it by the time and space that we're in, right? So Covid-19 was so fascinating early on. So, like there are certain rituals that have to happen in a lot of religions, so like in Islam, right, like there are certain things like it has to happen very quickly, like you need to do it now. And so, like Iran very famously there were like aerial shots that we have, and so we could tell like, oh okay, y'all are, there's huge cemeteries suddenly right because, like, you have to bury people fast, right? And so the same thing

was happening when the Delta variant hit India. Hindus burn their dead, they don't bury them, and they don't bury them quickly, they burn them quickly. And so that had to happen quick, right. And so that's fascinating watching, again, Iran, India, two different religions Covid-19 responding totally differently. Funeral homes here in the United States were struggling. Judeo-Christian, right, style particularly Christian, particularly like, if you think about like, our hospitals right, we have morgues inside of our hospitals, those morgues then transport the body to a funeral home and that funeral home then buries the body, right? And so, that process became problematic because there were so many, and there are still in actually a lot of states like Texas, for example. The morgue only has so many people, dead people in the morgue. And so then they had freezer trucks. And so New York City had these, Texas has them right now. And so that's where you just put dead Covid-19 people, in these trucks to then await to go to the funeral home to bury them. And so that's just us in our pandemic right now, and so, like, like how there was all these different responses to it, right.

And so, when I, as a young person was wandering through existence, one of the things that happened was very near my house was a cemetery and I thought it was very pretty. Because a lot of US southern cemeteries in rural areas are very pretty. Except for I noticed that's very strange -- a part of the cemetery seems really overgrown. And I was like, why is that part overgrown? What's the deal? And I was like parents, do you have an answer? I'm a middle schooler. And they were like, it's segregation. And I was like, what now? And they were like that's where the Black folks are buried. And so I was like, why, I don't understand? Why is this area literally, to this day, being mowed, and that area has been allowed to be overgrown? And I'm talking about like massive trees overgrown. And I was like, I don't understand the dichotomy because, again, I was 12. And they were like, injustice. And I was like, you can see it in spaces of the dead? You can see injustice, like, like buried alongside people? And the answer is, of course, yes right. Which we all kind of intrinsically know, right, so like if you're a military veteran you can be buried at Arlington, right? If you're a military veteran you can ask the US Government for a headstone. Which is to the benefit of many people, because otherwise, because of poverty, you might not have a headstone. And so that's why we do that, and so you're like that's great because, you know, you gave the United States government a part of your life in terms of military service they owe you a headstone, all right. But then you think about all these impoverished people that have existed, I don't know, all throughout American history, and they have wooden headstones, right? They're not stones at all, they're just little markers made of wood, typically even just one little stick, right. That rots, it disappears, it gets moved etc, and then now your grave isn't marked at all.

And so one of the things that I noticed, which I was fascinated by in this cemetery next to my house, was Black folks couldn't afford in the 1800s and early 1900s, headstones, and so they were doing a couple different things, one of those things was having a really shiny white quartz, which is a kind of rock, and they were putting that in place, and so that would mark the spot that someone was buried. I can tell that now, in part, because our soil is bad and so that sinks in so you can see like a six foot space where you're like, oh that's where probably just even a body was, but perhaps like a pine coffin. And so it's just all rotted away right, so there's quartz six feet of like, in depth, right? But I mean like you can also see things like a funeral home markers. So they're metal. They have glass on the front with literally a piece of paper, so just like a piece of paper with a hand-written name on it. But obviously glass breaks and all of a sudden that rots away too, and so it's just a metal marker. Later on, people were pouring concrete into, like, you know you put down kind of two really long pieces of wood, two short pieces of wood and makes a rectangle you pour concrete in. And then you have on top of where the body is, basically a very large headstone. And you could see people handwriting with sticks the names of people,



right? Because that's, the only way they can do it because of the wealth inequality that's clearly lingering from slavery, right?

And so I loved all this because I was like, this is such a way to understand, like US South, like America, like you can see all of American history in the disparity of 10 feet. Like you go right 10 feet and we have these massive beautiful graves of Confederate soldiers. And then over here, 10 feet over, is really well tended to by the local Black people. But, you know, there's massive trees that have grown up. And you know, there's all these kind of fake flowers and everything because they're permanent, they last through time. But you know, it's on concrete with handwritten stick and it just says Henry, right? And that's so interesting to, like, being able, just to physically look down and like witness all of American history in one go.

