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Title

Unmasked: COVID-19, face coverings, and navigating dis/abling spaces and cultures

Abstract

During the COVID-19 pandemic, some disabled people have been exempt from wearing a face covering in public spaces. Yet, disabled people have reported being challenged and abused for not wearing one. Drawing on key ideas and tropes from disability studies and the sociology of the everyday, we sketch out the adverse effects and ambiguities caused by the pandemic relating to the use of face coverings, along with how emerging cultural norms and notions of shame are publicly mobilised to police conduct. Touching on themes of access, materiality, in/visibility, and in/exclusion, we conclude that face coverings are simply another artefact through which disabled people are read, judged, and excluded in public life. We also contend that face coverings, and the controversy surrounding their use, are another example of how disabled people have been overlooked, disregarded, and disproportionately affected by the COVID-19 pandemic.

Keywords

COVID-19; disability; face covering; mask; sociology of the everyday

Introduction

Face coverings – and when, where, and who can (or should) wear them – have remained an issue throughout the COVID-19 pandemic. In the UK, face covering policies differed across countries, yet across them, exemption policies for people who cannot safely wear one (i.e. for reasons of age, health and/or disability) were established. Despite such policy exemptions being established, there has been multiple media reports of disabled people being challenged in public for not wearing a face covering and, ostensibly, for not conforming to legal, political, and moral imperatives. In this article, we attend to face coverings as a matter of sociological attention. As Lupton et al. (2021: 85) note:

[Face coverings] are things that come together with human bodies, other living and non-living things, place and space to generate forms of safety, self-expression, embodied socialities, creativity and care but also disturbing affective forces such as anger, frustration, discomfort, racism, social exclusion and shame. This is why masks as socio-material objects in COVID times are so vibrant, so political, so meaningful, so forceful, so enchanting: in short, so full of thing-power.

We begin by outlining the political landscape in which face covering policies came to pass and, subsequently, the impact this has had for disabled people who cannot wear them. This involves drawing upon recent media examples that document the experiences (related to the use of face coverings) of disabled people. Our approach included identifying free-to-access stories from major UK online newspapers (e.g. *The Guardian*; *The Metro*; *BBC News*). Using

their search engines, we typed in key terms (e.g. disability; mask; face covering) and identified relevant and high-profile examples for our analysis. We remain mindful of prioritising disabled people's voices, the need for disabled people leading analyses, and the limitations associated with media portrayals. The intention was not to develop a systematic analysis of *all* publications on the use (or not) of face coverings by disabled people. Rather, our approach was selective in highlighting illustrative examples to inform what is, for us, a theoretical argument about uniting ideas and tropes from disability studies and the sociology of the everyday. This is where we subsequently turn our attention; namely, how face coverings are a conduit through which to consider the adverse effects caused for disabled people who cannot wear them.

We are, of course, not dismissing the act of wearing face coverings for preventing transmission, especially for those who are clinically vulnerable. Rather, we ask what is at stake for disabled people relating to the use/non-use of face coverings as a *disruptive artefact*. Their use, at least in a UK context, has disrupted people's anticipations and taken-for-granted expectations in the public sphere. Using masks is 'deeply corporeal, sensory, and affective'; changing ways of being and our relations with others (Lupton et al. 2021: 48). Taken-for-granted assumptions and interactional practices have been altered during the COVID-19 pandemic (Rawls and Gibson 2020). Indeed, COVID-19 has '[unbuttoned] the normalcy of the "cosmos" of shared lived spaces, what we take for granted as and what we expect from a globalised life-world' (Schillmeier 2020: 1). The potential of infection means social relations have been 'thinned out and lived at a distance'; previously 'straightforward' interactions have become 'hot situations' of suspicion, alarm, and risk (2020: 2). With the taken-for-granted and affective encounters in public life in mind, we interweave media case studies from a UK context with sociological thought surrounding disability and the everyday. We argue that disabled people's non/engagement with face coverings are another artefact through which disabled people are – and historically have been – read, judged, and excluded in significant ways within public encounters in everyday life.

