quarantine

Quarantine is a program of mandatory isolation aimed at preventing the spread of disease. Quarantines can regulate the movement of people transported on ships and airplanes, forcibly decontaminate or destroy objects suspected of carrying germs, and require mandatory hospitalization and treatment of those deemed ill. The term derives from 14th-century campaigns against the plague in Italy, during which cities detained travelers for 40 days (quaranta is Italian for “forty”) if they entered from plague-endemic areas. Health officials sometimes distinguish the term isolation, which refers to segregation of ill people, from quarantine, which refers to segregation of those exposed to a disease.

Quarantine has existed in Europe, the Middle East, and Asia since the Middle Ages. The first recorded quarantine dates to 549 C.E., when the Byzantine Empire barred and isolated travelers from plague-stricken areas. Other similar forms of segregation, however, have an even longer history and have often been applied not only to those who are sick or who have been exposed to contagious disease, but also to those who are deformed, spiritually tainted, or who appear diseased. Medical writings of the Greek and Roman empires include recommendations for the isolation of the ill. The Old Testament portrays people with skin blemishes or uneven pigmentation as “unclean” and calls for their isolation.

North American quarantines began in the ports of the eastern seaboard in the mid-17th century and were aimed at controlling smallpox, yellow fever, and the plague. These diseases occasioned port screening and home isolation policies through the period of the American Revolution. The use of quarantine expanded from the late 19th century, when the germ theory of disease gained acceptance, until the antibiotic revolution of the mid-20th century. The 1893 National Quarantine Act and the 1905 Supreme Court decision Jacobson v. Massachusetts allowed authorities to restrict the freedom of movement of individuals carrying or exposed to infectious diseases. During the large waves of immigration (see immigration policy) to the United States in the late 19th and early 20th centuries, immigrants and travelers diagnosed with diseases such as tuberculosis, leprosy (Hansen's disease), and cholera were often screened, isolated, and deported as part of the larger quarantine efforts.

Quarantine also became an important technique of colonial administration for the United States and Europe at the end of the 19th century, when epidemics of plague and leprosy in Asia and the Pacific Islands led to paranoia over disease.

Quarantines have been used as a means to limit and prevent the spread of contagious diseases. They affect families and communities, as evidenced by the people outside this 20th-century quarantined building who are trying to see those held inside. (Photo by Jervas Baldwin, 1949. The Des Moines Register and Tribune Company. Reprinted with permission)
Today civil rights advocates often oppose the use of quarantine. They argue that quarantine laws allow the abuse of state power and can promote stigma based on disease status or physical disability. Since diseases are sometimes also associated with particular social groups, critics of quarantine point to instances in which quarantines discriminate based on race, ethnicity, religion, nationality, gender, or sexual orientation. For example, in 1902 New Orleans excluded a ship of Italian immigrants by port quarantine. And during the mid-1980s, AIDS quarantine proposals were designed to restrict and isolate sex workers and homosexuals who were portrayed in the American media as intentionally spreading HIV.

See also Molokai Leper Colony. Neel Ahuja

Further Reading:

 queer disability studies

As a subfield of queer studies and disability studies, queer disability studies are concerned not only with the experiences of disabled lesbians, gay men, bisexuals, transgendered people, and queers (LGBTQ), but also with concepts such as able-bodiedness, heterosexuality, and normalcy. Unpacking the histories of these concepts by tracing their constructions, contradictions, and representations in specific contexts and locations allows queer disability scholars to highlight the ways in which nondisabled, straight, and thereby "normal" bodies are produced through the exclusion of others. Queer, disabled, and queer disabled people have been marked as abnormal, unnatural, or pathological because of their appearances, behaviors, identities, and alliances; queer disability studies trace and challenge such representations, interrogating the assumed naturalness of normative values and expectations.

Like disability studies and queer studies, queer disability studies are committed to forging connections among artists, activists, and scholars; scholars working within the field recognize both artistic practices and activist communities as sites of knowledge production and, therefore, important sites of analysis. As a result, the field of queer disability studies exists across a range of locations, from classroom syllabi to academic monographs, from interdisciplinary conferences to personal memoirs. The Queer Disability Conference, held at San Francisco State University in the summer of 2002, marks a key site in the history of queer disability studies in the United States; more than 200 artists, activists, and scholars interested in queer/disability organizing and scholarship met to share strategies and discuss connections among ableism (discrimination based on notions of ability and disability), homophobia, transphobia, and heteronormativity (systems of belief that establish and enforce heterosexuality as the preferred norm and presume fixed, binary gender roles). The following year, Robert McRuer and Abby L. Wilkerson published their landmark collection, *Desiring Disability: Queer Theory Meets Disability Studies*, as a special issue of *GLQ: Journal of Lesbian and Gay Studies*; the volume both introduced disability as an important category of analysis in the field of queer theory and established a theoretical framework for queer scholarship in disability studies.

Queer disability studies have four overarching and intertwined concerns: to draw connections between disability and queerness and between disabled people and LGBTQs; to highlight the experiences of LGBTQs with disabilities; to map points of overlap between queer theory and disability studies; and to trace the ways in which ideas of able-bodiedness, heterosexuality, and heteronormativity (a belief system that presents sex and sexuality based on binary and heteronormative concepts) are mutually constitutive.

First, both disabled people and LGBTQs have faced widespread discrimination and abuse because of their alleged failure to adhere to accepted norms of behavior, appearance, and identification. In the early 20th century, members of both groups were targets of eugenic campaigns to "improve the race": Those whose bodies and behaviors were deemed "unfit" were subjected to coerced or involuntary sterilization and institutionalization; the right of disabled people and LGBTQs to have children continues to be a topic of debate in American culture, with opponents characterizing disability and queerness as characteristics that render one unfit as a parent. This notion that LGBTQs and people with disabilities are abnormal often leads to discrimination in the workplace, lack of equal access to social and governmental services, disparities in education, and interpersonal violence and hate crimes.

Second, building on this work exploring connections between disability and queerness, queer disability studies examine the specific experiences of queers with disabilities. An integral component of this project is tracing homophobia within disability communities and ableism within queer communities, highlighting the ways in which disabled queers are written out of movement histories, excluded from activist events (through attitudinal and architectural barriers), and ignored in theoretical explorations of queerness and disability. LGBTQ community centers and campus resource offices are often located in inaccessible buildings, for example, and