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AT WEST POTOMAC PARK IN THE NATION'S CAPITAL on the morning of May 2, 1997, the forty-second president of the United States publicly dedicated a memorial to its thirty-second president. It was a memorial more than four decades in the making. Perhaps not surprisingly, controversy attended the unveiling of the \$48-million, 7.5-acre memorial to Franklin D. Roosevelt. No stranger to controversy himself, Bill Clinton addressed that controversy directly in his brief remarks: "It was that faith in his own extraordinary potential that enabled him to guide his country from a wheelchair. And from that wheelchair," the president continued, "and a few halting steps, leaning on his son's arms or those of trusted aides, he lifted a great people back to their feet and set America to march again toward its destiny."¹

But there was no wheelchair at the memorial in the spring of 1997.

Ten days earlier, on April 23, the president had previewed his "wheelchair" remarks. After intensive lobbying from the National Organization on Disability, Clinton suddenly changed his tack; he announced that he would immediately send legislation to Congress to modify the memorial. Franklin Roosevelt should be depicted not as the public knew him and saw him during his remarkable twelve years in office; rather, he should be remembered as his intimates knew him: as someone whose locomotion was frequently facilitated by a wheelchair. The deception should "officially" end.

The new and improved memorial, though, was rationalized by the president less on the grounds of historical realism and more on American exceptionalism: "By showing President Roosevelt as he was we show the world that we have faith that in America you are measured for what you are and what you have achieved, not for what you have lost."² And yet the contradiction in metaphysics was palpable; who Roosevelt was and what he had achieved could never be uncoupled from the body he had lost during the summer of 1921. By stipulating that Roosevelt be memorialized, in part, in a wheelchair, was the federal government not insisting on showcasing that loss, rendering it public and permanent in the nation's collective memory?

Bill Clinton was also on hand three and a half years later when the memorial was rededicated on January 10, 2001. Again he spoke. At the close of his presidency, Clinton again attempted to rhetorically transcend the specifics of Roosevelt's crippled body: "What matters most in life is the spirit and the journey of the spirit. And we lug along that journey whatever body God gives us and whatever happens to it along the way, and whatever mind we were born with."³ To close the thought, Clinton might very well have written his own presidential epitaph: "But a clever mind and a beautiful body can themselves be disabilities on the spirit journey."

Nearly eighty years after infantile paralysis had invaded Franklin Roosevelt's body, the circle seemed finally to have closed on his disability. The deception was over. The story had finally been told. We would not disagree; the official story does seem to have reached closure—even if prolonged.

But we have another story to tell here. In part it is a very private story, played out in letters, diaries, and conversations far removed from the public spaces of presidential politics. At another level, though, our story is an exceedingly public one, for part of Roosevelt's rhetorical genius lay precisely in sustained disclosure. It is a story first and foremost about one man's unquenchable political ambition—but an ambition everywhere informed by a disabled body. It is also a story about how disabilities disable, how a culture transforms a bodily wound into a public stigma.

It is thus a story about rhetoric and about history and their interaction. To put the matter rather baldly: How does a crippled man become president in the context of a culture that elects only healthy bodies?

Deception, yes. But pitiless publicity, too.

The relationship between rhetoric and disability, of course, did not begin with Franklin Roosevelt; it has been with us from the beginning. We have only to consult Book II of *The Iliad* to witness the purportedly blind Homer making the connection. In an assembly of all the Achaeans—both kings and common soldiers—one man railed on against King Agamemnon and the nine-year siege at Troy. Homer the dramatist takes great care to describe not just the rhetorical "rantings" of Thersites but also, more importantly, his bodily appearance.

Here was the ugliest man who ever came to Troy.
Bandy-legged he was, with one foot clubbed,
Both shoulders humped together, curving over
His caved-in chest, and bobbing above them
His skull warped to a point,
Sprouting clumps of scraggly, woolly hair.⁴

Before uttering even a word to the gathered assembly, Homer has effectively disabled Thersites and his speech of dissent. Thersites' rhetoric is thus not

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inseparable from the speaking subject—in all his grotesqueness of physical appearance. In an age of primary orality in which nearly all rhetoric was embodied, this disfigured body presages his narrative demise.

But despite his lack of rank and despite his physical impairments, Thersites does not shy from poking fun at mighty Agamemnon's own body: "Still moaning and groaning mighty Atrides—why now? / What are you panting after now?"⁵ Was Agamemnon's acquisitiveness the cause of his out-of-breath, beleaguered body? Thersites' body had presumably been disabled by nature (and then defined accordingly), whereas Agamemnon's selfishness for Trojan plunder was a disability engendered from within.