Face coverings

In June 2020 in England and Scotland, and July 2020 in Wales and Northern Ireland, Government officials mandated that face coverings must be worn by members of the public on public transport (Deacon 2020; UK Parliament 2020). Face coverings were subsequently made mandatory in shops and supermarkets in July in England and Scotland (UK Parliament 2020), August in Northern Ireland (Northern Ireland Assembly 2020), and September in Wales (Deacon 2020)¹. Yet, face covering exemptions were stipulated for people with breathing difficulties, people who rely on lip reading, facial expressions, and/or clear sound for communication, and people with sensory issues that make wearing them challenging. Those supporting such persons were also not mandated to use a face covering.

Despite exemptions being established, there have been media reports of disabled people being confronted for not wearing a face covering. In July 2020, mobile footage shared by Sense (a disability charity) showed a passenger verbally abusing 16-year-old Saule Pakenaite, who lifted her face covering to communicate with her sister Karolina, who has Usher syndrome and is deafblind (The Guardian 2020a). Pakenaite explained her sister's condition to the passenger, who then accused them of 'taking the piss' and claimed 'deafblind, my arse'. Louise Sharp (BBC 2020b) shared a similar experience, in which a fellow shopper confronted her about not wearing a face covering and, on explaining her exemption due to her daughter's

autism and her own panic and anxiety, was accused of being 'selfish'. This sparked a panic attack for Sharp, who is now afraid to leave the house:

People feel they've got the authority to question anyone, and I feel more should be done to address the issue of exemption and to give people respect...Please understand there are exemptions and respect those exemptions.

Others, like Georgina Spray (BBC 2020b), subsequently wore a face covering, despite qualifying for exemption, to evade expected conflict, especially when entry to public settings can be denied without one. Spray says:

It is stressful enough going into a shop when you have autism – with the background music, beeps of the till, customer announcements, people talking, bright lights, humming of the fridges and freezers. Adding a face covering is too much for many autistic people to bear...I don't carry my diagnosis letter and assessment scores around with me and people often say to me, 'You don't look disabled'.

Georgia fears not being recognised as disabled on account of the 'invisibility' of autism. She describes the anxiety of facing opposition and how, if this happened, she would be 'scared to leave the house'. The invisibility leads some disabled people to *visualise* (and thus, *legitimise*) a condition by using material props, such as the Hidden Disabilities Sunflower Lanyard². Yet, this strategy is not always successful. In an article for The Guardian (2020b), Paul Feeley claimed that in the space of a few weeks, he was verbally abused for not wearing a mask on public transport: *"I have a disability lanyard, which signifies I have a hidden disability. I tried to show it...And all I got back was a complete torrent of abuse...One man said to me "if you can't wear a mask, you shouldn't be allowed out".'* In an article for The Metro (2020), Corey Wood reports being shouted at by passengers on the bus when attempting to board, and the bus driver's refusal of his autism card to account for an absent face covering:

I want to make sure no one else like me is made to feel that their disability isn't valid, or isn't believed...With hidden disabilities like mine, people often don't believe that they exist...People often say I 'speak too well' or 'nothing looks wrong with you'. Someone can still have a disability even if it isn't obvious...I want to make sure that staff who are working in transport, retail and supermarkets are given clear guidance over the exemptions, and are given the training and support they need to support disabled passengers and customers.

A steady stream of stories document how disabled people have been abused and harassed, implored to wear a face covering, and denied entry into public settings (Disability Rights UK 2020; Shakespeare et al. 2021; Welsh Government 2021). Disability charities, organisations and groups have shared such tales and suggested that harassment has been exacerbated by poor public health messaging and awareness around exemptions.

In conjunction with perceived poor public campaigns, there has been a shaming of individuals who do not comply. In July 2020, Dame Cressida Dick (Commissioner of the Police of the Metropolis) said that police would only become involved in non-compliance as a 'last resort' and hoped that people who are not wearing a face covering 'will be shamed into complying or shamed to leave the store' (BBC 2020a). Public health campaigns equally embrace the idea

of 'embodied sociality' (Lupton et al. 2021: 76-77) and politicise face coverings as an act of care and civility³. Since face coverings gesture civic responsibility and relate to complex ideas of pollution and moral solidarity (Brown et al. 2021), people who do not comply are subsequently shamed and categorised as 'selfish, careless, and as not caring for others', and people who comply are 'applauded as virtuous, self-sacrificing, and recognised for their ability to care for (seemingly all) others' (Lupton et al. 2021: 78). Exemptions disrupt this binary of *the careful/caring* (those who wear face coverings) and *the careless* (those who do not wear face coverings). This framing is built, we contend, on ableist assumptions and imperatives. Casting individuals as ir/responsible for face covering use is a gross simplification that disregards the complex, disruptive ambiguities faced by disabled people who have exemptions.

