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Containing Sotomayor: Rhetorics of personal restraint, judicial prudence, and diabetes management

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ABSTRACT

This essay explores how rhetorics of diabetes management informed Sonia Sotomayor's judicial persona during her ascent to the Supreme Court. Sotomayor's confirmation hearings were clouded famously by institutional racism and sexism. She was accused repeatedly by congressional Republicans of being intemperate, emotional, and illogical in a judicial sphere that prizes circumspection, deliberateness, and collegiality. As part of a larger strategy to counter such claims, the Obama administration forwarded her lifetime of managing type-one diabetes as proof of personal control, and by extension judicial prudence. This strategic invocation of intersectionality, using a disability to rhetorically "contain" race and gender, helped to successfully resituate universal notions of wisdom and secure Sotomayor a seat on the nation's highest court.

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When President Barack Obama announced Sonia Sotomayor as his choice to succeed Justice David Souter on the nation's highest court, reactions from his political opposition were swift, vehement, and vicious. Critics assailed Sotomayor as "dumb," a "bully," and an intellectual lightweight who could not hold her own against conservative judicial icon Antonin Scalia.¹ Political operatives defending her nomination retorted that she graduated summa cum laude from Princeton, was a confident litigator, and possessed more experience on the appeals circuit than any person ever appointed to the Supreme Court. Sotomayor's detractors and supporters disagreed most explicitly when engaging the influence her Latina identity would have on judicial rulings. Whereas some argued her life experiences offered a unique perspective for rendering decisions, others feared an inherent bias on issues such as affirmative action and immigration. Pundits latched onto an address Sotomayor had delivered in which she stated, "I would hope that a wise Latina woman with the richness of her experiences would more often than not reach a better conclusion than a white male who hasn't lived that life." That rumination was an allusion to remarks made by Sandra Day O'Connor about the incongruities of gender representation in the judicial sphere. Sotomayor's speech likewise attempted to highlight inequalities by giving presence to the complicated features of Latina identities, the necessity of resisting a universal understanding of wisdom, and the circumscribed roles of women and

minorities (not to mention those who live at the intersection of these subject positions) in the legal system.² Despite the provocative and nuanced themes laid out in that speech, Sotomayor's opponents charged her with being a reverse racist who would create policy via empathy rather than originalist interpretive schemas. When Alabama Senator Jeff Sessions commented that Sotomayor would shape the court "in a way that would be different from our heritage so far," he was making no secret about whose heritage he believed was under attack.³ Sotomayor was positioned as erratic, petulant, and threatening in a legal sphere that prizes decorous banter and judicial restraint.⁴

The Obama administration responded to these racially-charged allegations by presenting Sotomayor's lifetime of managing type-one diabetes to evidence her deliberate temperament and personal fortitude. Decades of managing diabetes provided compelling anecdotal evidence that Sotomayor had the wherewithal to navigate the quotidian complexities of a notoriously vicious disease and, by extension, the demands of the job. Diabetes management became a politically expedient way to display an embodiment of judicial prudence, performatively constituting a measured character befitting a Supreme Court justice. Media outlets published assurances from Sotomayor's physician that attested to her discipline. *Time* magazine reported,

According to her doctor, she has excellent control of her diabetes, with consistent blood sugars better than 98% of diabetics. Her hemoglobin A1c levels, the best measure of diabetes control, have consistently been less than 6.5%, the optimal level as defined by all diabetes organizations. She has no evidence of any complications of diabetes or even any early signs that they may develop.⁵

The statistical claims made by the doctor are speculative, if not hyperbolic, as diabetes is an individuated disease marked by varying routines and goals not easily reducible to comparative analysis stemming from aggregate data.⁶ The doctor's narrative was especially remarkable next to biographical details of Sotomayor's life that customarily indicate obstacles to good health, including that she was raised by a single mother in a low-income part of the Bronx. Against all odds, be it the economic barriers that tend to hasten the demise of people with diabetes or the institutional impediments that propel a lifetime of complications, Sotomayor had transcended the limits of her disease. As a result, her story materialized as an American dream narrative that accentuated personal responsibility and hard work.

The White House decision to emphasize Sotomayor's diabetes as a reflection of her tenacity and unmitigated success was foundational to establishing a priming device for her performance at the confirmation hearings. Scholars such as José Esteban Muñoz and Linda Martín Alcoff have observed that Sotomayor's performance before the Senate was akin to an exercise in passing that was recognizable to people of color who find themselves in the crosshairs of racial animus.⁷ Reserved and contemplative throughout the event, Sotomayor occupied a tenuous space familiar to members of marginalized groups. I argue that attention to Sotomayor's diabetes in the weeks leading up to the confirmation was a co-constitutive element of this performative constraint, not resting apart from her Latina identity but instead being essential to the cultivation of her judicial persona. Lisa Flores has noted that the discursive circulation of raced bodies frequently signals an "excessive and chaotic" entity.⁸ Institutions justify their disciplinary tendencies by casting people of color as inherently exotic and threatening, enacting punitive measures

in the name of the nation to reproduce racial hierarchies. The invocation of Sotomayor's diabetes mitigated these predictable rhetorical tropes, accentuating her character as moderate and affable, not intemperate and ungovernable. Sotomayor's condition ultimately framed her, in the words of Josue David Cisneros, as a "reasonable and objective citizen-subject."⁹

This essay privileges the idea that diabetes is a disability, not only because it falls under the legal definition as outlined by the Americans with Disabilities Act (ADA), but also because diabetes is made culturally intelligible as an aberration of normative health accompanied by a litany of medical repercussions and burdensome maintenance practices. To be sure, diabetes is like many disabilities in that it is often "invisible within the immediate temporal frame."¹⁰ The consequences of diabetes generally become recognizable only during emergencies, such as the debilitating effects of hypoglycemia, or through physical markers such as amputation. Even as many people with diabetes have learned to manage the disease, most are also captive to a recitation of painful routines, such as finger pricks and shots, that demand unending self-surveillance.¹¹ Personal control is closely aligned with positive values, "described as a marker of virtue, will, maturity, and autonomy; declining to control it indicated laziness, gluttony, or, simply, ignorance."¹² In short, the discipline exhibited by people with diabetes is linked directly to judgments others make about their character, personal conviction, and productivity.