Inevitably every cemetery you go to has stories like that, right. And so like one of the most famous cemeteries in Athens, Georgia, where the University of Georgia is, has an entire section that just looks like nothing. But like, it is something. It's where the paupers are buried, but it's actually where the Black folks get buried. So like where the poor people get married, which is mostly just Black folks. And it's where the river floods. So the river just floods through this area. And so like if any rocks or wooden markers ever existed there, they're gone right. Literally you can stand there and look up to the right and that's where the top Confederate officers of, like, the entire thing are buried. And these are massive obelisks, right, they're like 20 feet tall. And what's on top of the most amazing thing about that is they will be next to other kind of wealthy white people from the same time period who, you know, lots of women and struggled with infant mortality in the 1800s and so you will see them have infant gravestones. They're small, they're always small right, because the baby's small, the thing is small. Sometimes they just said, the word infant sometimes they'll say, like the first name and they'll say son of blah blah blah. And what's fascinating, and I literally brought students to kind of witness this, right, is like so here on our left there's what looks like an empty nothingness but actually is all of the Black people in this county who built this county. So some of these people are former slaves. All these people worked and made the city what it is today. And over here on our right, we can see not only these massive obelisks of some of the wealthiest people whose names are on the buildings of the university, they're on the street names, the town, their babies got little headstones. We know about their babies, who were a day old, born stillborn, and we don't know a thing about these people, because they had temporary headstones. Literally just rocks or wood that has rotten away, it's gone. And it's like this is, this is it. Like, this is the rest of American history, like, we will have to deal with this forever and ever and ever. Like, this is how it started, and we will have to deal with this now. We will have to deal with this for the rest of the United States. And so I love cemeteries, because they are just encapsulating everything that you can look in a history textbook and find dry and boring and blah blah blah. It's like no no, go and look at it and you can see how actually the whole thing is, right, and in depth, right.

**Kelsey Henry:** I absolutely loved what you said, and this is a paraphrase, but it was so brilliant, about how you can see all of American history in the spatial arrangement and material upkeep, like lawn mowing, of US cemeteries. And what you were really getting at is looking at the cemetery as a primary source. And you were sort of alluding to using the cemetery as a primary source, as a teaching tool. I have not taught high school students so I haven't gone through that process of trying to think really creatively about archives pedagogically for a younger audience, but I love the idea of thinking about the cemetery as a primary source and offering that to students as a way of like understanding history. Or that collapse between the present and the past as being always already at like, at their

fingertips, or in their neighborhood. So I just thought that was such an innovative, innovative way to think about the lived and built environment as an archive.

I know that we'll circle back around to pedagogy and teaching, but I really wanted to kind of turn towards some of your many other hats that you've worn as a historian. They're have just been several and there's so many different directions that we could go in, and we'd love to hear more about your digital humanities research fellowship at the Center for Virtual History. So we're always interested in hearing more about the digital humanities or public facing history, especially as it pertains to disability history and helping academic work reach broader audiences, so I was hoping that you could tell us a little bit more about what you did during your fellowship for the Digital Humanities Research Fellowship or point us towards any particular projects in the digital humanities that folks might be interested in.

**Leah Richier:** Yeah so my fellowship year came, I graduated with my PhD. I had a year as a visiting assistant professor at Washington and Lee in Virginia, and then I had a fellowship with death history, so D-E-A-T-H, not D-E-A-F, history here at the University of Georgia again. And what was really interesting for me is, I, again, if you can't tell I really like massive databases. I like looking at lots and lots and lots of stories to see little individual stories. And so I had already done that with my dissertation with these lunatic asylums, and so the project that I worked on. was at the time called Count the Dead. And what it was was looking at death certificates from 1919 to 1927 in Georgia, the state of Georgia, and trying to look at the disparities between the deaths of, and lives really, of Black and white folks in that time period. And so for I guess a year, I transcribed death certificates. I had already obviously run into medical reports before, but these were like physical medical reports, right, so cause of death was very scientific and also from the 1920s. And so we use some of those terms still, but for the most part we don't.