Face coverings – enmeshed in the 'public scenography of pandemic life' (Brown et al. 2021: 284) – have become a political flashpoint that have put disabled people at risk of being challenged, abused, and, in some cases, threatened with arrest (Pendo et al. 2020). Our argument, again, is not about the merits of face coverings, nor does it concern policy legislation⁴. Rather, we argue that face coverings have been universally enrolled, and expected, in our everyday lives with serious repercussions, particularly for some disabled people. From here, we contend that ideas and tropes taken from disability studies and the sociology of the everyday offer conceptual and theoretical scaffolding necessary to understand face coverings as another medium whereby disabled people are read, judged, and excluded within public life⁵.

Disability studies and the sociology of the everyday

Analyses of disability emerge across diverse disciplines, such as sociology (e.g. Anonymous; Shakespeare and Watson 2010; Thomas 2010), anthropology (e.g. Dokumaci 2020; Ginsburg and Rapp 2020), science and technology studies [STS] (e.g. Galis 2011; Schillmeier 2007), and geography (e.g. Gleeson 1999; Imrie 1996; Kitchin 1998). Moreover, it contains subfields including, but not limited to, feminist disability studies (e.g. Garland-Thomson 2017), crip theory (Kafer 2013; McRuer 2006), cultural and literary theory (Snyder and Mitchell 2006), and critical disability studies (Goodley 2014; Liddiard 2020) – all of which express different theoretical allegiances, methodological curiosities, and empirical endeavours.

Here, we are not concerned with the contribution each subfield can make, but rather what the driving principles of disability studies can teach us about face coverings during the COVID-19 pandemic. Scholars in disability studies appear united in challenging the common view of disability as an individual deficit remedied via medical intervention and rehabilitation, often by (non-disabled) others. This involves departing from what is frequently labelled the 'medical model', grounded in a personal tragedy bias equating disability as living with a biological failing. In doing this, we can examine the influential role of social structures and oppression in the lives of disabled people (Barnes and Mercer 2010; Oliver 1990, 1996). Disability studies has provided powerful analyses of how social, political, cultural, legal, and economic factors define disability, and shape wider responses to difference along with who we see as human and worthy of life. Moreover, disability studies shows how we can disturb normative and ableist assumptions – encapsulated by Garland-Thomson's (1997) concept of 'the normate', that is, the corporeal incarnation of a culture's collective, unmarked, normative characteristics. This is similar to McRuer's (2006) notion of 'compulsory able-bodiedness', in which the deviant (disabled) other shores up the normate's boundaries.

Disability studies, then, provides the tools for analysing how ableist cultures are cultivated and maintained, how disability is represented as ‘the master trope of human disqualification’ (Snyder and Mitchell 2006), and how material, cultural, legislative, and attitudinal practices subject disabled people to oppression, injustice, and marginalisation (Garland-Thomson 2017). Disability is not simply a matter of biological impairment but is socially and culturally constituted (Goodley 2014; Grue 2016). Shakespeare and Watson (2001, 2010) argue, as such, that whilst impairment is frequently central to the disability experience, we should still place inequality, powerlessness, and structure at the core of our analysis. This involves examining how disablism – the abuse, oppression and discrimination of disabled people on grounds of perceived biological difference and inferiority – shapes their lives (Goodley 2014; Thomas 2010).

