Popular Disability Narratives' Chilling Dismissal of Health Care Needs and a Civil Rights Crisis

A favorite of readers, teachers, and parents, R.J. Palacio’s 2012 middle-grade novel *Wonder*—which will surely become a popular film when released in November—has drawn attention as a compelling plea to end to adolescent bullying. The novel’s charming fifth-grade protagonist, Auggie has single nucleotide deletion mutations and physical deformities; he is finally able to attend (a private) school because of substantial (plastic) surgeries. According to the text, Auggie is not disabled, and his biological differences allow his more normative peers to learn empathy and kindness. Palacio even writes that the story “has never really been about what happens to Auggie Pullman. It’s about how Auggie Pullman happens to the world.” Auggie functions simply as a “victim of bullying,” who inspires kindness—but he and his story fail to accomplish more.

However accessible and well intentioned, *Wonder* reinforces outdated, medicalized understandings of disability, while simultaneously refusing to acknowledge Auggie’s access to high-quality health care. In the context of recent and current health-care debates in the United States, this refusal becomes a troubling silence, a complicit acceptance of a growing civil rights crisis. As mainstream medical ethicists and politicians call for selective abortions to prevent the existence of disabled children, popular disability narratives such as *Wonder* fail to contradict them. Rather, *Wonder* teaches audiences that, with substantial surgeries and expensive medical treatments, disabled children may become, like Auggie, nondisabled. Surgeries and treatments, effective “cures” in *Wonder*, are threatened by proposed cuts to Medicaid and by insurance plans with unreasonable definitions of “medically necessary” procedures.

Activist groups, including National ADAPT, are fighting for accessible health care and pride in non-normative bodies, but *Wonder* positions adequate health care as guaranteed and non-normative bodies as sick—deserving either pity or “cures.” Increasingly disparate access to medical care reinforces such “cures” as privileges of the elite. Without adequate health care, children with disabilities will never attend schools like Auggie’s and will never receive awards for carrying up the hearts of their peers; they will remain sick, different, and marginalized.