REVIEWING RESISTANCES TO RECONCEPTUALISING DISABILITY

Chong-Ming Lim

Abstract: I attempt to adjudicate the disagreement between those who seek to reconceptualise disability as mere-difference, and their opponents. I do so by reviewing a central conviction motivating the resistance, concerning the relationship between disability and well-being. I argue that the conviction depends on further considerations about the costs and extent of change involved in accommodating individuals with a particular disability trait. I conclude by considering three payoffs of this clarification.

Central to the reconceptualisation of disability is the idea that disability does not involve an automatic or intrinsic cost to an individual's overall well-being. While "reconceptualisers" concede that disabilities often have some negative impact on individuals' well-being, they argue that the impact is restricted or localised (Barnes 2009; 2014; 2016). The mere possession of disability leaves open an individual's overall well-being – which depends on what disability 'is combined with' (Barnes 2016, p. 85). Crucially, it is influenced by the social and material world in which disabled individuals find themselves. Disability is mere-difference, just like many other traits people possess (such as being gay or being female). While this is generally accepted by disability activists and within disability studies, many philosophers and bioethicists ("opponents") regard it as implausible.

This paper reviews one central source of resistance to reconceptualising disabilities, in the form of one purportedly crucial conviction concerning the relationship between disability and well-being (Kahane and Savulescu 2009; 2016). I argue that the conviction depends on political considerations about the costs and extent of change involved in accommodating individuals with a particular disability trait. There are three main payoffs of this clarification. First, it identifies under-examined limitations to the projects of reconceptualisers and their opponents. Second, it reveals as overly-quick the dismissals of reconceptualisers by their opponents, and vice versa. Finally, it reveals a site for the future work of reconceptualisers.

I

Resisting reconceptualisation and accommodating disability. The crucial conviction which we purportedly have, and which motivates resistance to reconceptualising disability as mere-difference, is:

> (WB) Disability reduces overall well-being.[1]

---

[1] There is another oft-cited conviction, pertaining to the asymmetry in our judgements concerning causing and removing disabilities. Kahane and Savulescu have recently argued that that conviction centres on the consideration of well-being (2016, p. 786), and so I leave it aside. For lack of space, I also set aside how

On its most common instantiation, (WB) claims that disabilities would reduce individuals' overall well-being, even if prejudices within the social and material world – including their manifestation in the organisation of social institutions – were removed. In such an ableism-free society, a disabled individual has a lower overall well-being compared to a non-disabled individual, because of her disability.[2] Thus, on the basis of (WB), we reject reconceptualisation.[3]

Consider this resistance in relation to the case of reconceptualising autism as mere-difference. Autistics are commonly described as either high- or low-functioning. On this understanding, low-functioning autistics are unable to independently function and navigate the world. They face serious problems with social interactions – many are deemed non-communicative – and grapple with repetitive or obsessive behaviours that disrupt and impair everyday functioning. High-functioning autistics, on the other hand, are generally able to function and navigate the world – though their autistic characteristics still hinder effective social interactions.[4] Both instantiations of autism are commonly understood as reducing overall well-being – (WB) obtains. However, reconceptualising high-functioning autism as mere-difference is increasingly judged plausible. This judgement is shared even by those who seek to eradicate autism. For instance, Lenny Shafer, the publisher of a newsletter popular among those seeking to eradicate autism, argues that that '[i]f those who raise their opposition to the so-called oppression of the autistic would simply substitute their usage of "autism or autistic" with "Asperger's," [a form of high-functioning autism] their arguments might make sense.' (Harmon 2004).

How can opponents of reconceptualisation explain this judgement in relation to their holding on to conviction (WB)?[5] I suggest this can be done by understanding (WB) as depending on a set of considerations concerning the political issue of accommodating disabled individuals. My thesis is that:

> The conviction (WB) depends on our considerations about the costs and extent of change involved in accommodating individuals with a particular disability trait.

Each point of the thesis requires elaboration. I begin by discussing the individual considerations, before explaining their relationship to (WB).

