

Is Disability a Neutral Condition?

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This paper concerns our evaluation of disability, and its impact on well-being. One of the central philosophical questions about disability is whether it is a type of harm. Saying that disability is harmful means that disability reduces a person's well-being in some way. The debate is usually understood as being between those philosophers who argue that disability is a bona fide harm and "revisionists" about disability, usually disability rights advocates, who argue that disability is just another way of being different.

Revisionism about disability is usually associated with proponents of the Social Model of Disability, who argue that conditions such as blindness, deafness, or paraplegia are merely differences and not bona fide harms because, to the extent that these conditions are harmful, it is as the result of discriminatory social barriers and prejudice. Revisionists about disability reject the premise that disability itself necessarily harms. When many people with disabilities examine their lives, they don't view their disability as necessarily a negative feature. Some revisionists, whom I call disability neutralists, make a further claim. Disability itself ought to be thought as a presumptively neutral condition. In some circumstances, the disability itself may be an advantage because it can cause or be connected with certain beneficial traits or skills. Since disability can benefit a person, it can't be a bona fide harm. Even if a disability is not a benefit, it may have no negative impact on a person's well-being, and as such, it cannot be a harmful condition. When I refer to disability revisionists in this paper, I'm focusing solely on those scholars and advocates that hold (1) disability does not necessarily harm; and (2) as a result of (1), we ought to think that disability is presumptively neutral.

In this paper, I show that the debate between those who argue disability is a type of bona fide harm and those who deny that disability necessarily harms is a false one, as neither view can adequately capture the appropriate complexity in our evaluations of disability. The debates between standard and revisionist accounts of disability often hinge on whether disability is or is not intrinsically harmful to some degree. To say that disability is intrinsically harmful is to hold that the mere occurrence of disability itself harms a person to some degree. There is no reason to assume, however, that an instance of harm must necessarily be connected to an intrinsically bad state. As I will argue, harm is best understood according to a counterfactual comparison account. According to this account, to suffer harm is to be made worse off than one otherwise would have

been. Judgments of harm are contextual, and rely on important distinctions, such as the difference between intrinsic and extrinsic harm and between all-things considered harm and harm that is merely *pro tanto*. Once we are clear on the role the concept of “harm” plays in our arguments about disability, I argue that many disabilities are most plausibly understood as instances of *pro tanto* extrinsic harm. My argument provides a better way to conceptualize the relationship between disability and its evaluation, especially whether disability is, in some contexts, harmful, neutral, or beneficial. As I will show, my argument is consistent with the disability revisionists’ basic concerns without entailing its problematic implications.

Preliminary Considerations

In this paper, I’m using the term “disability” as it is commonly understood in practical, policy, and legal contexts.¹ As such, I will define disability *narrowly* to focus on impairments, injuries, or diseases that are associated with a reduction, loss, or absence of species-typical functioning. Although this claim may be normative in some sense, I’m not assuming that impairments necessarily cause disadvantage. Impairments are some property of an individual that cannot be readily altered (Wasserman, Blustein, and Putnam 2011).² Disability is the social classification that all of these instances fall under.³ The paradigm case of disability that I will focus on is dyslexia. Nothing about my argument, however, hinges on the use of this example.⁴

I also want to make a few clarifications concerning the concept of harm. Philosophers often distinguish between *being harmed* and a person *suffering harm*. I’m going to focus on the latter idea, which I refer to as a *harmful condition*. To suffer harm is to be put in a bad state of some kind (Thompson 2011). I’m focusing on whether a disability is a harmful condition whether or not another agent caused this state. As such, my analysis will cover both cases of someone becoming disabled through accident or injury and cases where someone is born with a disability. When thinking about a harmful condition, I’m not presupposing that harming is morally wrong.⁵ Further normative principles are needed to explain why a harmful condition also requires moral concern.

Clarity about what it means to suffer harm has important *prudential* and *normative* implications. We want to understand why someone’s well-being has been set back or why some people have less well-being than others. Understanding why someone is suffering harm allows us to make *predictions* about how actions, states of affairs, or events may affect a person. When we predict how certain factors affect well-being, we are giving causal explanations.

Harm is also of particular *moral significance*. It plays an essential role in many normative principles. Principles of non-maleficence tell us to refrain from causing harm and principles of beneficence tell us to contribute to a person’s welfare. Assessments of harm may also play a fundamental role in issues of justice. Consider, for example, prioritarianism, which roughly holds that the

benefits to those who are worse off matter more than the benefits to those who are better off (Parfit 2000).⁶ As a matter of justice, we ought to give priority to the worst off. Our evaluations of disability will affect whether or not people with disabilities fall within the class of those who are considered the worst off.

Is Disability a Harmful Condition?

Disability as Intrinsic Harm

What does it mean to suffer harm? To say that something is harmful is to make a claim about well-being; specifically, harm is a state of reduced well-being to some degree.⁷ What does it mean to say that a disability harms? Disability scholars have convincingly argued that disability is not a tragic misfortune or inconsistent with a life worth living (Silvers 1998; Asch and Wasserman 2014).⁸ Disability rights scholars and advocates have also persuasively argued that many disadvantages imposed on people with disabilities are the result of environmental barriers and impermissible attitudes (Amundson 1992; Bickenbach 1993; Silvers 1998).