This article gives primacy to disability as a vital component of intersectional critique to illustrate how incorporeal abstractions such as "wisdom" and "restraint" materialize heterogeneously, not univocally, through rhetorical practices in situ. I contemplate how discourses ordinarily thought to regulate individual bodily performances also govern cultural narratives about judgment and the institutional hierarchies that shape expectations and representations about those positioned on the outskirts of power structures. Centralizing considerations of disabled bodies in research, Lisa Duggan has argued, "is not a call to *add* disability to an intersectional matrix of race, gender, class, sexuality, nationality, religion. It is a call to step aside, provisionally, to imagine theory and politics from the capacious 'standpoint' of disability."¹³ Privileging disabilities encourages critics to think differently about the materiality of bodies in particular contexts – in this instance the politics underwriting the judicial sphere – even as disability can never be compartmentalized from other social formations such as race and gender. Sotomayor's Latina heritage was deemed a threat to the fictionalized legal objectivity constituting the judiciary, which has historically been composed of white men who have assuredly never been objective in their judicial orientations. The introduction of Sotomayor's diabetes instigated an alternative narrative to the accusations made by conservatives about her status as a "wise Latina," underscoring her prudence to assure detractors that she would not subvert the normative workings of the judiciary.

Even as word of Sotomayor's diabetes circulated extensively in the days before the Senate met, it disappeared almost completely during the hearings. The ephemeral nature of chronic disease in this context – it is literally rendered invisible – seemingly took hold, acting as a backdrop to the unfolding political drama. This sudden evacuation of disease suggests one instance when a chronic condition acted first as a structuring mechanism for interpreting her character and then as a paradiscourse for attitudinizing her persona as circumspect. To cement claims made throughout the essay I also look past the hearings to briefly examine Sotomayor's memoir *My Beloved World*, where

diabetes bookends the text. I explore how the reintroduction of diabetes recuperates and nuances her complicated identity by returning to themes accentuated prior to the hearings. Diabetes in both the hearings and the memoir occupies the margins and I bring it center stage to investigate its shifting rhetorical functions.

Disability and productive intersectional critique

Social constructions of race, gender, and disability have been mutually informative for much of America's history. From the bodies made disabled by slave owners to eugenic movements that situated racial minorities as "feeble-minded," the intersecting vectors of disability, race, and gender have long been publicly conjoined and usually to the detriment of people of color.¹⁴ Despite (or perhaps because of) this legacy, there has been a discernable absence of people with disabilities in historical accounts of noteworthy people of color.¹⁵ Of course, disabilities exist on a broad spectrum, ranging from physical immobility to somatic conditions. The possible articulations among race, gender, and disability are limitless and their coterminous relationships are culturally pervasive, if often unrecognized. In order to centralize considerations of intersectional identity many researchers have begun using disability critical race theory (DisCrit), while others in the humanities have devised so-called "cripistemologies," to elucidate historical ills and bring attention to the unique challenges facing people of color who have disabilities.¹⁶ These novel approaches for contemplating intersectional identities attempt to correct genealogies that marginalize, misrepresent, and misunderstand the ways gender, race, and disability manifest in tandem.

Perspectives that privilege the mutual constitution of disability, race, and gender follow an extensive corpus of intersectional work that seeks to make visible marginalized subject positions and offer insight into the multifarious nature of identity. Karma Chávez and Cindy Griffin argue that intersectional critique enables the creation of frameworks that give presence to "complex facets of identity and subjectivity" critical to investigating the materialization of power and privilege among non-normative people.¹⁷ They promote a "conceptual messiness" that redirects attention away from normative scripts of being and toward those that interrupt taken-for-granted features of cultural belonging.¹⁸ Intersectional critique delineates how subjects are produced and recognized, troubling simplistic notions of interpellation and the formation of personhood. Sara McKinnon has suggested that an intersectional approach to criticism is especially imperative when essentialist rhetorics steer public transcripts. Intersectionality can illuminate and challenge norms about "whose voices, bodies, and experiences should have access to material and discursive space in the public."¹⁹ Those who occupy the margins are often perceived as threats to institutions such as the judicial sphere and its attributes of narrative rationality, good speech, and embodied affect.²⁰

Intersectionality is more than an amalgamation of categories that can be easily atomized based on previously held understandings about race, disability, and gender.²¹ Rather than imagining static categories that engage unending invocations of identity, intersectional critique might best be thought of as a rhetorical style, a constitutive mode of signification that calls attention to the effects of discourse as contingent and contextual, both fungible over time and illustrative in their situated materialization.²² Leslie Hahner persuasively argues that intersectionality is best conceived as the "juncture through which

rhetorical forms value particular identifications and performances.”²³ This approach “designates the symbolic, material, and affective connections through which a subject engages a particular discourse.”²⁴ Hahner promotes a provisional modality of intersectionality, one that draws attention to the mobility of identification and the rhetorical form that actualizes some identities and inhibits others.

Centralizing intersectionality in discussions of health resists the institutional tendency to compartmentalize markers such as gender, disability, and race and also interrupts understandings of medical phenomena as “natural” outcomes of particular identities. Illness and disease are products of cultural articulation just as much as they are biomedical realities. Diseases such as sickle-cell anemia and Tay-Sachs, for instance, have both been wedded to racial categories, even as scholars such as Troy Duster have shown these connections are social outcomes and not foundationally genetic.²⁵ Depression is not simply an effect of the body, but an array of affective states initiated by factors as disparate as racism and socio-economic status. Diabetes is no exception to this cultural engineering. The condition is often made intelligible through simplistic scripts about race and age rather than considerations of class and geography, and almost always in ways that eclipse diabetes’s complicated etiological origins. People with type-two diabetes, for example, are frequently imagined as people of color, not only in medico-scientific literature about genetics but also in media narratives depicting the disease.²⁶ These oversimplifications have the effect of constituting diabetes in circumscribed ways, hindering nuanced investigations of its conceptual contours.

To give just one example, Latina theorist Gloria Anzaldúa, perhaps the most widely cited Latina scholar of our time, lived with diabetes. In writings about her life, however, it is commonly and incorrectly assumed that she had type-two. Like Sotomayor, Anzaldúa actually lived with type-one.²⁷ The racialization of the condition, along with the fact that Anzaldúa was diagnosed later in life, leads many people to make false assumptions about the manifestation of her diabetes and the impact it had on her work. What does it mean to articulate Anzaldúa’s identity to type-two diabetes, a disease underlined by projections of guilt and excessiveness rather than type-one, an autoimmune disease that attacks the body mysteriously and with little notice? I do not mean to reinforce the shaming that haunts people with type-two diabetes, and in fact I find such impulses deplorable. Still, the rhetorical consequences of a scholar and activist known widely for her “border crossing” being constituted by one disease, and not the other, produces divergent interpretive schemas for contemplating how Anzaldúa and her scholarship are understood. As the following analysis shows, in a culture that prizes hard work and discipline it is not simply diabetes that is racialized – control and good judgment are as well.