First, accommodation centrally involves accounting for the different ways in which disabled people navigate the world, in (re-)arranging our society and its institutions, to allow them reasonable access to opportunities, and thus to leading lives they consider to be flourishing. Accommodation allows them to carry on living _differently_. It is opposed to other strategies

---

reconceptualisers have addressed (WB). How my account relates to that of other reconceptualisers is to be worked out separately.

[2] In this paper, I use the term 'well-being' generally – neither committing to any particular conception of well-being, nor to how (and whether) it may be measured. While I believe that my subsequent discussion is compatible with a range of accounts of well-being, I cannot undertake the explanation here.

[3] Here, I am not committed to the claim that well-being is the sole consideration relevant to our acceptance or rejection of reconceptualisation. We may discover others.

[4] I discuss the case of autism elsewhere (Lim 2015).

[5] I acknowledge that a _resolute_ defender of (WB) could simply dismiss the judgement as fundamentally misguided – from that view, there is no need for explanations. I suggest that we may see more clearly the bases of the conviction if we undertake the explanation. Certainly, the proof of the pudding is in the eating. There is thus, I concede, nothing conclusive to be said at this point to someone who refuses to come along.

which involve removing disabilities. The comparison may be described as one between 'changing the world' and 'changing disabled bodies' (Wolff 2009).[6]

Second, these considerations are specific to a *particular trait* of a disability, rather than to disability in general. Given the myriad ways in which people may be disabled, it is unproductive to discuss accommodation of disability in general, without the specifics of which traits need to be accommodated, and how. There are two additional reasons for focusing on specific traits. One, disabilities are often clusters of traits. Accommodating a particular disability is, in any case, accommodating its traits. Being specific also prevents us from being overwhelmed when we consider how to accommodate disabilities generally. Two, different disabilities share similar traits. Thinking about traits reveals connections between them, and how accommodation may address them together.[7] We allow for only one aspect of generality: the considerations concern a particular trait (of a/any disability) as generally understood, setting aside differences in individual manifestations. For instance, the concern is with 'inability to walk' generally, rather than 'John's paraplegia' or 'Jane's muscular dystrophy' specifically. Considerations about accommodation are general – concerning questions, among others, of what may be done at the societal level, what resources should be distributed (and how) – and we need at least this level of generality concerning disability traits for the considerations to get off the ground.[8]

Third, the costs involved in accommodation are construed broadly. They may refer to economic costs a society has to bear, in re-arranging its physical environment or common institutions. They may also refer to opportunity costs, referring to the loss incurred when some particular options or projects cannot be satisfied in undertaking accommodation. These costs will vary, depending, for instance, on the levels of technological advancement or the state of existing accommodation infrastructure in a society.

Fourth, the extent of change required tracks the distance between the current arrangements of our social institutions, and a future (idealised) arrangement which allows for accommodation of individuals with certain disability traits. Note: the extent of change involved in accommodation does not match the costs exactly. The change involved may be great, even with low costs. This occurs, for instance, when the change runs counter to some of our values. Consider the case of psychopathy, which involve impairments in affective processing – likely resulting from abnormalities in the (amygdala of the) brain (Blair et al 2005). It may turn out that accommodating psychopaths may not involve great costs. Yet they would involve radical changes to the values underlying our social institutions – for instance, those concerning reciprocity – or which we deem crucial to what we consider a flourishing life. This extreme example sheds light on the role that valuing or disvaluing a certain (disability) trait plays in thinking about accommodation. That we may not explicitly or obviously make the same value judgements about other disabilities – deafness, myopia, colour-blindness – does not mean that they do not in fact play a role.

---

[6] We need not worry about the hedging in the phrase 'reasonable access to opportunities and living well'. While specifying it is needed for a more complete account, doing so can only be done upon adopting a particular theory of justice – a task beyond our current discussions.

[7] Thinking about specific disability traits may also reveal their similarities with conditions faced by people occupying different phases of "normal" human life – such as the elderly or the very young. In that case, they too would benefit from the presence of accommodations for particular disability traits (Nussbaum 2007, p. 101).

[8] See Mary Maynard (2001, p.129) for an articulation of the worry about generalising, but also the need for suitably qualified generalisations in theorising about macro-level phenomena.