A common criticism of these important arguments alluded to above is that environmental and social barriers cannot explain all of the disadvantages and harms associated with disability, as such an analysis leaves out the role of disability itself (Shakespeare 2006; 2014; Terzi 2004). If the disability itself can cause harm to some extent, then disability may be a disadvantage even in an accessible and non-discriminatory society (Buchanan et al. 2000; Glover 2007; Shakespeare 2014). Disability scholar and sociologist Tom Shakespeare, for example, argues that impairments are a type of “residual harm.” He explains:

My claim is that, even in the most accessible world practical, there will always be residual disadvantage attached to many impairments. If people suffer from fatigue, there is a limited amount that can be done to help: motorized scooters and other aids may help increase the range and scope of activities, but ultimately the individual will be disadvantaged when compared to others. (2014, 42)

According to this criticism, disability would be bad for you even if a society did everything within its practical power to accommodate people with disabilities.⁹ Moreover, many scholars have argued that disability must still be a harm (to some degree), even in a fully accessible and non-discriminatory society, because otherwise it would be permissible to cause disability, to withhold treatment for disability or to bring a child into existence with a disability instead of a “normal” child (McMahan 2005; Singer 2005; Harris 2007).

The implication of the arguments above suggests that the occurrence of disability *itself* constitutes harm to some degree. Some philosophers, especially bioethicists, have (generally) provided the following explanation for why disability is harmful:

Disability_{SP}: Disability is a harmful condition because even if we could rule out social factors that cause disadvantage, disability is an intrinsically bad state to some degree because it lowers a person's well-being.¹⁰

I call this the *Standard Position* on disability (Disability_{SP}).

I want to briefly explain the substantive reasons why the defenders of Disability_{SP} think it is an intrinsically bad state of some kind. This is a matter of controversy because it depends on the adopted theory of well-being. The relationship between disability and well-being is complex, and the defenders of Disability_{SP} are not arguing that disability is incompatible with living a good life, whatever one's theory of well-being (Asch and Wasserman 2014). Instead, their claims are often understood in two possible ways. First, a *strong* version of Disability_{SP} holds that if, all things being equal, we could fix a person's external circumstances, removing a person's disability will increase his or her well-being. A *weaker* claim is also consistent with Disability_{SP}. Even if disability does not always reduce well-being, it is probable that a life without a disability would have a higher degree of well-being (see Glover 2007). On the weaker claim, even in a fully accepting and accessible world, it is likely that someone would be better off without a disability.

Rejecting the Standard Model of Disability

Revisionists about disability reject both the weak and strong versions of Disability_{SP}. As noted above, Disability_{SP} holds that if a disability is a harmful condition, then it must be an intrinsically bad state of some kind. Disability rights advocates argue that if we look closely (or seriously) at the lives of people with disabilities, disability does not *necessarily* put a person in an intrinsically bad state. To illustrate this point, consider a defender of Disability_{SP} who may argue that a rational person with knowledge of all of the relevant facts would choose not to be disabled because disability causes unhappiness or frustrates desires. John Harris (2007), for example, argues that disability is a condition that a rational person would wish to be without (91).¹¹ While disability rights advocates do not need to deny that it may be rational for some people to not want to be disabled, this is not always the case. It may also be rational to enjoy being disabled or rational to not regret being disabled, as disability itself does not *necessarily* frustrate desires or make people unhappy.¹² For example, disability rights lawyer Harriet McBryde Johnson writes:

The presence or absence of disability doesn't predict quality of life. . . . Are we [disabled people] "worse off"? I don't think so. . . . We take constraints no one would choose and build rich and satisfying lives within them. We enjoy the pleasures other people enjoy, and pleasures peculiarly our own.¹³

If we look at how people with disabilities view their lives, they do not necessarily experience it as a state of reduced well-being. This point has been supported in some empirical studies, in which people, after adjusting to life with a disability, do not necessarily assess their condition as harmful (Albrecht and Devlieger 1999). The point here is not to deny that some disabilities may be an intrinsically bad state, such as Tay-Sachs. Instead, it is false to hold that *all* disabilities necessarily harm, that is, reduce well-being.

We also have reasons to be skeptical of the thought that we ought to reject the considered judgments of people with disabilities because they are in an irrational state of denial about their condition or they suffer from adaptive preference formation (Elster 1985). As other scholars have pointed out, rejecting the careful judgments of people with disabilities is problematic (Amundson 2005, 112; Barnes 2009b; Moller 2011, 194). It's not clear why the epistemic standing of those who are disabled should be discounted or ignored, especially when disabled lives are not obviously analogous to those of people whose preferences have been shaped by oppressive circumstances, and when disabled people seem to be best situated to assess whether the effects of disability are such that no one would choose to live with them.

While almost all revisionists about disability reject Disability_{SP} because disability is not always a harm, some theorists, most notably Elizabeth Barnes, suggest we also have reasons to reject Disability_{SP} because disability ought to be considered a presumptively neutral feature.¹⁴ It is instructive to consider her argument in detail (Barnes 2009a; see Barnes 2014). Barnes argues that even if disability can make someone's life more difficult, it does not follow that it is a "negative difference maker," by which she means a feature that makes a life worse overall.¹⁵ Instead, disability is just another way of being different. Disability is a presumptively *neutral trait*, which I will call Disability_N. Barnes argues Disability_{SP} fails to adequately represent the "disability experience." She, like Johnson, notes there are a growing number of persons with disabilities that are not only doing well, but they enjoy their experience of disability.¹⁶ What is important about her argument is she defends the position that even if disability itself is a bad state of a certain kind, it does not follow that disability is an overall harm.