Sotomayor’s ascent to the Supreme Court transpired in a politico-judicial sphere that has long been hostile to women, minorities, and people with disabilities.²⁸ Abstractions such as “wisdom” have long been guarded by so-called rational actors who embody a prudence that has been typically consecrated through the bodies of white men. Rhetorically, Sotomayor’s diabetes materializes ideas such as restraint and control, allowing those supporting her nomination to move her into the space of judicial power. It is not simply that Sotomayor was a model minority who lived the American dream. Rather, rhetorics of managerial perseverance imparted a medicinal prudence onto Sotomayor that could be translated positively in the judicial sphere.

Courting Sotomayor

In the weeks prior to Sotomayor's nomination and following the announcement of her candidacy, ample narratives surfaced about her easily excitable persona. From the furor over the "wise Latina" speech to various media reports about her seething character, Sotomayor was portrayed as a person whose emotions overruled her ability to administer justice in a collegial and even-handed manner. These reports tended to accentuate diversity as a social burden and not a benefit, difference as a barrier to be overcome, and the inassimilable qualities of cultural pride.²⁹ Among the most egregious of these appraisals was published by the *New Republic's* Jeffrey Rosen, a profile that smacks of racial caricature and sexist innuendo. Rosen's piece is heavy on biographical details and encumbered by professional gossip.³⁰ He opens the column with snapshots of Sotomayor's life (and not her qualifications), dramatizing her "compelling" story by including her humble up-bringing and the diabetes that she has lived with since age eight. Reporters frequently use the personal histories of public servants to open features and whet the appetites of readers. This stylistic choice was common when Sotomayor was being introduced to audiences and not unique to Rosen. However, the *New Republic* placed these details below a headline that read: "The Case Against Sotomayor: Indictments of Obama's Front Runner to Replace Souter," imposing a lens that explicitly merges her personality and her judicial philosophy. Of course, the press has a disquieting and sexist habit of using personal stories to humanize women in the public eye and often with the effect of conflating personal and professional personas into one. This column is no exception. The opening paragraph also explicitly draws attention to race, noting Sotomayor's Puerto Rican heritage, that she would be the first "Hispanic" on the court, and that a logical second choice would have been Ken Salazar, then Secretary of the Interior. Rosen expands on biographical details using anonymous sources, including a former clerk who said that Sotomayor

grew up in a situation of disadvantage, and was able, by virtue of the system operating in such a fair way, to accomplish what she did. I think she sees the law as an instrument that can accomplish the same thing for other people, a system that, if administered fairly, can give everyone the fair break they deserve, regardless of who they are.³¹

In this mnemoscope the personal is explicitly merged with the political and through a language that has traditionally rankled the chains of conservatives. The administering of "fairness" is certainly a euphemism for affirmative action, but even cast in a positive light such framing functions oddly as a form of telepathy for reading Sotomayor's *raison d'être*.

Rosen quotes sources who express "questions about her temperament" and "her judicial craftsmanship," because Sotomayor is seemingly not "a judicial star of the highest intellectual caliber." He relays the feelings of yet another unnamed source who argues, "She has an inflated opinion of herself, and is domineering during oral arguments, but her questions aren't penetrating and don't get to the heart of the issue." Although Rosen never explicitly connects race and gender to these criticisms, the form of his essay adopts a deductive logic underscored by considerations of both. There is an operative enthymeme that bridges her background, indeed her identity, with her supposed shortcomings. Perhaps most disquieting is that Rosen admits that he has not "read enough of Sotomayor's opinions to have a confident sense of them," nor had he "talked to enough of Sotomayor's detractors and

supporters, to get a fully balanced picture of her strengths.” Ta-Nehisi Coates rightly retorted, “I can’t get past that line – mostly because ... Rosen is attacking Sotomayor’s ability to do the necessary intellectual heavy-lifting, *while explicitly neglecting to do any of his own*.”³² Despite rejoinders to such reporting, remarks such as Rosen’s were omnipresent in the press. Journalists conveyed that Sotomayor “can be demanding and exacting” and that she had been accused of being too “outspoken and temperamental on the bench.”³³ Time and again media talking heads returned to the image of a fiery Latina whose disruptive personality would not suit the national interest.

At first blush Sotomayor’s diabetes was similarly articulated as a burdensome feature of her personality. Even before she was recommended by Obama there was much speculation that living with diabetes might prevent her from consideration for the bench. Appointments to the court are characterized by long tenures, often with the nomination of a person in early middle-age who might have decades left to serve. Health complications trouble these protracted tenures, making Sotomayor’s diabetes a potential stumbling block. CNN’s Jeffrey Toobin argued, “It would be irresponsible for any president not to make the health of the nominee a major subject of concern, because presidents want decades of service from their nominees.”³⁴ Supreme Court scholar Howard Ball, himself a person with type-two diabetes, surmised that Sotomayor had likely developed a strict regimen for managing her diabetes, but still believed she would not become a “viable possibility” for the administration.³⁵

Sotomayor’s cautious openness about her diabetes had the potential to further a narrative that stressed a body out of bounds, one that articulated a lack of control over her health as indexing something more fundamental about her character. Because diabetes is frequently imagined as a sign of excess and decline, especially when articulated to a racialized body, it is not surprising that media reports often emphasized plight and precarity when scrutinizing her health.³⁶ Outlets including National Public Radio repeated the statistic that people with diabetes generally live seven to ten years less than those without it even as they reported the disease is more manageable than ever before.³⁷ Discussions of Sotomayor’s health inevitably produced questions about her longevity and what her regimens revealed about her personality. CNN, for example, explicitly connected the control of blood sugars to moral fortitude. Keep in mind that the normative glucose reading for a person without diabetes is 90 and that number is the goalpost against which people with diabetes are often measured in the public eye. CNN quoted an endocrinologist who discussed typical A1c scores for people in Sotomayor’s socioeconomic class, noting that she should score a 7%–8%, which translates to an average reading of 154 on the low end of that scale and a 183 on the high end. He remarked that if the result came back at 13%, “you’d say how responsible is this person?”³⁸ Another endocrinologist interviewed in that same story countered, saying he would want to see her A1c below a 5%, which is an average of 97 and near impossible for a person with type-one diabetes to achieve.