Yet, within the structural and the political are the micro-interactions of everyday life – articulated within the earlier accounts at the supermarket or boarding a bus. Such encounters require an appreciation of the micro and the macro, with a particular attentiveness into how the everyday, and the ‘mundane’, come to be shaped by structural forces (Neal and Murji, 2015: 811). Disability studies, whilst theoretically and empirically strong on matters of structure, power, and inequality, can be enhanced, we argue, by entering conversation with sociologies of the everyday. Conceptualisations of the everyday involve an ‘immersion in the seemingly unremarkable and routine relationships and interactions with others, things, contexts and environments’ (Neal and Murji 2015: 812) taking seriously what may otherwise be glossed over in the ‘mainstream’ as seemingly unimportant (Back 2015; Pink 2012). What the sociology of everyday life also reminds us, together with its somewhat intangibility, is that what may be ‘mundane’ to one can be experientially different to another (Scott 2009). Such intricate politics of face covering legislation within public space (and importantly here, *not* wearing) puncture what has often been perceived as ‘ordinary’ social interaction. Assimilating the everyday with experiences of disability (particularly hidden impairments) reflects previous work (White 2020), in which the lens of everyday life facilitates an appreciation, and deliberate prioritisation, of micro social encounters that may be glossed over or infrequently discussed. Thomas and Sakellariou (2018: 3) note how their ‘central concern lies with the taken-for-granted, everyday human activities at the heart of how social life is reproduced’ and its impacts on disabled people. Thus, disability is ‘lived, mobilised and enacted in everyday lives’ (2018: 4) and, so, foregrounding the everyday enables us to make sense of practices, relations and socio-materialities. It is why, we contend, that bringing both approaches together can help to make sense of face covering usage and its relationship to dis/abling spaces and cultures. First, we outline how disability studies facilitates spatial analyses of accessibility, exclusion, and public space. From here, we contend that to comprehend the face covering as a *disruptive artefact*, we need to engage with social interaction and socio-materialities as driven by the sociology of the everyday.

Disability studies: accessibility, exclusion, and public space

Disabled people have historically been rendered as Other and sequestered from space and culture. Moreover, scholars in disability studies and affiliated disciplines have long recognised how disabled people face an affronting array of social and environmental barriers in public space (Barnes and Mercer 2010; Dischinger and Jackson Filho 2012; Edwards and Maxwell 2021; Goodley 2014; Imrie 1996; Schillmeier 2007, 2010). Analyses in social and cultural geography, for example, have long recognised how space is ‘socially produced and

constructed, dynamic and ambiguous, claimed and contested', and is 'instrumental in 'reproducing and sustaining disablist practices' (Kitchin 1998: 344; Edwards and Maxwell 2021; Wilton and Horton 2020). Examples include no ramp access for wheelchair users, inadequate transport provisions and access to toilet facilities. It is worth noting critiques from, for example, science and technology studies about assumptions of accessibility (Hamraie 2017) including how wheelchair users are configured as the universal embodiment of disability, thus excluding diverse forms of embodiment (Fritsch 2013). Nonetheless, STS/materialist and geography-inspired analyses have shown how, by examining how bodies interact with material aspects of the built environment that attributes dis/ability (e.g. Galis 2006, 2011; Kitchin 1998), we can recognise a troubling legacy of disabled people being excluded from, and struggling to justify their presence in, public spaces. Architecture and space are, in turn, *disabling*; they reveal 'cultural assignments of knowledge and power' (Hamraie 2017: 1) rendering living with disability as a 'profoundly spatial experience' (Gleeson 1999: 195; Imrie 1996; Schillmeier 2020).

With respect to face covering use/non-use, disability studies provides the apparatuses for thinking about environments as conduits to tolerance and citizenship (Serlin 2010). Public settings are the primary (though not only) space in which face coverings are worn. The potential abuse resulting from *not* wearing a face covering in public settings, in times at which this has been expected or a requirement, has identified who does, and does not, belong in a space. The 'ordinary act' of wearing a covering can fabricate enabling *and* disabling spaces of calculation (Schillmeier 2007). Barriers are not just physical (such as signs on shop doors indicating no entry for people without a face covering), but also attitudinal, which may lead to interactions not unfolding according to the taken-for-granted principles of the interaction order (Bates 2018). The experiences of Saule Pakenaite and her sister, Georgina Spray, and Corey Wood, as documented earlier, convey the debilitating impact of overt forms of harassment and abuse together with the *fear* of such hostile confrontations. This can lead to forms of management (e.g. wearing a face covering even when uncomfortable and not legally obligated) and, in some cases, withdrawal from public spaces altogether.