And what was fascinating was seeing all these people's lives through their deaths, which is what I had already been encountering over and over again with my own research, right. And so I think one of the most intriguing moments for me in these death certificates was to see events so specific to the time period, but that once you read it, you understood like so much about the reality around this person. that's now dead, right. But like I'm looking at the moment they died. And so, you know, one of the gentlemen who died was a Black man who was kind of older, he was a bellhop, so a guy who works at a hotel. And he was crushed to death in the elevator when it collapsed, right, so the elevator like broke, and he in the elevator died. And so that in itself was so fascinating, right, so you know, thinking about right, in the 1920s, like elderly Black men were bellhops at hotels and like accidents would happen such as this where they died and that's, that's just the end of that person's story. Like, they died serving white people in a luxury environment, you know. And so like, familiar but unfamiliar. Like lots of World War I veterans, right, so people dying of other related things and then, you know, you would look up and find their gravestone and it would be the US federal one that's gifted to you as a military veteran. One of those was a young Black man, and that was perhaps one of the highlights of my life. I trespass a lot if you can't tell, to go to cemeteries, so yeah I'm a criminal I guess. But a lot of cemeteries are on private land right and I'm like well I'm gonna go find the cemetery. And so I had seen this young Black man die, and I was like, you know, I found online that he has the federal gravestone but I can't tell like what's happening with the cemetery, like, it's like the pictures are weird like it's just his headstone. And I was like I want to know where the cemetery is. And so we go out into the middle of nowhere. I realize, oh we're on an old plantation, but he's a World War I veteran and he died in the 1920s, right. And he's young he's, he's in his 20s when he dies. And so I was like this is a plantation or a former plantation. And so angry white guys on, it was like a mobile lawn mower as he's going by

and we're driving by him like awkwardly trying to find this gravestone and then all of a sudden there it is in the woods by itself. And so I hop out of the car and I realize this actually is a slave cemetery and he as a World War I veteran in the 1920s is buried at a slave cemetery on a plantation. So everybody around him these like little indents, right, those are all graves. He is the only stone gravestone. And so I was like, oh, this is fascinating. So this is the, this is why they have not been able to tear down this part of the woods, because he alone is making this clear that this is a cemetery, which, unfortunately, lots of white people, you know, when they know there's a slave cemetery, they don't really care and they'll, they'll kind of remove everything from the area and do whatever they can to utilize the property, right. And so, he's saving, he's saving his entire family in death, right, like you can't touch this area. It's clearly now a cemetery and so his early death in his 1920s after he served in World War I has like preserved the slave cemetery, has preserved his people's resting place. And I was like this is, this is fascinating because I'm very white, now this white guy is staring daggers at me across what was clearly former cotton fields. And so I'd like hop in the car and we drove off and there was dust everywhere. And it was just fascinating because I was, like you are so angry that this person exists, right? Like you're just so mad. And I love it because he's only showing up in a couple places, right? So he's here in this gravestone, he's here in this death certificate. He's here a couple places in the census, he's here in the World War One draft card registration. And like that's all we got, like, there's not other primary sources that were ever saved, they were never preserved, right, because we again kind of privileged white people's history. And so this Black people history has probably stayed within the family and it just doesn't exist in public spaces. And so it was a great project for me, because I was just kind of replicating stuff that I was doing previously with my PhD and with my own research which is like, yes, there's this massive digital humanities database, but then there's that extra exciting part where you go out into the world and experience it. And so like that would be one of the things that I would say is really key to digital humanities projects that people really kind of get obsessed with they're like, oh, we can do it all on the computer and I don't have to kind of touch the real world and it's like absolutely you do, like, you have to go the next step. Go out the door, look around, see what's up. And so you know, one of the main projects that I always like, my students always like is called CSI: Dixie. It's very similarly a massive project, database project where, his name is Stephen Barry, he runs the Center for Virtual History, he did Civil, sorry, well kind of Civil War era, but South Carolina coroners' reports. And he has kind of had a couple of major stories about them, but he does lots of, kind of, digitization of them and transcribing them. And it's really helpful for students to get a deeper understanding of what's going on in the South, which is, you know, the leaders, the lack of social services, there's a lot of kind of darkness and accidents, and questionable decisions. So a coroner report is basically like, what happened here and so there's lots of people that are like, this slave just happened to die. And, you know, like, clearly by the description and the report, like, you, it's a murder, this is a murder, and they're like he just he died, it was an accident. And so that's a helpful digital humanities report because it exposes some of the, you know, truth of the US South, right. And so, like, for me, when I have used that project I often show my students, like, these are the locations, right, like let's look at them. Because otherwise, again, so much of this can become dissociated, detached isolated nothing, right. They're not science fiction, this isn't fiction, and so like you have to kind of put people in these actual moments, in these actual locations. And so I love digital humanities, but I also think we, it becomes almost like a video game, you know, which is great, because we all are stuck inside in a pandemic and got to view the world like that, but like we can also still, like, explore the actual human world in combination, right, with digital humanities.