The preoccupation with control surfaced repeatedly in the reporting and often in close association with diabetes. One doctor told the *New York Times* that “the public had a right to know how the judge was controlling her diabetes – and how well.”³⁹ That may be true, but the transference from medical condition to personality in much of the coverage was striking. One media outlet commented that to “dispense with any health concerns about Judge Sotomayor, officials said the White House contacted her doctor and

independent experts to determine whether diabetes, which she learned she had at 8 years old, might be problematic and concluded it would not. The Obama team also interviewed colleagues on the Second Circuit to check out reports that she was difficult to get along with, and was reassured it was not true.”⁴⁰ I pause here to give emphasis to the close inter-relationship between the unmanaged associations with diabetes and the degree to which control over disease was made proxemic to incivility. There is a metonymic slide from one to the other in diabetes discourse and in this report a positive association with disease is made intelligible next to potential deficiencies of character.

The intense focus on control took a sharp turn when diabetes pivoted from being a potential health disadvantage to a condition that trumpeted Sotomayor’s qualifications. Almost overnight media outlets relayed that the justice had persevered life’s hardships despite the hand she had been dealt. Life with a chronic disease presented not only obstacles but opportunities; not just the trappings of management but proof that she could transcend the condition. Sotomayor’s advocates transformed the ubiquitous road-blocks presented by diabetes into evidence of her prudence and personal restraint, giving presence to a wisdom befitting a Supreme Court justice. The statement from Sotomayor’s physician mentioned at the start of this essay, the one that contended she controlled her blood sugars better than 98% of people with diabetes, resonated with a “humble beginnings” American dream mythos and offered an alternative narrative for the approaching hearings.

The reassurances from Sotomayor’s physician that she had not developed any eye, kidney, or nerve complications due to diabetes had immediate effect. The news that Sotomayor managed her health vigilantly supplanted her once out of control excessiveness with tales of constraint and thoughtfulness. The *New York Daily News* told readers that she was “very casual about [her diabetes]. It’s not something that’s held her back in any way.”⁴¹ Sotomayor’s diabetes was framed as a catalyst for success and motivated her many accomplishments. “It made her think, ‘I’m not going to be around forever, I have to keep moving.’”⁴² One of Sotomayor’s friends remembered, “Sonia told me many years ago that because of her diabetes, she had only a certain amount of time to live ... She’s lived maybe 20 years longer than she ever thought she would.”⁴³ A former colleague conveyed, “She was very tenacious ... We would be in a tense interview with a candidate and she would be shooting herself with insulin in the back of the hand.”⁴⁴ Still another asserted, “She’ll be eating Chinese dumplings ... and she’ll say, ‘Excuse me sweetie,’ and pull out the kit and inject her insulin.”⁴⁵ Rather than presenting challenges to a long tenure on the court, diabetes is articulated with tropes emphasizing self-determination and intuitive management, a common sense that would be invaluable in the third branch of government. The public is left to deduce that type-one diabetes is inherent to her no-nonsense attitude and the attention to detail that characterizes her legal opinions. In short, control was now emblematic of her personality and judicial philosophy, which earlier had been merged negatively as intemperate and in a racially charged manner.

Refrains about Sotomayor’s diabetes in the press were structured by discourses of moderation, balance, and thoughtfulness. Numerous articles that featured diabetes as a part of her life’s story also extolled Sotomayor’s moderate judicial philosophy. The *New York Times* article that pivoted on the trope of urgency mentioned above, for example, magnified her cautious political leanings. “Ms. Sotomayor’s political persona hewed carefully to the contours of New York, liberal but not particularly ideological. And, unusual in

a city where Democrats outnumber Republicans five to one, she registered as an independent.”⁴⁶ The *Washington Post* opined that diabetes was among her “frailties” but situated it in the context of her living an “understated” life and as a person hesitant to subscribe to politically extreme positions.⁴⁷ The *Post* contended that as a student at Princeton Sotomayor was “active in Latino student affairs but not a bomb-thrower.” This stunning assessment of Latino activism exacerbates the racial stereotypes underlying segments of the reporting, even as diabetes is placed close by to accentuate her constraint.⁴⁸ Indeed, one news outlet reported that Latinos were skeptical of her nomination, wondering if she would be too centrist on the bench.⁴⁹ Repeatedly, her diagnosis was located in proximity to her “moderate judicial record.” The repetitious theme of a woman of color too passionate and empathetic for the court was tempered by discourses of restraint that regularly featured diabetes.

Perhaps the most explicit joining of health and restraint came in early July 2009 when it was revealed that Sotomayor had recused herself from a case because one of the claimants lived with diabetes. The article outlined a 1997 case in which Sotomayor claimed to have “personal knowledge regarding the claims.”⁵⁰ Although the justice indicated she could not remember why she recused herself from *John Doe vs. City of New York*, the reporter surmised her chronic condition was the likely reason. The plaintiff on the suit had diabetes and claimed he had been denied medication by the Department of Correction, leading to pain and complications. The city later settled with him. One scholar argued that if Sotomayor’s diabetes was the deciding factor for recusal, it was an “exceptionally cautious” choice. This contemplativeness was reflected in a letter Sotomayor sent to the Senate judicial committee in which she stated, “I have chosen to recuse myself from cases, even when not technically required by ethical rules.”⁵¹ Within the span of a month, diabetes went from a vicious condition that might inhibit service to one that reflected her measured demeanor and stoic impartiality.

To summarize, diabetes first materialized as an extension of Sotomayor’s supposedly excess and chaotic body. Then it signified a containment mechanism that represented constraint and transcendence. In looking to this pattern, I am not contending that Sotomayor’s diabetes erased discussions of her race and gender. It certainly did not. Conservative critics continued to assail her relentlessly, even after it became apparent that she would be confirmed. Rather, the use of diabetes to illustrate control and discipline appeared to be strategically employed by the Obama administration, just as elements of her appearance at the confirmation hearings were monitored to downplay her ethnicity.⁵² Although the administration could not control the ways the press relayed Sotomayor’s diabetes to the public, I argue the effects of this discourse functioned as a priming device for interpreting her personal resolve. In the following section, I examine Sotomayor’s performance at the hearings to explore the materialization of an incorporeal concept – judicial restraint – on a body rife with symbolic import. The confirmation actualized Sotomayor’s tenacity and prudential disposition, enlivening her contemplative persona in the face of a hostile congressional committee.