Such lived experiences demonstrate how disability is, as geographical analyses highlight, an embodied experience that is collectively produced in and through space 'at the confluence of individual experiences of impairment, and social relations and attitudes' (Edwards and Maxwell 2021: 4). Interactions with unknown others, inanimate objects (e.g. face coverings), and physical environments shape disabled people's experiences of safety and belonging (Edwards and Maxwell 2021). In the media case studies cited above, we can argue that these are examples of how public interactions are affected and governed by ableist assumptions, and that experiences of harassment shape how some disabled people navigate public space. This has also been evident in how public space has been reorganised throughout the COVID-19 pandemic, such as outdoor dining areas on pavements, affording little attention to people with limited mobility and/or visual impairments. This feeds into a history in disability studies of examining how State policies, architecture, and social interactions intermesh to 'lock' disabled people out (Imrie 1996). Whilst disability studies is integral for understanding how the physicality of, and interactions occurring in, public spaces produces spaces of exclusion, supplementing this with contributions from the sociology of the everyday enables us to give weight to the taken-for-granted, everyday experiences of disabled people, especially in the context of the COVID-19 pandemic. We discuss this below, namely unmasking what may be glossed over, 'invisible', or misread as worthy of sociological inquiry.

Sociology of the everyday: in/visibility, materiality, and the interaction order

Across the course of the pandemic, face coverings became a routine practice in the ability and permissibility to be in public space. Alongside hand sanitisers, they became one of many mundane materialities (Pink et al. 2014), dwelling alongside other objects, such as house keys, mobile phones, and wallets. Like other micro socio-material encounters, face coverings evoke older traditions in sociological understandings of the everyday interactions, such as De Certeau's (1980) everyday practices and strategies, Goffman's (1959) analysis of the interaction order and Elias' (1939) work on the civilising process. Indeed, contributions from symbolic interactionism, ethnomethodology, and affiliated subfields have captured the complexities of everyday life practices, cultures, and spaces, and how banal face-to-face interactions add up to ordinary yet powerful symbolic rituals.

As Rawls and Ducks (2020) remind us, people (unconsciously) draw upon tacit expectations in situated encounters, and failures to ratify/recognise conceptions of self can strip people of presentations that they claim. With respect to COVID-19, face coverings mediate social interaction in ways that disrupt 'ordinary' (Neal and Murji 2015) expectations as well as recognised obligations and etiquettes. Indeed, routine moments can reproduce divisions and forms of in/exclusion (Latimer and Thomas 2015). Yet, as recognised above, for some disabled people, face coverings have been difficult (or not possible) to incorporate into everyday routines, which bears with it cultural, political, and moral meanings (Lupton et al. 2021). In such situations, they have been cast as lacking care or concern for others. The experiences of Saule and Karolina Pakenaite, Louise Sharp, and Georgina Spray, as examples, show just what is at stake when a *visible disclaimer* for not wearing a face covering is absent. Stares, comments, and outright condemnation translate into moments of stigma. Goffman (1963) recognises how stigma is not a trait, or 'attribute', that belongs to a person or persons. Rather, stigma is a product of social interaction. When individuals are not able to maintain a 'personal front' and meet 'normative expectations', they are set apart and become 'nonplussed, out of countenance, embarrassed, experiencing the kind of anomaly that is generated when the minute social system of face-to-face interaction breaks down' (1959: 23-4).

Thus, for Goffman, stigma emerges *in* interaction through stares, comments, glances, and gestures. With face coverings, the social order becomes fractured when normative expectations (i.e. that a person wears a face covering) are not realised, resulting in (frequently hostile) reminders that such a person has acted out of 'lines' (Goffman 1959). Because of such moments, or fears of them, some disabled people – like Corey Wood and Paul Feeley – report using materials in an attempt to sooth potentially fragile interactions and to 'pass' (Goffman 1963) without scrutiny or judgement. Face coverings or other materials – such as the Hidden Disabilities Sunflower Lanyard (intended to be 'a discreet way to choose to make the visible, invisible' [Hidden Disabilities 2021]) and the National Disabled Identification Card (launched in 2015) – reflect a broader history of disabled people negotiating notions of il/legitimacy and in/visibility in public spaces with the use of material belongings (White 2020).

The use of a lanyard or other tool – what Dokumaci (2020) calls an 'affordance', namely the devices which disabled people use to create conditions of live-ability – can be perceived as offering resistive potential. However, Alice Wong (2018: 89) reminds us that the visibility

afforded by devices, such as a white cane, is a 'double-edged sword'; 'while it may lead to more help from strangers, it also marks people as disabled and exposes them to ableism, or discrimination against people with disabilities'. Regarding face coverings, using materials to signify exemptions did not always achieve the desired effect, as the experiences of Paul Feeley and Corey Wood (documented above) make clear.