Fifth, these considerations are _ours_. As should be clear from the discussion of costs, the considerations are ours in the sense that they vary according to the contexts in which we find ourselves having to consider the question of accommodating a particular disability trait. These considerations will be different for "others", who are posed the same question in another context. These considerations are ours in another sense – they depend on our evaluations of, and attitudes towards, a particular disability trait. The case of the psychopath brings out this point. Given our existing commitments, _we_ are not (or in any case do not take ourselves to be) the sort of people for whom accommodating psychopaths is a genuine possibility. The changes involved are not those that we can, or will, make. This observation may be extended to considerations of costs, which would then come in the form of the thought that certain costs cannot be borne, or are not worth bearing.[9] Put generally, what we think about the considerations involved in accommodation depends on the circumstances we find ourselves in, and on who "we" are.

These considerations interact with each other in supporting the initial conviction (WB). Consider costs. The greater the costs of accommodating a disability trait, the stronger the conviction (WB). On my account, (WB) is not a naive insistence that disability reduces well-being simpliciter. Instead, it is a considered conviction, supported by considerations of what is involved in accommodation and its absence. This may be explained thus: The greater the costs involved in accommodating a particular disability trait, the more likely that the existing constraints faced by individuals with (and in virtue of) that trait will persist.[10] This is because resources are finite – investing in accommodation means not investing in other projects. The greater the costs of accommodation, the greater the corresponding losses in the other projects which we may be committed to.[11] Presumably, a wealthier and more technologically advanced society is more able to bear the costs of accommodating different traits (Wundisch & Andrich 2015, pp. 10-11), while balancing other projects. And where these constraints persist, the well-being of disabled individuals is reduced compared to where the constraints do not exist.[12] Put another way: consider a hypothetical context in which resources are infinite, and the level of technological advancement is very high. There, we may have full accommodation of any particular disability trait. Posit further that there are no personal costs of accommodating any particular disability trait – they are covered by the infinite resources. In that case, the assessment that any particular disability trait reduces overall well-being – that is, (WB) – would be groundless, insofar as the constraints that reduce well-being are removable via accommodation. Then, insisting on (WB) could well be mainly prejudicial.

A similar analysis applies to the consideration of the extent of change involved in accommodating a certain disability trait. The greater the change required, the stronger the initial conviction (WB). In some cases, there may be disability traits for which we are simply unable to think of (and effect) viable means of accommodation. In such cases, what motivates (WB) will not be the fact that great changes are required, but that we do not know what changes can be made which would remove the constraints faced by individuals possessing those disability traits.[13] Additionally, the dimension of valuing accounts for the remaining resistance to accommodating some traits which are disvalued. Here, presumably the more

---

[9] We do not have to take these evaluations and attitudes as fixed or immovable.

[10] I understand 'constraints' as Iris Marion Young does (1994, p. 726). I will elaborate on this connection elsewhere.

[11] Here I assume that it is not always true that accommodating disability traits allows us to accommodate parallel characteristics of phases of non-disabled life.

[12] I revisit this in the final section.

[13] That is to say, we think that accommodation is _infeasible_. And like (WB), such a thought need not be naive.

tolerant a society is – the more open it is to accepting different forms of life as valuable – the more prepared it may be to undertake the changes required to accommodate a particular disability trait.

There is one important complication. Up to this point, our discussions have centred on accommodating particular disability traits, disregarding how the accommodation of one interacts with that of another. However, when we shift our focus to accommodating multiple disability traits, we see that accommodating one trait may make things more difficult for another trait. For instance, accommodating partially-sighted and blind individuals may involve the construction of safety railings along pavements, which would decrease the ease of access to pavements for wheelchair users. Or accommodating the hearing-impaired and deaf may involve the use of auditory signals which are audible in busy settings, but which would make the shared environment uncomfortable for hearing individuals, or outrightly hostile to individuals who are hyper-sensitive to sensory stimuli (a common problem faced by autistic individuals). On my account, these conflicts are related to the extent of change that can be undertaken in a society at any particular time. They lend support to the judgement that some accommodation changes _cannot_ be made.[14] And where the judgement is correct, the constraints associated with the absence of accommodation would persist. This in turn motivates the conviction (WB).