Confirmation bias

Sotomayor’s confirmation hearings divulged how abstract notions such as “restraint” and “wisdom” are institutionally monitored to reconstitute universal performances of

prudence in the judicial sphere. The hearings were characterized by the typical banter that occurs between judicial nominees and Senate committee members, with the most explosive fireworks emanating from Republicans who displayed fiery rebuke and toxic iterations of whiteness.⁵³ These exchanges generated a wealth of scholarship about the political, structural, and representational stakes undergirding the appointment of a woman of color to the bench. Scholars used the event to examine everything from the impact of women's interest groups on the process to the history of pro-immigration rulings among Supreme Court justices.⁵⁴ Some scrutinized her nomination to gauge the heterogeneity of political interests among Latinos while others dissected the accusations that Sotomayor was an intellectually inferior to past nominees. For the record – she was not.⁵⁵ Attention to Sotomayor's diabetes further explains how her decorous persona emerged through invocations of restraint that materialized as a form of judiciousness sanctioned in the American legal system.

Publicity about Sotomayor's diabetes stopped circulating almost completely during the week she was being vetted by Congress. Her critics were not able to impede her nomination by focusing on diabetes and moved on to more opportunistic castigations after news about her chronic condition reached its saturation point. The repackaging of her medical condition as a strength and not a weakness left her opposition with little ammunition on this front and they focused their energies on controversies that had already garnered media coverage, such as her past speeches. In fact, in a process that spanned four full days, her diabetes was mentioned just twice, once by Senator Dick Durbin and once by an old friend from high school. Following the narrative that developed late in the press coverage, Durbin revisited the association between her condition and her biography. He opined:

Judge Sotomayor, you have overcome many obstacles in your life that have given you an understanding of the daily realities and struggles faced by everyday people. You grew up in a housing complex in the Bronx. You overcame a diagnosis of juvenile diabetes at age 8 and the death of your father at age 9. Your mother worked two jobs so she could afford to send you and your brothers to Catholic schools, and you earned scholarships to Princeton and Yale.⁵⁶

Her friend, Columbia law professor Theodore Shaw, followed suit, remembering: "Sonia did not live a life of privilege. She lost her father at a very young age. She had been diagnosed with diabetes even before she came to high school. It was not something I remember her talking about. She simply carried herself with an air of dignity, seriousness, of purpose, and a sense that she was going somewhere."⁵⁷ This characterization reiterated what had become common sense among the political elite: that Sotomayor's diabetes was largely a non-issue and, if anything, accentuated her determination, control, and fortitude.

Even as audiences were primed to read Sotomayor's persona as restrained, Senate Republicans threw to the wind any notion they should mimic such impulses. The asymmetrical performances of power are particularly striking when one considers that Sotomayor was compelled to perform diffidence even as the white men interrogating her did not. The confirmation hearing was awash in racist remarks, both implicit and explicit, that make Sotomayor's performance especially praiseworthy. Time and again, Senators made incendiary statements and the magistrate would deflect them with understated gusto. Senator Tom Colburn of Oklahoma channeled Ricky Ricardo during the event, saying, "You'll have a lot of 'splainin' to do."⁵⁸ Senator Lindsay Graham of South Carolina

told her she would be confirmed unless she had a “meltdown,” and repeatedly returned to accusations that she was “temperamental,” “aggressive,” “excitable,” and “angry.”⁵⁹ Latching on to the idea that she rules by empathy, Senator Jon Kyl of Arizona asked if she has “always been able to find a legal basis for every decision that [she has] rendered as a judge.”⁶⁰ Multiple Senators assured her they were not voting against her because she was Latina, as they would have gladly confirmed Miguel Estrada, a conservative Honduran American Bush appointee with no judicial experience.⁶¹

Although diabetes was rarely mentioned during the hearings, journalistic assessments of Sotomayor’s control and moderation resonated when lawmakers repeatedly venerated the concept of judicial restraint. To be clear, I am not asserting a direct correlation between media reports about discipline and questions posed to Sotomayor by individual Senators. Rather, the presence given to Sotomayor’s diabetes in the weeks leading up to the hearings are essential to interpreting those portions of the transcript about constitutional impartiality. Sotomayor’s character was “constituted by power relations that are far from transparent” and intersectionality’s productive complexities, including maintaining a connection among disability, gender, and race, elucidates the creation and reiteration of hierarchical power systems that demanded a circumspect performance during the vetting process.⁶²

Numerous Senators, including John Cornyn, Chuck Grassley, Diane Feinstein, Al Franken, Patrick Leahy, and Sheldon Whitehouse all raised the fleeting and undefined notion of judicial restraint. Sotomayor’s political opponents wielded the shibboleth to indict her alleged antagonistic disposition. Her supporters, conversely, embraced the accepted characterization that she was deliberate and measured. For example, quoting from a letter written on Sotomayor’s behalf, Leahy contended the judge reflects “the type of tempered restraint and moderation necessary for appropriate application of the rule of law” and that she “serves with a moderate voice without displays of bias toward any party based on affiliation, background, sex, color, or religion.”⁶³ Whitehouse concurred, adding,

my Republican colleagues have talked a great deal about judicial modesty and restraint. Fair enough to a point, but that point comes when these words become slogans, not real critiques of your record. Indeed, these calls for restraint and modesty, and complaints about “activist” judges, are often code words, seeking a particular kind of judge who will deliver a particular set of political outcomes.⁶⁴

After detailing the ways justices such as John Roberts are offered the presumption of objectivity, Whitehouse attested that Sotomayor’s “diverse life experience,” “broad professional background,” and “expertise as a judge at each level of the system” had endowed her with the capacity to make sound judgments.⁶⁵ Whitehouse anticipated Muñoz’s observation that Sotomayor did not conform to the mythic norms associated with embodied notions of reason. As such, his colleagues across the aisle accused her of rendering decisions on purely affectual grounds, not nominal claims grounded in objectivity.⁶⁶