To understand why disability is not a feature that makes someone's life worse off because of the disability itself, we need to distinguish between *local* quality of life and *overall* quality of life. Barnes explains:

Local quality of life is simply quality of life in a given area, or quality of life with respect to a specific feature. Local quality of life can only ever be evaluated relative to a specific feature or state of affairs at a specific time—that is, we can only speak of local quality of life with respect to *x* at time *t* or qua *x* at time *t*. Overall quality of life, in contrast, is quality of life on the whole or 'total wellbeing'. Overall quality of life is thus never evaluated with respect to specific features or states of affairs, but rather can only be evaluated by considering all the features/states of affairs that have an impact

on personal wellbeing (that is, all the aspects of local quality of life). (Barnes 2009a, 339)

Disability is the kind of thing that can make a life harder, but from this fact Disability_{SP} infers that the mere occurrence of disability causes an intrinsically bad state, as it reduces well-being. This inference is faulty because the *very same feature* that has a negative impact in one area can have positive impacts in other areas. Many things can negatively affect a person's local quality of life, but that fact alone does not necessarily tell us that such a feature negatively affects a person's overall well-being. Even if some feature D can be a localized harm, the feature is neutral because it does not determine whether that person is better or worse off overall. The experience of disability can be seen, on the whole, as neutral or positive. Barnes explains:

Having a disability has made [life] harder. But it has also enriched them, to the extent that they claim their experiences of disability are of overall benefit to them. That is, just like many other minority features, disability has negatively impacted various aspects of their local quality of life, but it has also positively impacted other areas, such as its overall impact on, as it were, "total wellbeing" is beneficial. (2009a, 342)

While people with disabilities may experience disadvantages because of the limitations associated with disability, they also experience benefits from it, which may outweigh the disadvantages. Barnes explains, "But because it can be for some a positive, for others a negative, and for others probably not much of either, it is precisely the sort of feature I want to characterize as a *neutral or difference-making feature*" (Barnes 2009a, 341).

In sum, Disability_N theorists reject Disability_{SP} because once we look at the experience and goods associated with disability, we realize disability can be a net-neutral or even a net-positive for a person's well-being. Neutralists about disability do not deny that the disability itself may make a life go worse, in some limited sense, but there is no necessary connection between disability and making a life go worse *overall*, as the positive goods associated with disability may also benefit someone.

Importantly, defenders of disability neutrality push an important intuition about harmful states generally. If any phenomenon can be a benefit, how can it possibly be classified as something that is presumptively harmful? We can (roughly) summarize the rejection of Disability_{SP} with the following *argument for disability neutrality*:

1. If disability is a harmful condition, then it must be an intrinsically bad state because it negatively impacts a person's global well-being.
2. But disability is not always an intrinsically bad state because it does not necessarily negatively impact global well-being.
3. Therefore, disability is not necessarily a harmful condition.

4. If a condition does not necessarily harm by reducing a person's global well-being, it is better understood as a presumptively neutral condition.
5. Therefore, disability is best understood as a presumptively neutral condition.

Before I explain why this argument is unsound, I want to highlight its prudential and normative implications. Disability_N rejects the commonly held explanation why disability is a disadvantage or a misfortune. This means we have reasons to *revise our attitudes* about disability. We often think that someone else's suffering harm also gives us a reason for regret, sympathy and other emotions. A defender of Disability_N may argue that since we are mistaken about our underlying evaluations of disability, we ought to untangle disability from feelings of pity, sympathy and regret. In some cases, we ought to look at disability as a source of pride.

Disability_N seems to have problematic normative implications. In saying this, I want to be clear that all disability revisionists, especially neutralists about disability, are concerned with improving the social, political, and individual lives of people with disabilities. The work of these important theorists has made a positive political impact in disabled peoples' lives, through challenging stigma and changing institutions. Still, I'm concerned the implication of Disability_N may undermine the normative support for obligations many people think we have toward people with disabilities, as the concept of harm has normative significance, especially in helping us generate reasons for action (Kahane and Savulescu 2012, 324). For example, on almost all plausible ethical theories, we have a moral obligation to avoid harming people, and to prevent people from being harmed. We may also have moral obligations to reduce, eliminate or mitigate harmful conditions. According to Disability_N, since a person with a disability does not suffer harm primarily from the disability itself, there are strong reasons to think that we do not have such normative obligations toward people with disabilities, or if we do such obligations are weaker than obligations in the context of other conditions that reduce well-being.

This means that, if we think that we have an obligation to come to the aid of someone who is suffering harm, we may be mistaken if we think this obligation can be extended to people with disabilities. We may only have weak obligations of beneficence toward those with a disability, as disability itself is merely presumptively neutral. While we have obligations of beneficence qua human being, we may not have obligations of beneficence qua disability.