Taken together, we arrive at the following claim: the greater we regard the costs and extent of change involved in accommodating a particular disability trait, the stronger the conviction (WB) which motivates resistance to reconceptualising disability.

The actual interactions between these considerations are likely to be implicit, inchoate and inexact. Yet no further specification of the interactions – including the "weight" of each in relation to others – may be given in advance, without reference to how they feature in actual, different contexts. Lacking facts about the costs and extent of change involved in accommodating a particular disability trait in a particular society, we may not easily address resistance to reconceptualising it as mere-difference. Fortunately, even with this mild increase in clarity, we may review the debate between reconceptualisers and their opponents.

II

Reviewing the debate. There are three main payoffs of my analysis. First, the shift from general discussions about disability to the costs and extent of change involved in accommodating specific disability traits identifies limitations to both the projects of reconceptualisation and their opponents.

Consider the frequent use of analogies by reconceptualisers. For instance, an analogy is often drawn between autism and gayness – the latter taken as a successful case of reconceptualisation. While the reconceptualisation of (high-functioning) autism bears similarities to that of gayness – especially in the initial (dis)valuing of the trait in concern –

---

[14] Of course, these conflicts may eventually be resolved by unexpected future technological advances. But unlike the considerations of costs, these conflicts are less easily idealised away through the presentation of hypothetical situations. In any case the point remains that the conflicts exist here and now, and shape our current judgements concerning reconceptualisation. A related observation: our inability to think of accommodations that resolve the conflict may also motivate resistance to reconceptualisation.

there are salient differences between them. Among other things – the reconceptualisation of the latter was partly predicated on the empirical fact that gay individuals suffered no deficits in social and everyday functionings compared to straight individuals. In contrast, the same claim cannot be made in the context of reconceptualising autism. There, the valuing of autism makes no reference to comparable levels of social or everyday functioning. Instead, the claim is that autistics may function at comparable levels if society _were to_ accommodate their differences (Lim 2015, p. 569). On my account, this is partly due to the fact that the costs and extent of change involved in accommodating gayness are significantly different from those for autism. In that case, reconceptualising autism as mere-difference cannot be simply established by an analogy between one aspect of autism and gayness.

A similar analysis applies to the frequent use of disanalogies by opponents of reconceptualisation. They cannot simply point to dissimilarities between (what is involved in accommodating) two disability traits, in order to refute reconceptualisation. The citation of some severe disability traits for which accommodation involves great costs and change, also does little in undermining the reconceptualisation of _other_ disability traits. The general observation, then, is that we must assess the nature and strength of the comparisons that are made. That is, we must engage in evaluations of whether the (dis)similarities are relevant to the issue of accommodation of a particular trait, and how important they are to it in relation to other considerations. We must also be cautious about drawing conclusions concerning the reconceptualisation of a particular trait in a specific context, on the basis of comparisons to how its reconceptualisation succeeds or fails in another context. In sum, we should not expect the mere existence of similarities or differences to immediately lead us to any particular conclusion about reconceptualisation.

Relatedly, the success or failure of reconceptualising a particular disability trait leaves open the issue of how the reconceptualisation of other traits may fare. In this sense, the projects of the reconceptualisers and their opponent are _piecemeal_ in nature – concerning how (dis)similar a particular disability trait is, to another trait which has been successfully reconceptualised as mere-difference.[15]

Second, we see how reconceptualisers and their opponents inadequately address each other's legitimate worries. Reconceptualisers are right that there is a problematic dimension of (dis)valuing implicit in our convictions concerning disability – revealed by their frequent comparisons of our resistance to reconceptualising disability to our historical resistance to reconceptualising traits such as gayness. But insofar as considerations of costs also crucially influence the convictions, the latter cannot be dismissed simply as stemming only from ableist prejudice. Reconceptualisers must acknowledge the possibility that the judgements (concerning the implausibility of reconceptualising a particular trait) may be motivated largely by considerations of costs, which outweigh the considerations concerning the value of that trait. Conversely, while opponents are right (at least in some cases) about the practical implausibility of accommodation, and thus reconceptualisation, those considerations are likewise only part of the picture. They must acknowledge the possibility that the convictions are in some cases indeed largely motivated by (and thus best explainable in terms of) ableist prejudice. This is so especially in cases where the costs and extent of change involved in accommodating a particular disability trait are very low. In sum: when it comes to determining whether a judgement concerning the implausibility of reconceptualising a

---

[15] This leaves open the issue of the existence and success of other strategies which are less-reliant on analogies. I also set aside the implications of my claims here for the concept of disability in general.

particular trait is motivated by ableism, both considerations of costs and extent of change (which includes valuing) must be taken into account together. The overly-quick dismissals of one camp by the other – on the basis of the sole consideration they choose to focus on – are inadequate.