Sotomayor’s overtures towards judicial restraint are especially noteworthy during those parts of the hearing where considerations of gender, race, and health surface in tandem. Graham grilled Sotomayor about her involvement with the Puerto Rican Legal Defense Fund, wanting to know if she advocated for federal funds for abortion while on their board. Sotomayor commented that she was not privy to that organization’s legal briefs

that advocated for taxpayer funding of abortion but that she did have a hand in other “public health issues.” Graham inquired if abortion was, in her opinion, a “public health issue.” Sotomayor insisted her thoughts on the matter were irrelevant and deferred back to the normative contours of the law. “It wasn’t a question of whether I personally viewed it that way or not. The issue was whether the law was settled on what issues the Fund was advocating on behalf of the community it represented.”⁶⁷ For her, the question became one of making good-faith arguments rooted in the Constitution. The hot-button issue of abortion can only be interpreted through the parameters put into place by the judiciary. The few times disabilities are explicitly mentioned, generally in the context of rulings about the ADA, Sotomayor insisted that courts do not legislate from the bench. Rather, they ensure that Congress works within the parameters of its legislative powers.⁶⁸

Accentuating disability through an intersectional lens makes present features of the testimony that might otherwise remain unnoticed. In one particularly provocative instance from the hearing, which is later revisited in her memoir, Sotomayor touted the necessity to weigh evidence through established legal standards in order to properly adjudicate case law. She recalls a salient moment from her days as a prosecutor when she dismissed charges against a young man who was accused of larceny. The defense lawyer in the case approached Sotomayor and implored her: “I never ever do this, but this kid is innocent. Please look at his background. *He’s a kid with a disability.* Talk to his teachers. Look at his life. Look at his record. Here it is.”⁶⁹ Sotomayor was alarmed by the arrest because the woman who reported the crime never actually saw who stole her pocketbook. Sotomayor recalls: “In that case, she saw a young man that the police had stopped in a subway station with a black jacket and she thought she had seen a black jacket and identified the young man as the one who had stolen her property.”⁷⁰ Disability is at best as an attribute that positively underscores the man’s character and at worst suggests his inability to commit the crime. The anecdote invites the audience to read Sotomayor’s empathetic and restrained sensibility that functions well in the occasion: false accusations that are challenged by the constraints of the law and the thoughtfulness of the attending attorneys.

Sotomayor responded to castigations that she was overly empathetic not by dismissing the charges, but by emphasizing fidelity to the law as a form of restraint. In response to a question about experiences guiding judicial philosophy she retorted, “Life experiences have to influence you. We’re not robots [who] listen to evidence and don’t have feelings. We have to recognize those feelings and put them aside.”⁷¹ The point is not to ignore emotion, but to recognize it and practice restraint. In an exchange with Senator Cornyn the following day she elucidated the effect that different experiences have on judges but which are ultimately checked by the constraints of the legal sphere. She observed,

I think life experiences generally, whether it’s that I’m a Latina or was a State prosecutor or have been a commercial litigator or been a trial judge and an appellate judge, that the mixture of all of those things, the amalgam of them, helped me to listen and understand. But all of us understand, because that’s the kind of judges we have proven ourselves to be, we rely on the law to command the results in the case.⁷²

Judicial emotion here “is to be temporally isolated – that is, experienced only at a pre-decisional moment – and operationally neutered – that is, disabled from exerting any effects on behavior and decision making.”⁷³ Remarkably, Senator Chuck Schumer spent ample time engaging Sotomayor about those plaintiffs she felt empathy for, but

felt forced to decide against because of the rule of law. This included family members of those killed on TWA flight 800, which crashed off the coast of Long Island in 1996.

Sotomayor's diabetes also receded from view in the press, which is hardly surprising in light of the fact that it was downplayed significantly during her Senate appearance. A search of the terms "Sotomayor" and "diabetes" during the week of the confirmation yielded zero results and "Sotomayor" and "diabetic" produced only seven, several of which were the same essay reproduced in multiple media outlets. In the few instances that diabetes is alluded to, it is articulated with results that followed the themes that have dominated this article. A headline from the *St. Paul Pioneer Press* extolled, "What has Sotomayor Revealed? Self-control." That broadsheet relayed that "Physically, too, Sotomayor has held her ground, despite a cast on her right leg and a lifelong diabetic condition ... Her body language has been commanding."⁷⁴ The attention to Sotomayor's body was incessant, if not peculiar, during the event. Focus was given to her clothing, her hand movements, and even the number of times that she blinked during questioning.⁷⁵ But despite this troubling fixation, the press also reliably emphasized how "in control" Sotomayor was during the spectacle.

The theme of restraint was pervasive in the media the week of the confirmation process, even as the trope of diabetes vanished. The *Washington Post* declared that her "speaking style is deliberative and slow, but she is hardly a stiff."⁷⁶ The *New York Times* asserted that the Senate panel was balancing a "Tale of Two Sonias." The one who showed up, they argued, "took pains to make herself as boring as possible ... Not once did she show even a flash of irritation."⁷⁷ She responded to questions "by almost mechanically reciting basic propositions with a controlled and deliberate delivery."⁷⁸ She was cast as a "thoughtful, cautious jurist who isn't bound by political ideology," offering a "calm, earnest performance" that was "unswoon-worthy."⁷⁹ One journalist took to task Jeffrey Rosen's controversial *New Republic* article by reminding readers about the anonymous sources who lodged accusations against her temperament. That reporter crafted an evocative rejoinder, asserting, "that characterization was called into question by Judge Sotomayor's performance. Despite being questioned aggressively at times, she never got flustered or upset, remaining polite throughout three days of questioning."⁸⁰ Rosen himself called her "disciplined and good humored."⁸¹

Even as diabetes was marginalized as a topic of deliberation during the hearing, previous coverage primed audiences to read the disease as a source of personal control from the start of Sotomayor's journey and was consistently lurking during the confirmation. Glancing through pictures of Sotomayor at the hearing one can clearly see the customary presence of water glasses that tend to mark bureaucratic events. In several pictures, there are two glasses resting in front of her, which is otherwise unnoticeable in most legislative contexts. One of the glasses, it turns out, was filled with Sprite. Sotomayor kept the soda handy in the event that her sugars collapsed and she needed a quick fix. What is an otherwise invisible disease is given presence, but only slightly, drawing attention to the fact that Sotomayor's condition is always structuring her everyday life and her performance of self. There is no indication that Sotomayor needed to drink the Sprite, again offering a visual testament to the control she has over her body. Diabetes acted as a mechanism for interpreting her disease and that condition is perpetually in the picture. Diabetes is a paradiscourse, affecting the scene even as it is seemingly absent from the space it occupies. If there are lingering questions about the influence of chronic disease on her

persona, we need only turn to the jurist herself, who offered an insightful account of how diabetes management can be understood as acting in concert with abstractions such as wisdom, justice, and decorum.