A defender of Disability_N may respond that thinking about disability as a neutral feature does not undermine our grounds for normative support, as we still have obligations of anti-discrimination. Since neutralists argue that the principle source of harm connected to disability is society's treatment of disabled people instead of the disability itself, anti-discrimination and accommodation are the proper normative remedies. I believe, however, it is unlikely that all things needed for a person with a disability can be explained and justified on the

basis of anti-discrimination alone. For example, many people with disabilities need personal assistance services to help them move from their home to their workplace. Additionally, many people with disabilities need modifications to their homes that allow them to get to work. It seems hard to explain how the need to modify a private home for a person with a disability can be explained by socially created barriers of discrimination.

Now, a defender of Disability_N may respond that the failure to receive such devices and services is in fact a type of discrimination, as a failure to receive such social accommodations reduces a disabled person's well-being, which is unjust. It does not follow that a failure to receive such devices and services are always unjust discrimination. Discrimination requires that the beliefs and decisions at issue are both mistaken and unjust (Kahane and Savulescu 2009, 41; Barclay 2011). A failure to accommodate may not be discriminatory if there exists a compelling reason not to distribute every good or service, as scarce resources mean we often cannot distribute every good or service that may increase well-being in some way.¹⁷ My point here is just to show the difficulty of thinking that a principle of non-discrimination will exhaust our duties to people with disabilities.

Disability, Neutrality, and Harm

Disability and the Concept of Harm

The argument for Disability_N is unsound. Before I explain why, I want to show why the use of testimonial evidence alone is not enough for us to accept Disability_N over Disability_{SP}. The debate between Disability_{SP} and Disability_N concerns whether disability is an intrinsically bad state of some kind. Premise 2 rejects the idea that disability is an intrinsically bad state by relying primarily on testimonial evidence from people with disabilities. The defenders of disability neutrality want to sever any necessary link between disability and intrinsic badness. Since to suffer harm is to be in some bad condition or state, is it plausible to assume that harm *just is* the experience of intrinsic badness? Is it plausible to think that a state of intrinsic badness is necessary and sufficient for a harmful condition?

Non-comparative accounts of harm hold that harming is a type of intrinsic badness. Elizabeth Harman, for example, argues that a person or an event harms someone by putting her in a "bad state," such as "pain, mental or physical discomfort, disease, deformity, disability, or death" (2009, 139; see also Harman 2004). This is a non-comparative account of harm, because whether an action or event is harmful to someone does not depend on how things would have gone for that person otherwise. Harman takes an action or event that puts someone in a bad state to be a sufficient condition for harm.

It's not clear, however, that everything on Harman's list is an intrinsically bad state. As defenders of Disability_N argue, disability is not *necessarily* an

intrinsically bad state. Given the plausibility of their arguments, Harman may be correct about harming states generally, but wrong in her application in the specific case of disability. Moreover, since Harman's account is only providing a sufficient condition for harm, she does not need to argue that *all* harming consists in intrinsic badness, which means her account need not completely explain the complex relationship between disability and well-being generally.

Seana Shiffrin (1999) provides a necessary and sufficient account of harming. She argues that harms are "certain absolute, noncomparative conditions" (123). Like Harman, Shiffrin lists disability, illness, injury, and death as examples of harm on her account. What all these conditions have in common as harm is they involve "conditions that generate a significant chasm or conflict between one's will and one's experiences, one's life more broadly understood, or one's circumstances" (Shiffrin 1999, 123). Harm interferes with autonomy. She states: "To be harmed primarily involves the imposition of conditions from which the person undergoing them is reasonably alienated or which are strongly at odds with what she would rationally will" (123).

As Ben Bradley points out, it seems to be a mistake to analyze harm generally in terms of rational willing because we want an account of harm that is ontologically neutral (Bradley 2012, 400). While it is true that people often cause many harmful acts or may be harmed, we also have a strong intuition that non-people may also cause harm or be harmed, such as if a shark attacks a fish. The harmful acts of people seem similar to harmful actions and events of non-people. Shiffrin's account, however, seems to imply that there is an important difference, because if a creature cannot rationally will things then it cannot be harmed. An acceptable account of harm needs to explain how *all* of these actions and events may be harmful. As Bradley suggests, one way to preserve ontological neutrality in an account of harm is to remove Shiffrin's use of "rational willing," and restate her idea of a non-comparative harm in the following way:

X is suffering harm if and only if an action or event causes X's being in state D that is intrinsically bad for X.¹⁸

If we think being in a non-comparatively bad state is necessary and sufficient for harm, then this account faces several serious problems generally and in its application to our evaluations of disability. First, it may not be able to account for the harm of death because, as many philosophers have explained, death itself is not an intrinsically harmful event.¹⁹ Second, this account seems to have trouble explaining why many disabilities, even when only understood as what Barnes calls a "local" harm, are harmful, as such harm is usually thought to invoke a comparison. For example, a dyslexic is at a severe disadvantage in a society that relies on reading and writing for educational success, but a dyslexic may suffer no disadvantage in an agrarian society where reading is not instrumentally important for a minimally good life. Dyslexia, then, is not a non-comparative harm. I think this point can be extended to many other disabilities.

For example, some wheelchair users can complete a marathon faster than abled bodied runners, but in a social environment with no curbs, ramps, and elevators, the same person's mobility will be extremely limited.