But Thersites was rhetorically disabling not only Agamemnon; he reserved perhaps his strongest disabling invective for his fellow soldiers: "How shameful for you, the high and mighty commanders, / to lead the sons of Achaea into bloody slaughter! / Sons? No my soft friends, wretched excuses / —women, not men of Achaea!"⁶ Thersites had effectively feminized his audience through what is now a common twenty-first-century trope of soft bodies (feminine) and hard bodies (masculine). The irony to the assembled warriors and kings must have been palpable: A badly disfigured cripple was re-figuring his audience as the "truly" or "genuinely" disabled.

By hyperbolizing bodies in this segment of his epic, Homer's symbolic, corporeal punishment of Thersites is most predictable: "And he [Odysseus] cracked the scepter across his back and shoulders. / The rascal doubled over, tears streaking his face / and a bloody welt bulged up between his blades."⁷ So much for freedom of expression in wartime. And so much for being kind to cripples. The symbolism of the scepter is a most arresting image here, standing metonymically for kingly authority, a king whose authority also authorizes speech. Thersites' beating is thus both symbolic and corporeal; his silence is administered at the hands of kingly Odysseus. And, of course, the very public nature of Thersites' beating and subsequent humiliation served as potent proof to any other potentially acrimonious Achaeans. Speech would be carefully policed by Odysseus, and that policing assumed a form most appropriate to warfare, that of bodily harm.

Homer's depiction of Thersites (and Odysseus) is instructive for our study of the twentieth century's most important president, Franklin Delano Roosevelt, in several ways. First, and most obvious, both men were physically impaired. But while Thersites could not hide his lameness, Roosevelt could and did—both verbally and visually. That both men's physical impairments were viewed culturally as disabling speaks to an important condition: Cultures invest bodily conditions with meaning and in so doing can valorize or admonish appropriately. Disability is not written in the stars—or on the body; rather, disability is a construction, defined and negotiated by a culture at a given point in time.⁸ It means different things to different people at different historical moments. To say this is not to deny

the material fact of physical impairment; it is to affirm the fact that a physical impairment's meaning is never fixed or given. Like most meanings, it is fluid, and this condition invites the researcher to interpret the manifold meanings of disability within a given time and culture and to show how such meanings have very material consequences for those labeled "disabled."

Second, bodies are terribly important rhetorical resources in an oral culture, and while Thersites' disabilities worked against him in such a cultural milieu, Roosevelt tapped the resources of orality to his rhetorical advantage. While the aim of their work does not directly address the intersections of rhetoric and disability, Roderick Hart, Lloyd Bitzer, Karlyn Kohrs Campbell and Kathleen Hall Jamieson, Carole Blair, Michel Foucault, and Kenneth Burke each emphasize that language is fundamentally an action, a verb, something that does material work in the world.⁹ And when that language is embodied orally by a speaker to an audience, that action takes on additional layers of meaning. As Carroll C. Arnold notes in a very suggestive essay, oral rhetoric, or rhetoric that is physically spoken by a speaker, contains unique meanings different from those, for example, of a written text.¹⁰ Rhetoric that is oral is always "rhetoric-in-stress." Nearly thirty years before the "arrival" of body criticism in rhetorical studies, Arnold asked a terribly germane question: "Will I be able to command myself, including my thoughts, under the conditions of orality?" Part of that command, one that the post-polio Roosevelt perhaps instinctively understood, was of the human body. Roosevelt, as we will document, went to great lengths to "command himself," and he thereby authorized himself to command and lead others. Without that public command of his crippled body, without overcoming the "dimensions of risk to the self" that orality creates, Roosevelt would never have been elected governor or president.¹¹ Roosevelt opted at critical moments in his pursuit of both offices to address myriad audiences face-to-face. Such embodied public, highly scripted moments functioned to present Roosevelt as a healthy candidate, certainly in command physically, who could meet the demands of either office. We would do well not to overlook the public-ness of Roosevelt's bodily performances. As Anne Norton notes, "The capacity to make oneself visible, to be seen, is a prerogative, and hence a sign of power."¹² That Roosevelt could speak in public at all is, of course, an important manifestation of power. That point was certainly not lost at Troy.