**Caroline Liefers:** I mean, along this vein of technology and using virtual spaces to learn more about history, you are fairly active on social media, and I know you've thought about

the role that social media can play in our work on disability history. But throughout our conversation we've also talking, been talking about the danger of using history and other people's lives and stories to draw attention to yourself or feed your ego. And I would be really curious to just hear your thoughts on what's currently happening in the disability history space on social media or, if you have advice for scholars on how to navigate social media as a tool for learning and sharing material. Anything in that vein would be really interesting to hear.

**Leah Richier:** Yeah, so I study dead people and early in the pandemic last summer I, one day, I think fairly carelessly, tweeted something that I was like, this is how I feel about the pandemic. And then I walked away from my computer and I kind of looked a couple hours later, and I was like, whoa, a lot of people have retweeted that, and I was like, huh, okay. And then I was like, this is not becoming viral, is this? And it was. It was retweeted I don't know how many times, I think the last time I looked it was liked by like 120,000 people or something. At the time I had had like maybe 3000 followers. Right now, I think I have like 11,000. They're all because of that tweet. And that was surprising for me. I obviously have been kind of slowly networking over time, over many years, you know, and like we all kind of play around with social media like hey, this is what I do, but also like, I ate this today. And so it was, it was surprising for me because I had just left academia. And so that's partially why I was like, I'm upset about the pandemic. I'm going to say as a death historian I find all this grotesque, that we are stumbling through this mass death event. Like, I can't believe we are pushing aside people, like, you know marginalized people for instant gratification. I can't believe we're doing this like, this is just utterly grotesque. And Patton Oswald retweeted it, you know, just like super famous people were like, yeah this is true, and I was like, I, I said this, while I was sitting on my couch, like, you know.

And so I think that's one of the more confusing things about social media. Like, I had said other profound things before that, but you never really know what's going to go viral, both positively and negatively. So when that happened, I was put all over the internet. I had people saying, oh you're on Reddit. So if you don't know what read it is, it is a website that conglomerates information from all kinds of places. It also has really dark sides to it. And so, in the comments people were questioning if I really was a historian. One of, one of the comments was she probably is just a Starbucks barista, which I thought was very, very mean towards Starbucks baristas. I was like, they are infinitely better than me, like, please no, like, like I am nothing compared to the hard working souls who make coffee. But it was fascinating because I literally had people going on my website and being like, she is a real historian. Here's her CV. And I was like, what just happened? Like, where are we in reality that, like, you're on my website being like, see she got published in this journal, she's real! On reddit like, and people are debating my credentials, I was like well what is happening, like okay. And so social media to me, is a lot of yelling at nothing and then having like this shiny, punctuating kind of moments where you're like and then everybody is staring at you. And you're like, oh. And so, where I was on Twitter was the expectation, I'm going to do academic networking. And it's not just for academia everybody is looking at you from Patton Oswald to people on 4chan. It is an opportunity, certainly, to get your voice out there to find other people like you. to learn from those people.

So I love disability Twitter, because I follow tons of disabled people I follow tons of disability scholars and they are doing such interesting, fascinating things right? But if you follow them long enough, they get attacked by people all the time. And people are incredibly cruel to them. And that's not always worth it. Regardless if you're disabled or not, but particularly if you're disabled in the kind of world that we live in today, that can be really tough. Like, you're dealing with a lot of other things and I've certainly seen people have to like almost prove that they're disabled, which is the absolute worst. And if you're a