Third, our analyses so far have located the sources of resistance to reconceptualising disability as tied to considerations about accommodating *specific* disability traits. However, recall that the project of reconceptualisation is general. It centres on the claim that even if disability reduces well-being, its impact is restricted or local, and *leaves open* the issue of these individuals' overall well-being. Thus, like many other traits – such as being gay or being female – disability is a mere-difference (or neutral-difference) with respect to their possessors' overall well-being. Such a general reconceptualisation, on my account, does not directly address the sources of resistance. Even for what we regard as the most severe disability traits, it remains true that the question of their possessors' overall well-being is left open. The constraints that they face in virtue of their disability traits do not exhaust the entire evaluation of their overall well-being – other considerations feature. However, the constraints may be severe and several, such as to disrupt many everyday functionings. In such cases, it would be unlikely that even the local reductions in well-being brought about by the constraints, when *taken together*, leave open overall well-being in a non-trivial sense. The reconceptualisers' insistence that it is *possible*, does not address the opponents' worry that it is *implausible*. Reconceptualisers must engage in the additional project of tackling these worries head-on. As I will.[16]

Department of Philosophy
University College London
Gower Street
London WC1E 6BT
U.K.

References

Barnes, Elizabeth. 2009: 'Disability, Minority, and Difference'. *Journal of Applied Philosophy*, 26(4), pp. 337-355.
Barnes, Elizabeth. 2014: 'Valuing Disability, Causing Disability'. *Ethics*, 125(1), pp. 88-113.
Barnes, Elizabeth. 2016: *The Minority Body: A Theory of Disability*. Oxford: Oxford University Press.
Blair, James, Derek Mitchell, & Karina Blair. 2005: *The Psychopath: Emotion and the Brain*. Oxford: Blackwell.
Harmon, Amy. 2004: 'How About Not 'Curing' Us, Some Autistics Are Pleading'. *The New York Times*, 20 Dec 2004. Available at: www.nytimes.com/2004/12/20/health/how-about-not-curing-us-some-autistics-are-pleading.html. [Accessed 22 February 2016].

Kahane, Guy, and Julian Savulescu. 2009: 'The Welfarist Account of Disability'. In
        Brownlee K, Cureton A (eds.), *Disability and Disadvantage*. Oxford: Oxford
        University Press; pp. 14-53.
Kahane, Guy, and Julian Savulescu. 2016: 'Disability and Mere Difference'. *Ethics*, 126(3),
        pp. 774-788.
Lim, Chong-Ming. 2015: 'Accommodating autistics and treating autism: Can we have both?'
        Bioethics, 29(8), pp. 564-572.
Maynard, Mary. 2001: '"Race", Gender and the Concept of "Difference" in Feminist
        Thought'. In Kum-Kum Bhavnani (ed.) *Feminism and "Race"*. Oxford: Oxford
        University Press, pp. 121-133.
Nussbaum, Marth. 2007: *Frontiers of Justice: Disability, Nationality, Species Membership*.
        Cambridge: Harvard University Press
Wolff, Jonathan. 2009: 'Cognitive Disability in A Society of Equals'. *Metaphilosophy,* 40(3-
        4), pp. 402-415
Wundisch, Joachim, and Vuko Andric. 2015: 'Is It Bad to Be Disabled?' *Journal of Ethics
        and Social Philosophy*, 9(3), pp. 1-16.
Young, Iris Marion. 1994: 'Gender as Seriality: Thinking About Women as a Social
        Collective'. *Signs: Journal of Women in Culture and Society*, 19(3), pp. 713-738.