While there are several problems with linking disability to a non-comparatively bad state, several philosophers argue there is a more general reason to reject a non-comparative account as a complete account of harm (Klocksiesm 2012, 287; Thompson 2011, 439). This account of harm cannot classify why a reduction in benefits can still be a harm. Imagine that Martin is a world-class marksman, in part because of his excellent eyesight. He is predicted to win a gold medal in the biathlon in the 2018 Winter Olympics. While watching a 3-D Michael Bay movie, there is a mishap that reduces his vision to 20/20. Since having normal vision is not a non-comparative harm, a non-comparativist has to hold that Martin was not harmed by this event. However, it seems as if Martin was harmed because his reduction comes as a loss compared to how he was before the accident.

Since non-comparativist accounts of harm cannot account for many phenomena we classify as obviously harmful, we have reasons to reject it as being necessary and sufficient (or at least necessary) for a harmful condition. I think a non-comparative account of harm is best understood as a sufficient condition for our understanding of harm, and as such, it cannot explain exactly under what conditions most disabilities may or may not be a harm.

What is important about the non-comparativist account of harm is that it links disability to an intrinsic state of reduced well-being, such as suffering, pain, and so on. When the non-comparative account of harm is understood as a necessary and sufficient condition for harming states, it fails to explain the more complicated relationship between harms and benefits that seems to depend on some sort of comparison. There is a strong intuition that a person may be harmed not just by some intrinsically bad mental state, such as pain and suffering, but also by her possibilities, such as when we think it is bad for someone to happily dedicate her life to counting blades of grass. This idea can be captured when harm is understood *comparatively*. The basic idea is that someone may be harmed when things go worse than they otherwise could have been. We can understand a counterfactual comparative account of harm in the following way:

X is suffering harm if X is in state D such that X is worse off being in D than he would be if he hadn't been in D.²⁰

When thinking about disability, we could put the point this way:

For any disabled person X, X is harmed if X is worse off being disabled than she would be if she had not been disabled, assuming all circumstances are similar.

To put the point another way, assume your preferred theory of intrinsic value is true. Imagine two welfare trajectories for Jeff, A_1 and A_2 . In A_1 , Jeff is disabled.

In counterfactual situation A_2 , Jeff is not disabled. If Jeff would be better off in A_2 (the nearest possible world), then Jeff is suffering harm to some degree.

If the counterfactual comparative account is correct, then testimonial evidence about a person's intrinsic experiences is not enough to dismiss the claim that disability is a harmful condition.²¹ Critics of Disability_{SP} are correct to assume that "suffering harm" is to be its subject, but this is a mistake when thinking about the nature of harm itself. It is true that most often "suffering harm" is associated with experiences of pain and suffering. But, someone may suffer harm without being aware of it (Thompson 2011, 437). We want to distinguish what harm *is* from one of *its effects*. A person can be harmed not just by what they experience, but also by what reduces the quality of her possibilities.²²

To account for the comparative nature of harm, we could modify Disability_{SP} in the following way:

Disability_{SP*}: Disability is an intrinsically bad state because for any person X, X would be better off if she had not been disabled, assuming all other relevant circumstances would have been similar.

This principle is not necessarily devastating to arguments in favor of Disability_N because one could simply deny that Disability_{SP*} is true. Disability_{SP*} claims that if we were to remove a person's disability, while holding all other relevant life circumstances constant, we would increase her well-being.²³ This may be false because disability is also associated with other goods that might outweigh the (possible) good of not being disabled and this is true regardless of a particular person's mental state. The goods connected with disability might mean that in the closest possible counterfactual world removing the disability does not result in higher well-being. As I will explain below, this move will not work. If a defender of Disability_N accepts a counterfactual comparative account of harm, then it will no longer be possible to think of a harmful condition *just as* a state of intrinsic badness, which ultimately dooms the argument for Disability_N because harming states can be intrinsic, extrinsic, pro tanto, and all-things-considered.

Disability as Pro Tanto Extrinsic Harm

I think the argument for Disability_N is unsound. To reiterate, Premise 1 of argument for Disability_N holds, "If disability is a harmful condition, then it must be an intrinsically bad state because it negatively impacts a person's global well-being." Premise 1 is false because it wrongfully assumes a harmful condition is always linked to an intrinsically bad state that lowers or is likely to lower a person's global well-being. To understand why, I want to make a few further clarifications and distinctions about how someone can be harmed. Counterfactual comparative accounts of harms are *contextual*; they are sensitive to context. To show why, we need to distinguish between *intrinsic* and *extrinsic* harm, and

between *all-things-considered* harm and *pro tanto* harm (Klocksien 2012, 288–90; Bradley 2012, 391–94). Once we are clear on these distinctions, we will see why harmful conditions are not necessarily conditions that negatively impact a person's global well-being. Importantly, a counterfactual comparative account allows for more complexity in our thinking about our assessments of disability in relation to well-being.

A state of affairs S1 is *extrinsically* harmful for person P if P would have been better off if S1 had not occurred, and this is true because of S1's connection to some *other* state of affairs, S2. A state of affairs S is *intrinsically* harmful for person P if P would have been better off if S had not occurred because the mere occurrence of S constitutes harm to the person. All intrinsic harms are states of affairs that cause a person to be worse off to some degree. Extrinsic harms, however, are *derivative*. These harms are only harms in virtue of their connection to some other intrinsic harm.