Third, Thersites' genius as a rhetorician is asserted precisely at the point where he re-figures disability—away from his own physical body and onto the metaphorical bodies of Agamemnon and the Achaeans. Franklin Roosevelt's rhetorical genius would partake of similar resources; despite warnings and whisperings about his frail health and crippled body, Roosevelt

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would re-figure his opponents' bodies (Hoover and other Republicans) as diseased, crippled, and sedentary bodies incapable of feeling. In so doing, he would also re-figure his own polio-ravaged body as the healthy and robust body most suitable for dealing with the nation's "depressed" and prostrate state.

One of the telling ways in which Thersites re-figured his Achaean auditors is by feminizing them, referring to them as "soft," "wretched," and even specifically as "women." Femininity is perhaps the ultimate disability in archaic Greek culture, especially in the context of warfare. It was also a monumental disability in American electoral politics in the 1920s and 1930s. Even today, politicians must battle the "wimp factor," a not-so-subtle questioning of their masculinity. As Michael Kimmel notes, "Political figures . . . have found it necessary both to proclaim their own manhood and to raise questions about their opponents' manhood."¹³ That manhood seems to begin and end with the body and its performance of masculinity; moreover, as R. W. Connell argues, "The constitution of masculinity through bodily performance means that gender is vulnerable when the performance cannot be sustained—for instance, as a result of physical disability."¹⁴ Following his affliction in the summer of 1921, Roosevelt was never publicly labeled as a "woman," but his masculinity was clearly imperiled if not altogether compromised because he could no longer independently control his own body. That Roosevelt and chief political confidant Louis McHenry Howe were aware of this peril is attested to by Theo Lippman, Jr.: "Roosevelt and especially Howe always feared that part of the public did want a leader who was as physically able-bodied and impressive as he was mentally astute . . . [there was] a conscious or unconscious yearning for a symbol of masculinity in the state house or White House."¹⁵ Only fully masculine men could attain the nation's highest elected office; thus would Roosevelt have to re-make and re-figure his own body.

But in comparing the circumstances of Thersites and Roosevelt, some might object that we are missing the point; after all, while Thersites was beaten into submission and silence by the kingly Odysseus, Roosevelt was not. He did, however, have to submit to a higher authority—namely, the American people. In 1932, they had no interest in seeing a "kingly" leader in a crippled condition. The public, then and now, needed to believe that the emperor still had clothes. Roosevelt complied with their wishes. Perhaps ironically, that silence about disabled bodies has carried over into academic scholarship, where only recently has disability emerged as a legitimate area of inquiry. Perhaps even the brave Thersites could not have envisioned a silence nearing three millennia.¹⁶

The silences surrounding disability also mirror the silences surrounding lived experiences. In characterizing recent academic work in rhetoric, Jack

Selzer notes, "Words have been mattering more than the matter."¹⁷ Rhetorical texts have often taken on a life of their own, far removed from the material world that produces and sustains them. Whether the "cause" is deconstruction, as Selzer avers; scholars' fixation on the symbolic model, as Carole Blair argues; or rhetoric's divorce from the rational and "truth" of philosophy, as Brenda Jo Brueggemann and James A. Fredal, and James C. Wilson and Cynthia Lewiecki-Wilson suggest, the result is largely the same. Bodies have often been forgotten, and the words these bodies spoke have been divorced from their corporeal, material context.¹⁸ In this study, we will attempt to mend the separation of minds and bodies, texts and contexts, the material and the symbolic.

Re-figuration, masculinity and femininity, orality, the social construction of disability, and the material conditions of disability—these are our theoretical markers as we attempt to follow Franklin Roosevelt to the nation's highest political office. Our aim, at first blush, is a simple one: to determine how Roosevelt was "able" to become president in light of his crippled condition. The standard histories of the period would have us believe that the election of 1932 was not about Roosevelt's body; instead, it was about a failed Hoover administration and a willingness to adopt the New York governor's emphasis on "bold, persistent experimentation."¹⁹ No doubt, many in the nation had clearly had their fill of the "enlightened engineer" and his seemingly taciturn, out-of-touch ways. What this view fails to take into account, though, is the complexity of the situation—specifically that the "whispering campaign" against Roosevelt had gained considerable force and, for many, veracity by the fall of 1932. And, such rumors put Roosevelt in a difficult rhetorical bind: How could he address his fitness for office without invoking his disability? By this time, he and his advisors had established that even to mention his disability was to risk invoking that most dis-abling emotion, pity.²⁰ Thus was Roosevelt's disability both a material and a textual problem.