Diabetes by the book

In early 2013 Sotomayor released her memoir, *My Beloved World*, an account that concludes just prior to her turbulent Senate confirmation hearings. Unlike the barrage of news stories that used biographical material to introduce her life, Sotomayor begins her narrative by parsing the differences between a memoir and a biography. A memoir, she contends, is more beholden to memory and personal experience and is therefore not an effort to objectively or comprehensibly capture a person's life story. This rhetorically astute crafting allows her to break free from the generic constraints of biography and center her voice after being so tediously scrutinized years earlier by the press and members of Congress. Of course, Sotomayor is one of America's most visible public servants and the book is decidedly political in its scope and aim. It offers a valuable heuristic for reading Sotomayor's nomination, detailing her upbringing and noteworthy academic accomplishments, her amazing career trajectory, and her moderate political disposition. Although the book never reaches the confirmation hearings, the text provides a deft counterpoint to media and congressional narratives that called into question her temperament, affability, and intellect. The memoir both corrects the record and anticipates history's interpretive gaze. Most important for the purposes of this project, Sotomayor's account utilizes anecdotes about diabetes to expound on her life story and cement her reputation as a diligent justice.

My Beloved World is bookended by Sotomayor's experiences with diabetes, wherein each anecdote illustrates her will to live and the vigilant self-care that has been required of her since she was a child. The prologue, to start at one end of the timeline, is an extended meditation about the origins of her diabetes and its role in making her self-sufficient. It opens with a young Sonia waking up to a fight between her parents about which one of them should give her an insulin shot in the days after she is diagnosed. Her father's hands are trembling from the effects of alcoholism and her mother is pleading with him to learn how to administer shots when she is not home. Sotomayor recalls being anxious that she would not be allowed to spend the night at her grandmother's house because of her diabetes and decides then and there, at age eight and in the second grade, to learn how to sterilize needles by boiling them in water and deliver the shots herself. She remembers:

Watching water boil would try the patience of any child, but I was as physically restless as I was mentally and had well earned the family nickname Ají – hot pepper – for my eagerness to jump headlong into any mischief impelled by equal parts curiosity and rambunctiousness. But believing that my life now depended on this morning ritual, I would soon figure out how to manage the time efficiently: to get dressed, brush my teeth, and get ready for school in the intervals while the pot boiled or cooled. I probably learned more self-discipline from living with diabetes than I ever did from the Sisters of Charity.⁸²

The contrast between Sotomayor embracing the nickname Ají and the degree of developing self-control alluded to in the anecdote is strikingly similar to the ways diabetes came to act as a containment mechanism in accounts of her experience in the press. It is also

reminiscent of the quotation from the confirmation hearing where she contemplated the relationship between emotion and judgment. The various components of her life provided the spiritedness necessary to survive diabetes and retain a sense of independence. It is established from the beginning that Sotomayor finds peace, structure, and ultimately control in ritual and routine. Equally compelling is that Sotomayor embraces her nickname and her “rambunctiousness,” showing that restraint and discipline can be expressed in ways that are not beholden to a universal subject typically rendered as white, male, and heterosexual.

The second extended anecdote arrives near the text’s conclusion and finds Sotomayor having a hypoglycemic attack while celebrating her 37th birthday at home. Having attended to her guests at the party, she recalls wanting to lie down, only to be approached by a friend who believes she has had too much to drink. Sotomayor remembers grabbing a large piece of birthday cake from her friend’s plate and smashing it into her mouth. This visceral scene caught some of her friends off guard because Sotomayor rarely told people about her condition. She writes, “I was averse to any revelations that might have seemed a play for pity. And managing this disease all my life had been the hallmark of self-reliance that had saved me as a child, even if it may have partly cost me a marriage.”⁸³ The rhetorical composition of a diabetic subject is constructed through multiple connections between privacy, constraint, and control. Her determination is marked through the wisdom of a young child, the demise of a relationship, and eventually a seat on the nation’s highest court.

Managing diabetes is largely a prudential skill, one that demands practice and situated learning to stay well and stave off complications. After all, medical technologies are only as strong as a person’s ability to utilize them properly. Sotomayor grew up in an era when technologies such as glucose monitors and insulin pens and pumps were not readily available. Practicing constraint and discipline were essential because one could not instantly know where blood sugars were resting. She writes,

I cultivated a constant mindfulness of how my body felt. Even now, with much more precise technology at hand, I still find myself mentally checking physical sensations every minute of the day. Along with discipline, that habit of internal awareness was perhaps another accidental gift from my disease. It is linked, I believe, to the ease with which I can recall the emotions attached to memories and to a fine-tuned sensitivity to others’ emotional states, which has served me well in the courtroom.⁸⁴

This recollection finds kinship with the Obama quotation earlier in this essay that extols her fortitude and strong will. Disability and perceptiveness are tied together positively – she explicitly calls it a gift – opposing the negative articulation forged between diabetes and her temperament that was present in early press coverage.

The opening and closing anecdotes follow a pattern of pragmatism and self-governing that is ubiquitous in the book. Diabetes literally surrounds her life, cushioning the personal and the political in a sensibility that denotes moderation and deliberation. These rhetorics of balance surface regularly in the text and are a departure from the fiery persona some conservatives tried to assign to her. For example, she writes that she was not enamored with the brash tactics she witnessed while at Princeton, noting that political expressions that were too confrontational could “lose potency if used routinely.”⁸⁵ She imparts,

Quiet pragmatism, of course, lacks the romance of vocal militancy. But, I felt myself more a mediator than a crusader. My strengths were reasoning, crafting compromises, finding the good and the good faith on both sides of an argument, and using that to build a bridge.⁸⁶

Sotomayor is clear that such reflections do not suggest that she cast aside her Latino heritage. At Yale law school, for instance, she found herself with Latinos who “seemed determined to assimilate as quickly and thoroughly as possible, bearing any attendant challenges and psychic costs in private. I could understand the impulse, but it was never a choice I could have made myself.”⁸⁷ Sotomayor is equal parts firm in her Puerto Rican background and skeptical of brazen political expression. This moderation is also reflected in her recollections about the formal complaint she filed against an established Washington D.C. law firm that suggested she was only admitted to Yale because of affirmative action (as opposed to, for example, being *summa cum laude* at Princeton). Though she explicitly chastises the firm for its harassment in the memoir, the words “racism” and “racist” never appear in the text. She performatively practices the qualities of a Supreme Court Justice by avoiding language that might appear indecorous in the context of the political-judicial sphere.