historian, particularly for disability history, it's like, maybe there's better places for you, right? Like, doing your real research, trying to get, like, these stories out there, right? Helping your students? Like that's, that's a lot of the important stuff and social media can feel like something's happening, it can feel rewarding. But it's not. It's an addiction, right? Like I get frustrated when I'm like I thought that was a great tweet. Why was there only three likes to it. And you're like well because of the algorithm messed up like, and I tweeted at 1am no one's awake, like, it's my fault, like. And so, or I could have been creating a really interesting lesson plan that discussed some disability issues, and those are two different choices I made. One was I want the immediate gratification of like 1000 likes instead of the hard weird work of like trying to piece together something, and maybe it fails in the classroom and I'm like, but, but. Yeah so those two things are totally at odds. And like that sucks because I really, really liked disability Twitter and I'll never meet some of those people in person. And so I stay on Twitter and other social media because I like hearing those people's stories. I like learning. But like, I doubt highly that a lot of us will ever say anything as remotely profound as like those occasional things that go really viral. We all just spend a lot of time, you know, yelling into the void and part of that is I think there's a lot of academics who are lonely and insecure and want validation, like, right now. And that's kind of one of the problems about academia that we don't feel fulfilled in our physical lives, right? Like the people that are around us in graduate school or at our schools, like, they're just not fulfilling. It's not satisfying. And so we go elsewhere. And that totally makes sense, particularly for disability history right? Like everywhere, I went I would have been the only disability historian. And so, like trying to find my group at one of these schools was never going to happen. But at the same time, should I spend all my time in a virtual world? Probably not. There's probably other people who I could talk to you about disability history in person, who could become little disability historians. And that seems pretty worthwhile to me.

**Caroline Lieffers:** Well, I mean on that vein of talking about disability history to people in the real world, you are of course now working as a high school social studies teacher in Houston, Texas. Do you find that your training and your work in disability history shapes what you do in the classroom?

**Leah Richier:** So I am always telling I guess stories to my students. I've had a lot of my students who I think are precious. I thought my college students were precious, too. I taught people who were in their 70s and 80s. So I just find all my students precious regardless of age. But I certainly think high school students are precious because they are in development in a different way. And they ask the most fascinating questions. So I'll have like something up on the screen about like Christopher Columbus and his conquest of the Native Americans. And someone will raise their hand, and you're, like, yes what's the question and I'm thinking this is going to be like about these big issues we're dealing with. And they're like, what does conquest mean? And you're like, all right, I'm going to define that for you and I'm going to realize you are 15 and you were still learning vocabulary. And so, like, you know simple words that like, on like in the history textbook that we have it said the word lumber and it didn't define the word lumber and the student was like, what does lumber mean? And I was like, that's a great point. It means wood. And they were like, why didn't they say wood? And I was like, lumber becomes, like, like wood become special, like when you try to sell it. I was like, this is so fascinating, like. And so one of the things that I have realized teaching high school, which is, I think, unique but it's like super fun -- it's like they're working on it. Like they are actively trying to be like, what is America? Who, what are you, you know? And I'm like, oh this you know? And like, that's very helpful. I'm a very flexible, humorous person, and so like I just kind of roll with the punches. And I mean that's, like, you need to do that. Because, as it turns out, history is being made all the time. And so, when I entered into teaching social studies high school, it

was in the pandemic before we had the vaccine. My school immediately was like, yeah you're going, you're going back, you're going back, it's happening. And I was like, oh cool, cool, cool, cool. And so I was just like in the classroom with a mask and there wasn't a vaccine. And so students can choose to be hybrid. People with medical conditions could be online too, like so teachers, and I chose to be in person. And so I was like, well they're in person, a lot of them and so I'll be in person. And so I was like let's go for it, let's see what's up.

And so disability is such a great place because it's, it's a it's a good way to be already thinking differently right. And to really look at every situation and, like, like I said, like really push on it be like what really is happening here? Like, don't just assume like the biggest easiest narrative, right? And so every time I run into disability, which is constantly, you know, you see these moments where you're like, oh, this is so much more interesting, this is so more complicated, right? And so I love being able to kind of be with young people who are working through, what's existence? What's America? Who am I? Because then you can just be like this is it that this is real – like, disability has always existed like LGBTQ issues have always existed, like, race is real, like we gotta, we gotta deal with race in history. Texas, and a lot of other states are really working on fighting against quote critical race theory which is just basically being critical about race in history, and it's been fascinating to watch my students be like, yeah, let's talk about that. Like, they are not afraid. It's other people, particularly older people who are afraid of dealing with those issues. They want to talk about the most controversial things, and that includes disability. And so, because I've always been kind of fearless and confident about, like, okay disability people, they exist. They're around, like, it's just made it really fun and easy in the high school classroom to be like, okay, this is real let's go for it like, what's what's happening.