As disabled people's encounters with space are tied into their relations with (unknown) others (Edwards and Maxwell 2021), wearing a face covering necessitates an interdependency of recognition and understanding from others that is not always afforded to them. Moreover, people with invisible impairments may feel fraudulent when negotiating access (White 2021), due to the difficulties associated with receiving recognition and thus support. Pritchard (2020) explores how, in being denied or challenged access to public space, therein lies a hierarchy of impairment. Such 'incongruous encounters', for Pritchard, are told through challenges in access to toilets and parking spaces, where access is regulated and policed by others. Upon first glance, Pritchard says, material devices offer a productive solution for processes of dis/ablism in public spaces. Yet, such socio-material encounters rely on processes of recognition and proof of one's impairment or health condition. Relentless efforts to sanction presence in public can be both daunting and exasperating. Within the case of the COVID-19 pandemic and specifically face coverings or devices supporting exemption, whilst materials can, and have, become important markers for assistance, their use/non-use can attract unwanted attention. The scepticism held by non-disabled others is perhaps fuelled by wider perceptions of a UK welfare imaginary, where disabled people are understood as feigning impairment to receive services and immunities⁶.

Discussion: new everyday encounters, unmasking old exclusions?

It is our contention in this article that, by bringing together disability studies and the sociology of the everyday, we can make sense of how face coverings and their use/non-use have been positioned throughout the pandemic, with disabled people's accounts in mind. Given the changing nature of the pandemic, we recognise that the focus of face coverings is perhaps temporally and geographically limited. At the time of writing, all COVID-19 related restrictions in the UK – including using face coverings in public spaces – have ceased. Yet, face coverings may still be worn by those who choose to do so and, with the spread of COVID-19 persisting, many continue to advocate for their use. As such, face coverings may continue to be part of public life for some time. We can note, too, that whilst face coverings may continue to be optional, signalling hidden disabilities in public space will continue to be an ongoing concern for some individuals; masks are merely part of a longer trajectory about disability access, rights, and legitimacy in public space (Pritchard 2020).

We end this article with two observations. First, we emphasise the value of uniting disability studies with the sociology of the everyday. Encounters with face coverings happen as somewhat small, yet significant, everyday interactions in public life. This is why attention to the micro and the everyday is particularly significant in seeking to sociologically understand the experiences of face coverings in public space. We have sought to tell this story in three ways. First, through understanding the significance of what may or may not be visible in embodied social lives. Second, by highlighting how face coverings, or affiliated cards and lanyards in their absence, have acted as material devices in seeking to preserve or protect interactions (Dokumaci 2020; Wong 2018). Third, by signalling the significance of social interaction and the socio-material relations (Lupton 2021) with the sociology of the everyday

in mind (Neal and Murji 2015), we come to see how people are read, judged and thus, marked out and excluded from public social life. Of course, attention to the micro is always in relation to the macro, supported by the theorisations within the directions of disability studies and its unifying commitment to highlighting structural oppression. The face coverings are, thus, a material artefact in which these two fields collide, highlighting everyday encounters and their relationship to oppression and exclusion. The face covering is a conduit in which we can share stories of sociality, care, and interdependency, whilst simultaneously recognising, and paying particular attention to the structural forces and narratives that focus in on this and, indeed, take away from macro mechanisms that have failed disabled people and their families.

Second, we contend that face coverings are another example during the COVID-19 pandemic where disabled people have been overlooked, slighted, and disproportionately affected, in which their entitlement to *being present* is threatened (Goggin and Ellis 2020; Shakespeare et al. 2021). Our analysis follows analyses in social and cultural geographies which demonstrate how disabled people are frequently excluded from public space (Kitchin 1998: 344; Edwards and Maxwell 2021; Wilton and Horton 2020). Moreover, we know that in the UK's first national lockdown, the death rate for people with learning disabilities aged 18-30 was reported as 30 times higher than people without learning disabilities (Williamson et al. 2020). Disabled people made up 6 in 10 (59.5%) of all deaths involving COVID-19 for the period to 20 November 2020, despite making up only 17.2% of the study population (Public Health England 2020). According to the latest ONS (2022) analysis, a 'significantly greater risk of death' remains for all disabled people compared to non-disabled people, and this remains largely unchanged across the 'three waves' of the pandemic. We can also consider how disabled people in the UK were frequently: marked as disposable in public discourses of 'herd immunity' (Liddiard 2020); disregarded in public health messaging (e.g. no ASL interpreters at Government policy briefings in England); overlooked for vaccine and PPE provisions; designated as 'non-entitled bodies' (McLaughlin 2020) through, for example, the implementation of blanket 'do not resuscitate orders', and; devalued through the early adoption (and later abandonment) of the Clinical Frailty Scale (that devalues dependence) to determine admission to critical care and/or ventilator access⁷.