We argue that Roosevelt's response in the summer and fall of 1932 must be read against the backdrop of 1928 and 1930; that is, in winning New York's gubernatorial elections, Roosevelt had to confront the same whispering, doubts, and innuendo that he would confront in 1932. And while some of his strategies and tactics would change, the seeds of his success in 1932 were sown in his pursuit of New York's statehouse. It was here that Roosevelt would master the requisite appearance and vocabulary to offer tangible proof that he was indeed capable of doing the job, without making his auditors squeamish or mawkish by detailing the "truth" or extent of his disability. As we will detail, Roosevelt's was a performative politics in the literal sense; body and mind would merge on the campaign trail.

While our aim is a historical one, and the stock-in-trade of the historian

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is primary sources and very proximate secondary ones, history is always inflected with theory. What we must remember is that Roosevelt, in seeking elected office, was first and foremost a rhetorician. As such, he had multiple audiences to influence—and we take influence to be very complicated and multilayered, especially influence-in-context. While texts can be intoxicating things, we are not deconstructionists out to revel in the play or deferral of meaning. Real people cast real votes for real candidates based on real rhetoric—with real consequences. Therefore, in attempting to make sense of the real, we will try to locate Roosevelt’s audiences with respect to such pivotal issues as the public’s perception of polio; perceptions about candidates’ travel; the role of the press in protecting Roosevelt; the complex relationship binding disability, masculinity, and politics; and the linguistic context so instrumental to political rhetoric.

Regarding this last category, linguistic or discursive context, it should be emphasized that every culture shares a certain vernacular; in fact, such a vernacular is part and parcel of that culture. One of the arguments we offer involves the linguistic context of “depression.” While the metaphor these days is largely “dead,” the predominant lexical markers for talking about the economic events following the stock market crash of 1929 involved health and sickness. Such a consequence, as we will attempt to demonstrate, was not inconsequential, especially in 1932 as the “depression” neared its peak.

Of course we are not the first, nor will we be the last, to write about Franklin Roosevelt and disability. Hugh Gallagher, Robert T. Goldberg, Jean Gould, Frank Freidel, and Geoffrey C. Ward have all written eloquently and with distinction on the subject.²¹ Our originality lies in our treatment of his disability. Instead of seeing infantile paralysis as something that he “overcame,” we see it as something far more complex. Roosevelt never “overcame” his disability. Crippling physical disabilities are never “overcome”; they are lived with. Our treatment of his disability, unlike others, is not larded exclusively with the personal. Roosevelt was a lonely man who was tight-lipped about his disability, and we know very little about how his affliction affected his psyche. And while we have the first-hand accounts from his wife Eleanor and from other associates regarding how his disability may have affected his political leanings, we are unable to do detailed psychobiography. As with so many things personal regarding Franklin Roosevelt, we simply do not know.

To summarize our aims, then, we advance eight arguments:

1. Roosevelt’s disability was carefully concealed not only from the media, and thus the public, but also from some members of his own family.
2. The reason for that concealment had nothing to do with polio per se but with how the public attributed meaning to that affliction.

3. In running for governor of New York, especially in 1928, as well as for president, Roosevelt emphasized a visual rhetoric that drew attention to his ostensibly healthy body. The manifestation of this rhetoric took two main forms: an ability to walk or give the appearance that he could walk and extensive travel by automobile, train, and airplane.

4. Along with this visual rhetoric, Roosevelt used the spoken word to portray his own health, while denigrating the health of his opponents. Following his successful campaign of 1928, this verbal rhetoric involved metaphors of a healthy or a sickly body.

5. The material condition of Roosevelt's body was much less consequential to his political life than the public's understanding of what his disability meant.

6. Herbert Hoover and his associates actively hoped for a Roosevelt candidacy in 1932 so that the nation could see firsthand just how frail Roosevelt was.

7. The linguistic context of the early 1930s assisted candidate Roosevelt in his rhetorical efforts to construct a bodily understanding of the Great Depression.

8. The rhetorical strategies that Roosevelt employed to combat the constant "whispering" about his health were effective in helping to get him elected in 1928, 1930, and 1932.

Regarding this last argument, we should emphasize from the outset that ours is a study in political persuasion—effects, in a word. The topic of effects in rhetorical studies, and specifically the evidence needed to adjudicate claims of effect, has recently come under much scrutiny—and deservedly so.²² While we do not attempt to measure the effects of Roosevelt's rhetorical strategies on public opinion in a numerical way, we opt for the next best evidentiary things: personal letters addressed to Roosevelt and his advisors, diary entries, memoranda, oral histories, and the reaction to Roosevelt's bodily performances recorded by the nation's newspapers. What emerges is a picture of a highly successful eleven-year campaign with the single aim of winning elections. Roosevelt's success, of course, was not attributable solely to his ability to appear healthy; nonetheless, as we will illustrate, the myriad appearances were often very consequential in accomplishing the needed rhetorical goal. While we cannot prove the historical contrary-to-fact-conditional, it is clear to us that without the appearance of a healthy body, Roosevelt would not have been elected governor in 1928, nor would he have become the thirty-second president of the United States.