And so being a disability historians had been really fun, because obviously doesn't matter if I'm if I'm in academia or not. Like, I just am one. And so it's fun being a high school teacher, because they are very interested in mental health. And they want to know about these kinds of things and if they've always existed. I mean literally, one of the first days of this year, someone asked me has PTSD always existed? And so then I got to contextualize PTSD and that was very fun, you know, and so there's just always these issues, you know where they're interested. I'm literally sure there are some admin, teachers, parents, not just at my school, but at all schools that are like, no no no, don't talk about disability. Don't talk about mental illness. And you're like, oh, but they're asking about it and I'm gonna answer, because I'm a teacher. And so, that's what I do. And so I appreciate all my experience with disability in academia because it's kind of taught me you've just got to do it, you just have to answer truthfully, right.

**Kelsey Henry:** I was thinking a lot about my experience as a high school student learning history, like taking US history classes. And I was sort of retroactively imagining what it would have been like to learn American history from a disability historian, or to have any sort of exposure to disability history or disability as a unit of historical analysis or an aspect of lived human experience that we should pay attention to. And I mean, I know that I would be much better for it, and I would have been a completely different high schooler if I had had exposure to disability history at a younger age. I'm wondering if you have any advice for other teachers, maybe who don't have the training that you have in disability history? Whether they're teaching at the junior high level, high school, college, maybe even primary school, regarding integrating disability history into their classroom?

**Leah Richier:** So I think one of the first steps that I take, probably because I am a nerdy scholar person, is reading. Anytime I'm going to teach something new, I just buy a bunch of books on that topic. I don't always read them thoroughly, but I do at least skim them

and, like physically in my hands, where you can buy an e-book that's fine too. But I like seeing peer-reviewed books on the topic, right? So like, when I was teaching world religions, I was like, oh I don't know all the ins and outs of all the major world religions, so I'll just buy a bunch of books on that. And so I've now read a bunch of things that I was like, this is helpful, thank you. And so, for people who want to integrate disability, I know it probably is horrible to suggest this, but you probably are going to have to buy a book, you're probably gonna have to at least skim the book. I think one of the easiest things, though, is that there is a book called *The Disability History of the United States* and wow that is a helpful book. That is so helpful for K through 12 and for college teachers. She lays it out really, really, simple and easy. She goes through literally the chronological time period of the United States. It covers a huge range of things. As a person who, you know, like specializes in a couple of those spaces, it was really cool to see the author really, I was like, oh yeah, no no no, I talked about that in my dissertation, that's my stuff, like, look at you, you're saying it really quickly and, like confidently, and intelligently. That was great. And so, you know I literally have bought, you know, that book, I bought, you know *The Queer History of the United States*. It was like, I've bought Asian American history, like Hispanic American history, like Arabic American history, like you, you just have to cover the whole thing right? Like if you're going to include people you really have to be like, okay, I am here now. Otherwise, and this is where I would absolutely say, please do not include disability like this, which is in a token kind of way. I think, at some point we realized, oh my gosh, we're not talking about women, and so, then we were like, we'll have them in a separate little section over here on the right side of the textbook page. And we'll be like, it's, it's Dolley Madison. And you're like, all right. So there are like other women around and stuff and they're like, they were wives. And it's like, we can't, we can't do this. Like, inevitably because I think we like disabled soldiers because there's patriotism and a lot of material around them because typically for the longest time they were white, it's like they, they show up, right? And they also become a little not disabled in a lot of ways right? Like they just become like super American, like they're almost better now that they're disabled, right, they, they're like special now in that kind of extra American way. And, like that's troubling, like don't do that to disabled soldiers. Like they of course have always existed, but then you should really like see what that looks like. What does that look like from all points of view, right? So in the United States, like what does that look like on the kind of early colonial period all the way to now? And I mean that's helpful for kids to chart changing disability, changing medicine, right? Changing masculinity. Then eventually we have women who were injured in combat and they become disabled. It's like, that's fascinating, like, that's a great arc to learn. But like if you just sit there in World War I and you're like, look at these grotesque images where, you know, they had their face disfigured and like, wow, this is the rehab where they have this mask put on their face, and then you never talk about disabled soldiers again? Like, you are on purpose trying to like create an idea and image around the horror of World War I, which, by the way, all war is hell, so like you either go for it, or you don't, okay.