During the pandemic, we have repeatedly witnessed how disabled people face societal barriers and discrimination worsened not simply by their underlying impairments, but by the action and failures of Government and institutional actors (Shakespeare et al. 2021). Disablism and ableism define COVID-19; ableist imperatives deem impaired bodies/minds as of lesser value and subject to different priorities than 'the abled' (Liddiard 2020). Whilst our lives have been radically transformed, disabled people have been disproportionately impacted (Schillmeier 2020), not least in encountering dis/ablist assumptions about health, quality of life, and social utility (Scully 2020). The debates around face coverings, we contend, is simply another instance of mistreatment and being treated as an 'afterthought' (Shakespeare et al. 2021: 10). In her account of how her own reactions to disability-imposed lockdown 'remain unrecognised, invalidated, and unseen', Heidi Lourens (Lourens and Watermeyer 2021: 1) claims that 'my experiences of lockdown during the Coronavirus pandemic are not altogether different from my everyday experiences as a visually impaired person'. We are not suggesting that implementing face coverings as a mandatory measure in public spaces constitutes an explicit attack on, or conscious hostility toward, disabled people. Rather, we contend that the rollout of face coverings has fed into disablist assumptions and reflects a lack of awareness

of 'commonly accepted norms of form and function are not necessarily universal' (Scully 2020: 4).

We hope, in this article, to have ignited several points worthy of further enquiry and to inspire empirical research on such matters. The empirical grounds are limitless, yet we are acutely aware that we are making projections and arguably speaking for the lived embodied realities of disabled persons. More empirical work privileging the voices of, and led by, disabled people must be carried out to supplement and support the reports of disability organisations and charities and disability rights groups. There is much to unmask in the course of the pandemic and beyond, and the debates around face coverings simply suggest a new example in how ableism and disablism are woven into the fabric of everyday life. It is by telling such stories that the violence of concealment, as enabled by disablism, is troubled (Lourens and Watermeyer 2021), and we can work towards cultivating a more convivial and validating space for disabled persons.

Notes

1. The timeline is complex and what we set out is the simplest timeline that we could establish. This uncertainty perhaps further works at illuminating the discrepancies in wearing a face covering (or not), and the consequent tensions arising from their varying adoption.
2. The Hidden Disabilities Sunflower scheme launched in 2016 as an indicator to others that someone may require assistance, support, or more time. It has been adopted globally in airports and other public venues in the UK, and the charity created a mask exemption version after a surge in popularity during the COVID-19 pandemic.
3. It is worth noting that *not* a wearing face covering may be viewed as an act of care by people who provide support for disabled people.
4. Consider changes in UK legislation (in which people are not required by law to wear a face covering) and people reporting instances of harassment for *wearing* a face covering (The Mirror 2021; Vice 2021).
5. This is not to say that these are the only theoretical paradigms for such an analysis. See Lupton et al.'s (2021) socio-material analysis inspired by Foucauldian theory, domestication theory, feminist new materialist theory, and more-than-human theory forming Indigenous and First Nations philosophies. Moreover, one might consider face coverings within the context of a 'risk society' (Beck 1992; Giddens 1991).
6. We can also consider how complex, vague face covering policies in the UK reflect neoliberal discourses in which responsibility is shifted onto individuals and, subsequently, Government actors dispose of their own accountability. Confusing and nebulous policies, and recent calls to scrap face coverings, feed into an existing blame game in the political landscape; bad governance is overlooked by shifting the focus (and blame) onto individual behaviour.
7. As Goggin and Ellis (2020: 174) claim: 'Not to put too fine a point on it, recrudescence and repugnant disability underpinned conceptualisation, affect, plans, and practices for who would be cared for; especially in the extreme situations where medical resources ran out such as the scarce yet indispensable [PPE]...and the totemic ventilator'.

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