In order to substantiate the aforementioned claims, we will proceed in a chronological fashion, one which begins with the terribly consequential days of early August, 1921. As we detail in the next chapter, Louis Howe

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and Eleanor Roosevelt's carefully orchestrated camouflaging of Roosevelt's bout with infantile paralysis at Campobello Island set the tone for a twenty-four-year deception. That deception, however, appears to have had a predictably ambivalent beginning. Using the family's surviving correspondence, we will show that Eleanor and Franklin Roosevelt and Howe appear to have resisted the diagnosis favored by Fred Delano, Roosevelt's uncle. Once the diagnosis had been accepted, though, the family and Howe plunged energetically into a public optimism that was largely unwarranted given the extent of the damage done to Roosevelt's thirty-nine-year-old body.

In chapter 3 we move to the immediate postpolio period in which Roosevelt attempted to re-learn and re-master his own body. In addition to undertaking these daunting tasks, Roosevelt and Howe engaged in a strenuous letter-writing campaign to persuade those in the Democratic party that he would soon be back in the political fold. Roosevelt was true to his word with his very important appearance at the 1924 Democratic National Convention. At the convention, Roosevelt officially launched his political comeback with the now-famous "Happy Warrior" speech that placed New York governor Al Smith's name in nomination. Shortly after the convention, Roosevelt discovered the warm mineral waters of a tiny resort community in Georgia known as Warm Springs. It was there that he learned how to give the appearance of walking.

Following Roosevelt's political reemergence in the summer of 1924 and his continued convalescence at Warm Springs, we move in chapter 4 to the politically pivotal year of 1928, when Roosevelt officially reentered electoral politics by running for governor of New York. We attempt to illustrate Roosevelt's first "body" campaign, in which he had to dispel rumors about his fragile health that were inadvertently fomented by his own initial reluctance to accept Al Smith's entreaties to run for governor.

In chapter 5 we then turn to the curious relationship between Republican operative and journalist Earle Looker and the Roosevelts. More specifically, with Roosevelt's reelection landslide in 1930, he suddenly became a frontrunner for his party's presidential nomination in 1932. Looker fancied himself instrumental in positioning Roosevelt as a strong, fit candidate for president. Though Roosevelt always kept Looker at arm's length, we detail the correspondence between the two that eventually resulted in the July, 1931, publication of Looker's ostensibly objective article, "Is Franklin D. Roosevelt Physically Fit to Be President?" This article appeared in *Liberty Magazine*, a high-circulation weekly.

Roosevelt had planned something dramatic for his possible nomination at the 1932 Democratic National Convention. That plan, as we argue in chapter 6, involved a carefully orchestrated flight from Albany to Chicago

to receive the party's nomination in person, thereby becoming the first candidate to do so. In addition, a careful reading of the famed "New Deal" speech reveals a cluster of body metaphors—metaphors that functioned rhetorically to cripple Herbert Hoover while simultaneously casting Roosevelt as the fit, physically vibrant leader of the nation.

After covering the dramatic events of July, 1932, in chapter 7 we move to an examination of Roosevelt's fall campaign for the Oval Office. Against the advice of party leaders, Roosevelt did not wage a front-porch campaign in which the nation's media periodically assembled at Hyde Park or Albany. Instead, taking his cue from his highly successful campaigns in New York, Roosevelt orchestrated two cross-country train trips during which he showed his body—always standing—to the nation's electorate. The trips, according to campaign architects Howe, Jim Farley, and Raymond Moley, were principally intended not to present policy but to placate fears about the candidate's physical infirmities. Not only did Roosevelt display his body often but the discourse of the trips was that of health and sickness. Roosevelt strategically borrowed from the media's lexical preference for talking about the "Great Depression," thus positioning himself as the doctor most appropriate for the convalescing, enervated patient.

We close the book with a brief look at the political legacy of Roosevelt's crippled body, a body that is still contested at the level of public memory. We also speculate on the extent to which disability today is much more disabling than it was during Roosevelt's years in elected office.