And I feel the same way when we talk about intellectual disability. You could you could do a little name drop here and there. But you're also missing out on, intellectually disabled people have existed all throughout the United States throughout its history. And so, like, okay cover, cover the arc, right. So, like we do that with eugenics, right, so we all of a sudden are like, ooh look eugenics shiny shiny shiny horrible horrible horrible. Wait, well eugenics is still one of those questions that people have in the disability community with even moments like this with Covid-19 and the pandemic we're having, right? Like are immunocompromised people even under consideration as we walk around the world and kind of spreading Delta amongst each other? It's like, well, no, they're not. And you can look online there's plenty of people who are just saying it's your fault if you die, immunocompromised person, like we're just going to live our lives. And it's like, that's

eugenics, like, that's eugenics. So we're gonna have this in existence, then pull it back through time. Let's see how often that's happened right that, like society has said, some of you get to live, some of you don't get to live. And so that's, that's necessary. That's actually how history works. It's change over time. It's not these, like, little isolated moments that are for grotesque reasons, or for the opposite, which I think happens particularly with able-bodied and able-minded people where, it's the word I said a few times, it's inspiration porn, right, like where they're like, oh, this is fantastic! He overcame his disability. And you're like there's nothing to overcome, he's just living with his disability. This is just his life. Y'all are doing this extra like thing where it's an achievement to exist when it's just existence. And I think we do that a lot in our kind of mainstream history with disability, where it turns out, like, we don't know how to talk about it. It's not considered normal to include. It's abnormal, actually, or atypical and it's like, no, this is really just like how we should be talking about women all the time and Black folks all the time and LGBTQ people all the time. It's just, it's just actually history. Like they existed throughout United States history and throughout world history, right. And kids want to know, like they're not, like, oh well, I'm just accepting of the mainstream argument. Like they want to know all these interesting things that have not been a part of the story they've been told since elementary school. Like they want the next step, they want the more complicated narrative, right? And that can go in all kinds of ways, right. So being disabled doesn't have to be positive or negative. It just is. It's just an experience and it's existence, right. And so I think that can be tough for a lot of teachers, because they want to put a kind of value on it, like an argument on it, when it's like, it's just people stories. They just exist in time, right. And so, you know, it might take some more work, but actually your students will be better for it. Your classrooms will be more interesting.

**Caroline Lieffers:** Thanks so much for that answer, Leah, and that reflection to just go out, do the reading, do the work, appreciate the complexity right and don't fall into simple narratives of inspiration porn or something like that. So, I think that's a point well made and certainly well taken. Was there anything else that you wanted to share as we're wrapping up the conversation? Anything you feel was left unsaid or anything like that?

**Leah Richier:** I would be curious, and this is just kind of a statement for the future of disability history, if we will ever get into the same places that, particularly right now I am seeing with African American or Black history. Which is that has become cutting-edge and exciting for a lot of universities. Obviously we're in a kind of Black Lives Matter, and so all of a sudden there's this realization that Black history is really important. It was important before. We just neglected that. And so I am very curious if we're going to ever move to a time period where disability history will be like that. I know a lot of my friends in disability history, and I mean across the world, have a really tough time getting jobs as a disability historian. They typically are hired because of something else happening, right. So like I study India. Okay, well, you study Asia so, like, you're the Asian historian. Which you're like, well actually just India, and actually just disabled people in India. And they're like you're going to teach Asian history.

And so the same thing happens to people, you know who are, I'm going to study deaf culture in World War I and typically you know, how people no longer can hear after World War I. And they're like you're going to teach science and technology. You're like, kind of, kind of I do that. And so I'm very curious if we'll ever get to the place where I think fortunately now Black historians have, like, literally people who studied Black history have gotten, right, where it's like you're being seen for you and being appreciated for you. Probably also exploited and weirdly taken advantage of and also probably going to be neglected by a good number of these institutions who can't take care of you. But they



want you, right? I don't know if we'll ever get to that place and that is interesting for me. Because I think disability history is really, really significant