Let me give an example to clarify. Often when talking about disability, people think that disability X *causes* harm Y. This seems to suggest that disability itself is not what is intrinsically harmful, but its *effects* are intrinsically harmful. Intuitively, many disabilities look to be an instance of extrinsic harm. Consider dyslexia. A dyslexic has problems processing the component parts of written language. A dyslexic's awareness of his impairment may cause him distress, pain, and anxiety. Dyslexia, then, is a type of extrinsic harm, and his suffering is the intrinsic harm. What is important is that we are worried about the extrinsic harm—dyslexia—only insofar as it is connected to some more relevant intrinsic harm, such as suffering, frustrated desires, or interference with some objective good such as the capacity to secure knowledge.

We also want to distinguish between *pro tanto* harms and *all-things-considered* harms. Sometimes when we make ascriptions of harmfulness, we mean that some event or state of affairs has some harmful feature X, but that harmful feature X may be outweighed by other features that are beneficial (Bradley 2012, 393). Ben Bradley suggests that a *pro tanto* harm may become an *all-things-considered* harm if and only if its *pro tanto* harms outweigh its *pro tanto* benefits (393). A *pro tanto* harm is often looked at in *isolation* from the other causal factors that determine whether some event or some state of affairs is an *all-things-considered* harm. Consider an open-heart bypass surgery. A person's chest is cut, cracked open, and her coronary artery is grafted. The coronary bypass comes as an *all-things-considered* benefit. The patient who has a medical need for it is, *all things considered*, better off having the surgery than she would be in the nearest possible world where no surgery took place. But there is a sense in which forcibly opening her chest and cutting her heart *is* harmful. It causes suffering and pain. And if cutting open her chest was not connected to a life-saving surgery, then it would be *all-things-considered* harmful; it would be an atrocious assault and battery! The harmfulness here is merely *pro tanto*; it is harmful only considered in isolation from the larger causal network of this person's life. Open-heart surgery

is a *pro tanto* harm because it is connected to suffering, and an all-things-considered benefit due to its role in a person's overall health.²⁴

Given these distinctions, it is clear why both Disability_{SP} and Disability_N are false. Both wrongfully assume that a harmful condition reduces someone's global well-being. With these distinctions, we can explain how a disability could be both a harmful condition and a benefit. A disability can be an extrinsic *pro tanto* harm because of its connection to suffering, frustrated desires, or interference with securing objective goods, but an extrinsic *pro tanto* benefit because of its connection to the positive effects associated with disability.

I want to argue why it is plausible to think some disabilities as instances of *pro tanto extrinsic harm*.²⁵ I call this Disability_{PTH}. We may think that some disabilities are a type of *pro tanto* extrinsic harm because they are connected to suffering or frustrated desires or may jeopardize a person's pursuit of basic human goods. Consider a person with dyslexia. Dyslexia can cause a person to suffer, frustrate her desires to read and write, and, if uncompensated, jeopardize a person's pursuit of important basic goods such as securing knowledge. Considered in isolation, dyslexia is a very serious extrinsic harm. It can cause a person to suffer immensely. Consider poet Philip Schultz's reflections on dyslexia:

The act of translating what for me are the mysterious symbols of communication into actual comprehension has always been a hardship to me. I often read a sentence two or three times before I truly understand it; I must restructure its syntax and sound out its syllables before I can begin to absorb its meaning and move on to the next sentence. And when I make the mistake of becoming aware that I am reading, and behaving in a way that enables this mysterious, electrically charged process to take place, my mind balks and goes blank and I become anxious and stop. (2011, 26)

Schultz's reflections show how dyslexia is an extrinsic harm; it interferes with his ability to read, and looks to be causally connected to intrinsic harm such as anxiety or suffering.

My argument that many disabilities, such as dyslexia, are best understood of as *pro tanto* extrinsic harm shows how it is possible for a harmful condition to also be a benefit in certain contexts. Dyslexia, when contextualized in the larger network of the causes and effects over a person's life, can be seen either as a neutral trait or as a net-benefit. Recent research into dyslexia connects it to certain advantages. Researchers suggest that the very same feature that causes problems with written language also means that dyslexics process information in ways that may be advantageous. Studies have demonstrated that dyslexics have heightened three-dimensional and spatial processing that allows dyslexics to be "big picture" thinkers in ways that many non-dyslexics tend to miss. Some researchers have argued these differences in information processing may explain why so many dyslexics do well as entrepreneurs, novelists, filmmakers, and scientists.²⁶

Serious reflection on the puzzling issue of how a disability can seem to be both a harm and a benefit shows our judgments concerning harm are *context-sensitive*.²⁷ When a young child suffers because he is dyslexic, we have the intuition that if he were not dyslexic he would not be suffering so much. But dyslexia may also have pro tanto benefits over the course of one's life. The same feature that causes him so much pain also lets him see the world differently. It may make one sensitive, a good listener and resilient. Thinking about the larger context of a person's life shows how dyslexia can be a benefit. If he were not dyslexic, he would not have developed these other skills. In these two cases, we are shifting our attention between different counterfactual situations—if he was or was not dyslexic. Dyslexia then may be an extrinsic pro tanto harm insofar as it caused him to suffer, and an extrinsic pro tanto benefit insofar as it caused him to develop other beneficial traits and skills. We often can only determine if it is an all-things-considered benefit or harm retrospectively. Sometimes we will only be able to make these assessments while looking at his complete life.