Diabetes consistently acts as a metaphor for practical wisdom that accentuates the labyrinthine decision-making process of a Supreme Court justice. Sotomayor outlines a number of internal and external factors that she takes into account when administering insulin:

When I’m deciding what I’m going to eat, I calculate the carbohydrate, fat, and protein contents. I ask myself a litany of questions: How much insulin do I need? When is it going to kick in? When was my last shot? Will I walk further than usual or exert myself in a way that might accelerate the absorption rate?⁸⁸

The excessive and chaotic body that is conjoined by disability, gender, and race is articulated to a rational actor who contemplates a series of factors to maintain health.

Still, it should be noted that Sotomayor was not always a study in perfect health. For many years she smoked three and a half packs of cigarettes a day, which is hardly the image of the “good diabetic” found in the media coverage just before her confirmation. She also discussed working at Zaro’s Bakery in Co-op City and having a chocolate-covered French cruller every morning for breakfast.⁸⁹ I mention these things not to discipline Sotomayor’s body, but to note that even as restraint is a defining feature of life with diabetes, there are cracks in the biographical dam. The form of the memoir permits a more compelling and adored subject than the coverage of the judicial hearings, which demanded moderation, thoughtfulness, and a decidedly healthy jurist.

Intersectional effects and narrative remainders

After the White House put forth Sotomayor’s name for consideration, *The Washington Post* opened their coverage by remarking,

When President Obama announced his nominee for the Supreme Court last week, he trumpeted her childhood diagnosis of diabetes as one of the challenges she’d overcome. Sonia Sotomayor’s success is a testament to how extraordinary life with diabetes can be. Yes, this is a serious disease, without a cure, but it is also very treatable.⁹⁰

Diabetes positioned Sotomayor not as a magistrate who was confronting an abbreviated life, but an inspirational figure who transcended adversity through self-discipline. Ultimately these positive qualities inflected a political orientation that conveyed judicial restraint and situational prudence. Diabetes was heralded as a virtue, even if it did not deflect attention away from those aspects of her identity that were attacked relentlessly by members of Congress.

The performative invocations of judiciousness reiterated throughout the vetting process illustrate the rhetorical fungibility of disability. Sotomayor, and by extension her judicial philosophy, were constituted as manageable in order to parlay status and navigate the institutional treachery she confronted. Video archives of the confirmation hearing show Sotomayor taking long pauses, providing thoughtful follow-up information, and rarely flinching in the face of confrontational remarks. Muñoz adduces that this exchange is readily identifiable as a performance by audience members who have lived with the harsh realities of structural and political racism. Like Charles Morris's musings about the fourth persona, Sotomayor's restrained presentation was recognized by those in the know.⁹¹ She was resisting, in Muñoz's words, a *coercive mimesis*, which "understands ethnicity itself as a captivity narrative, one that the minority subject is compelled to perform within" institutions such as the judiciary.⁹² She embraced and embodied the shame lobbed at her to generate new conditions of possibility.⁹³ This performative presentation of self is not one adjudicated solely through race or through gender, but via the complicated interplay of power relations that constituted Sotomayor's persona, which subtly includes her disability.

Sotomayor's character and citizenship were made intelligible through discourses that spotlighted her diabetes, even as the condition appeared to be largely "invisible" throughout the process. Despite this unmarked quality of the disease, Sotomayor and her condition remain decidedly public, being scrutinized and monitored in ways that do not keep pace with cognate cases. Chief Justice Roberts is merely rumored to have epilepsy, without any confirmation or denial that it is real. Everyone knows that Sotomayor has a chronic condition. The high-profile struggles of two other Supreme Court justices, Ruth Bader Ginsburg and Sandra Day O'Connor, fighting cancer is likewise indicative of an ongoing disciplinary pattern that surveils the bodies of women even as men that represent universality, wisdom, and justice, but who might also have health issues, are repeatedly shielded from public appraisals. The effects of discourse materialize incongruently among different bodies. The cultural politics of disease and illness highlight the necessity to further scrutinize disability's byzantine characteristics.

The disciplining of Sotomayor's speech, dress, and persona foretells the ways women, minorities, and those with disabilities are compelled to perform public presentations of self in order to be included in institutional hierarchies. The taming of Sotomayor's appearance mentioned above, for example, was meant to minimize ethnic cues that are coded as contrary to the normative operations of the judicial system. Erin Tarver points out that the White House repeatedly invoked Sotomayor's identity as a "Newyorkrican" to deflect attention from the controversy over her "wise Latina" speech, but also privately instructed her "not to wear her favored hoop earrings or red nail polish to the Senate confirmation hearings."⁹⁴ Of course, despite these attempts, Sotomayor was still positioned as uncivil by politicians who argued she would invite chaos into the legal sphere. The constant gestures toward "restraint" and "balance" become an unfortunate necessity for those who do not

occupy a so-called “universal subject position.” And in this case the public acclaim that permitted such movement came, in part, from the rhetorical possibilities enabled by her disability.

Finally, in the coverage of Sotomayor’s nomination there was an obsessive focus on biography and personal narrative, with little consideration given to systemic failures that marginalize people with diabetes. As a matter of fact, only one news story mentioned insurance when discussing diabetes, which is perhaps the biggest obstacle to maintaining health, especially for those who are socio-economically disadvantaged. In this way, we might cautiously approach Sotomayor’s success story, because staying well is not generally the product of personal choices or hard work. The fact that Sotomayor grew up in a low-income part of the Bronx in the 1960s might suggest that anyone can overcome the effects of diabetes if only they exhibit enough control. From a public health perspective, this is a risky narrative to impart to low-income populations, especially people of color who struggle with diabetes in disproportionate numbers. According to a report released in 2013, the Bronx had the highest rates of diabetes in New York City, with one in every three residents having the disease. Likewise, in places like East Harlem, where roughly 90 percent of the population is Latino or black, people die of diabetes at twice the rate of people in the city as a whole.⁹⁵ This is not to say that Sotomayor should be chided for her success, only that the media narratives developed around her nomination are not always representative of the experiences people with diabetes have living in urban enclaves.

Despite these limitations, Sotomayor’s story is reparative in many regards and is certainly compelling, if not enviable, because of the ways her disability is recuperated as an aspect of her character not easily compartmentalized from the person she became. Living with diabetes is in fact hard work and Sotomayor continues to set a positive example for many people living with the disease. We must continue telling stories about the discrimination confront by people who occupy complex subject positions to productively transform norms that disparage and discipline some bodies so that others may profit politically, economically, and culturally.

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Notes

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