**Kelsey Henry:** I think that you are right to point towards larger historical circumstances. Like social, political, historical circumstances that I think progressively over time, and these flashpoints in cultural and political history that have moved the dial and created more sympathy. As we're seeing the humanities being massively defended in academia, these exceptions, these holdouts that are influenced by a social or political climate that's larger than a purely academic ecosystem. But I do think that part of the rise, the ascendance of Black studies or Black history as having a more clearly defined space and the academy's seeing like, more positions on the job market or even, I'm thinking, like, I live in New York and I remember seeing a job listing in 2020, Fall 2020, at a private school in Manhattan for scholars in residence at the PhD level who were doing Black history and Black studies so that they could bring that into an elite high school setting. And I do think that there was a reactionary quality to that. It looks very good to further institutionalize Black studies. And I mean I do Black studies and disability history, so, on the one hand, I've gotten really excited to see more expansive institutional space for Black history, but it kind of, the question that you're asking does make me wonder like, what sort of social or political event might precipitate -- because I do think that's a big part of it. Like, what larger circumstances that are sort of making it suddenly important for the university to invest kind of situationally in the humanities, in a way that makes them look good? What scares me is it seems like those major flashpoints, like, those social historical moments that do move the dial tend to be moments of extreme violence. I don't really know what to make of that and I don't have, I mean, I don't have a good answer for you, but I guess my, my lingering question is what would it take in the world around us to make disability history, ableism, an issue that universities decide to invest money in?

**Caroline Lieffers:** You know, it's kind of an upsetting line to go down because, as you suggested, Kelsey, what, what scale of tragedy would it take, right, for that to shake up the foundations of a conservative institution like a university, right, and get them to fund that? We could also ask the question, like, is a tenure-track job or are -- is a growing number of tenure track jobs the right metric for success? Is that what we want success to look like for the field of disability history? Sure, like, pragmatically for all the PhDs that are graduating that would obviously be lovely if they could all fall into the soft embrace of a tenure track job, but I think, I think we'd be making a mistake if we stopped there and said that's what success looks like. Because I don't think that's the project that we're really after here.

**Leah Richier:** Yeah, obviously I would say as person who's left academia, no that's not where success lies, right? A lot of academics are overworked, underpaid work 24/7/365 which, if you're disabled is not really great on your mind or your body. But also you're able, that's not really great either. And so I am interested to see what will happen to disability history. I am genuinely, genuinely interested. It's very difficult to have a regular walk around job and do the same kind of research and teaching with disability history as it is, if that's your whole job. And so I think there's some lists and benefit to having academia, having spaces in academia for disability history.

Of course, I said this to a university president, and he was saying, oh I love your work on disabled people. And I said oh, thank you so much. And then I said to him, I will continue to do this, even if I work at Starbucks or Walmart, so I would appreciate if you got me a job, but just to let you know, I'm going to do this, regardless of where I am or what I'm doing. And he looked back at me and said, oh no one's ever said anything like that before. And I said, well, you know I'm going to do the important work that I have to do in this

world and that's the work of these disabled folks. And if you want to pay me to do that, that would be great. But I'm still just gonna do it, all right? And he really was super surprised. But, I was like, sorry, like, disability history is just going to have to happen, regardless if academia has a space for it. Like, we're gonna have to keep talking about it. We're gonna have to publish regardless of, you know, some of these major university presses want it or not. Like, we're just going to have to, you know, multitask, right? And so that's going to really suck, I think, for a lot of disability historians, because no, there aren't going to be the cushy sweet jobs that were promised. Instead there's gonna be other kinds of things which are going to be really great. But then you're also going to have to keep really thinking about your work, otherwise it's just going to fade away. And that makes sense to some extent, because you have a new life now. But no, but seriously if you want to tell those stories, if you want to talk about those issues, you're just going to have to work. Then, you know, disability history is going to have to adapt to the slow weird deaths that academia is experiencing with the humanities, because I don't think there's going to be an expansion that includes it, unless it's like Kelsey said, where something horrible happens. And the only thing I can imagine immediately in the most sci-fi of ways, is that Covid-19 causes so much disability amongst the population that then there's an interest in disability. And that's really dark and I really don't hope that happens. Instead we're just probably going to have to work really hard you know, to keep disability history afloat.

**Caroline Lieffers:** Well, thankfully we do have a wonderful community of scholars who seem more than up to the challenge of keeping this field going.

**Kelsey Henry:** Thank you so much for joining us today, Leah. I had such a wonderful time speaking with you. I know that Caroline did as well, and we're just so excited to share all of these stories that you told us with our listeners. So thank you so much, thank you.

**Leah Richier:** Thank y'all!

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**Caroline:** Thanks to everyone out there for listening or reading the transcript. Please join us again next time. Bye bye!