I would like to suggest that my point about dyslexia could be generalized to many other disabilities. It is usually thought that disabilities provide limitations or loss of certain basic functions that are instrumentally connected to socially important prudential goods. Conceptually, I think it may be possible to extend my idea of Disability_{PTH} to disability, as a class, because I think the following intuition is true: If a person has a smaller chance to receive some socially important prudential good, then that person is worse off than if she had a greater chance for securing the same prudential good. I don't have the space to defend the application of Disability_{PTH} to disability generally. My claim, however, is not merely a modest clarification, as it makes three important points. First, thinking clearly about the nature of harm allows for greater complexity in our assessments of disability in relation to well-being than can be captured by either Disability_{SP} or Disability_N. We ought not think that a disability is only harmful if it is connected to some sort of intrinsic disadvantage. Harmful conditions can be either extrinsically or intrinsically harmful, and they can be pro tanto or all-things-considered harmful. Second, particular conditions, such as dyslexia, may be better understood as a type of pro tanto extrinsic harm instead of merely neutral, as functional limitations and loss places these individuals at *risk* of being unable to secure important prudential benefits (see Shakespeare 2014). Moreover, this risk will be exacerbated when social practices and physical spaces are designed for non-disabled people to pursue their prudential goods.^{28,29} Third, I can capture the important point made by the neutralist without its problematic implications, which I'll explain next.³⁰

Further Prudential Implications

Above I argued that Disability_{PTH} is a better way to understand the complex relationship between disability and harm than standard or neutralist accounts. In this section, I want to give another reason why Disability_{PTH} has better

prudential and normative implications than Disability_N, as pro tanto extrinsic harms ought to be considered as types of harms that are proper objects for normative assessment and evaluation.

Premise 4 of the argument for disability neutrality holds that if a disability does not necessarily harm by reducing a person's global well-being, then it is better understood as a presumptively neutral trait. We have reasons to reject premise 4 because classifying pro tanto extrinsic harm as a neutral condition leads to unacceptable conclusions. Consider the following argument:

1. Harmful conditions negatively affect global well-being.
2. Almost all broken arms do not necessarily negatively affect global well-being.
3. Therefore, almost all broken arms are not necessarily harmful conditions.
4. If a condition does not necessarily harm by reducing a person's global well-being, then it is better understood as a presumptively neutral condition.
5. Therefore, almost all broken arms are best understood as presumptively neutral conditions.

Let's assume that very few broken arms negatively affect a person's global well-being. Even if that is true, it is an unacceptable conclusion to think that a broken arm is best understood as presumptively neutral, as it causes pain and suffering. As I explained in Section "Disability as Pro Tanto Extrinsic Harm," we ought to reject Premise 1 because *both* features that affect a person's global well-being and features that are instances of pro tanto extrinsic harm are sufficient for making a state a "harmful condition." Once we reject Premise 1, we also have similar reasons to reject Premise 4, as we are no longer committed to accepting the conclusion that breaking one's arm is neutral. We can now classify a broken arm as a type of harm instead of a neutral condition, and we have an obvious explanation why we ought to care about preventing or minimizing certain bad states, like broken arms, for reasons directly related to the badness of such states and not merely for idiosyncratic reasons, such as that one merely prefers non-broken-armness as one may prefer Diet Coke to Diet Pepsi or one hair color to another. What is important is that pro tanto extrinsic harms are a proper object for normative assessment.

Classifying many disabilities as instances of pro tanto extrinsic harm has important normative implications. Since many disabilities may be pro tanto harmful, normative principles of beneficence, non-maleficence, and justice ought to matter for our normative arguments about disability, and as such they play an important role in how we construct public policy and laws to help people with disabilities to live better lives. To be clear, my goal in this paper is not to provide any substantive conclusions about how these arguments work when applied to disabilities. That is a separate argument. My point is that Disability_{PTH} is not an impediment to using certain normative principles in moral arguments.

The third benefit of my argument is that Disability_{PTH} can also explain the important insights of Disability_N without its troubling commitments. It can explain why disabled lives are not necessarily intrinsically disadvantageous. It can allow for disability to be a neutral feature in a person's life, and in some cases can be an advantage. Unlike Disability_N, it can also explain why many disabilities are connected with pain, loss, and limitations in ways that matter practically and normatively. It can explain why we ought to revise many of our negative emotions about disability being a life not worth living, but it can also clarify why some feelings of concern may be justified.

Objections

In discussing Disability_{SP}, Disability_N, and Disability_{PTH}, I may have overlooked another account that better explains our reflective evaluations about disability and its relationship to harm. Adrienne Asch and David Wasserman (2010) argue that disability is better understood as an *absence of a good* rather than a harm (211). To explain why this is the case, they want to draw an analogy between disability and a lack of education or material resources, which are not inherently bad in themselves. They explain,

We regard the advent of near universal literacy and the dramatic reduction in poverty as good things, while recognizing that many lives would have gone just as well without them. Despite our desire to confer these goods on many of these people who lack them, we do not regard their absence in many circumstances as bad or harm. (Asch and Wasserman 2010, 210)

Asch and Wasserman think that, just as lack of education and material resources are not intrinsically bad, neither is disability. As emphasized previously, it is a mistake to think that a harmful condition necessarily entails some intrinsically bad state, as harmful conditions can also be extrinsic and pro tanto. It is unclear why an absence of some benefit cannot also be, in some cases, a type of pro tanto extrinsic harm. If an absence of a good causes someone to be worse off than they otherwise would have been, then it is harmful to some degree. Perhaps Asch and Wasserman mean that a person who lacks a good has less welfare than a person who has secured that good, but their welfare trajectory does not meet some threshold of intrinsic or extrinsic badness to some degree. However, there is no reason to think that poverty, lack of education, and disability cannot cause or be connected to intrinsic badness to some extent. These states look to be instances of pro tanto extrinsic harm, which may be outweighed, depending on the contexts, by their pro tanto extrinsic benefits.

Another potential problem with my argument is that it depends on the truth of the counterfactual comparative account of harm. I've only given a limited defense of this account, and some will think it false. I would like to bolster my limited defense by responding to two common objections to the counterfactual

account of harm. Asch and Wasserman dismiss the counterfactual account because “it treats harm simply as the opposite of benefit on a single metric of well-being, ignoring the complex and possibly incommensurable ways in which people do well or badly” (2010, 211).

As I have explained the counterfactual comparative account of harming in this paper, this objection misses the mark. Its distinctions between all-things-considered harm and pro tanto harm and extrinsic and intrinsic harm allow it to do justice to the complex ways lives can go well and poorly. As I explained above, a proper understanding of the concept of harm can show how some “supposed” harms can actually be a benefit or neutral when we consider a person’s welfare trajectory over his or her life.

Finally, there is a concern that once we think about how disability is connected to harm understood counterfactually, my account may be trivial since everyone could be harmed if things were different. According to the counterfactual comparative account, a person suffers harm if she is made worse off than she otherwise would have been. Does this imply that if in some possible world W_2 a person could move objects with her mind, she is harmed in W_1 ? Our intuition is that while some disabilities may be pro tanto harmful, lacking the power of telekinesis is not. What, however, explains the difference between the former and the latter? Some people argue that the former but not the latter is a type of harm because disabilities are deviations from normal biological functioning for the species, but telekinesis is not. This argument, however, is problematic because it is generally understood that there is no intrinsic normative importance to biological normality, as biological norms are merely arbitrary.

This objection, however, is getting at something important about our evaluation of disability itself and its connection to well-being. Unless I can specify how some biological properties relevant for disability are connected with well-being, then it may turn out that disability is so inclusive that everyone may be disabled under some counterfactual situation, which seems to render the idea of a disability empty. I want to sketch a possible solution to this problem. Guy Kahane and Julian Savulescu (2012) argue that the important normative difference between disability and telekinesis can be explained by statistical normality (321). Statistical normality is just what is statistically normal for a given population. While statistical normality has no intrinsic normative importance, it can matter derivatively for, at least, two reasons (Kahane and Savulescu 2012, 323–26). First, the concept of harm plays an important role in our causal explanations. Since we want to know who is likely to have reduced well-being, background assumptions of what is statistically normal are relevant in our explanations of why a person with a disability may be harmed, but a person who lacks telekinesis does not. Second, our causal explanations are relevant for generating moral reasons for action. Statistical information on how some conditions may affect well-being is often combined with a further normative principle that generates moral reasons for actions, such as giving priority to the worse off. Even if there is no principled reason to think that disability and the lack of some

super-ability could be potentially harmful, as both conditions could affect well-being, a baseline of statistical normality is derivatively important for how we think about the causes and our responses to conditions that may affect well-being. Although more work has to be done to defend this baseline in our thinking about disability and harm more generally, my point is that there is a principled reason to think that such a baseline could be defended in a way that does not render the counterfactual account of harm or our evaluations of disability empty.

Concluding Remarks

In conclusion, we have several reasons to reject both Disability_{SP} and Disability_N as capturing the complete complexity of disability in its relation to well-being. Disability_{SP} falsely assumes that the mere occurrence of disability must either directly lower a person's well-being or is likely to lower a person's global well-being. Disability_N falsely assumes that if a feature can provide some benefits then it cannot properly be classified as a harm, and a feature can only be a harm if it affects a person's global well-being. I argued we have reasons to reject both of these positions because they fail to properly explain the more complex nature of how disability may harm. Moreover, I also argued that Disability_N has implausible prudential and normative implications. Disability_N, however, is trying to get at a deeply important truth about disability. It rightfully defends the point that disability, as a class, is not intrinsically bad, and disabled lives are worth living. While I think it nicely captures the positive experiences of disability, it minimizes the hardships disability can cause, and why disability status matters in the application of normative arguments.

I would like to end with a note of personal reflection. As I reflect on my own life as a dyslexic, I often wonder what I would think and feel about having a dyslexic son or daughter.³¹ On one hand, I would be concerned because I know, firsthand, how dyslexia can cause pain and suffering, and how it puts a child at risk for educational failure. Conversely, I know my son or daughter would in all likelihood be just fine, especially, and more so, in a just society. I think this perspective is common amongst many people with disabilities. Dan Moller (2011) remarked that we are of "two minds" about disability. I think his intuition is approximately correct, and thinking about many disabilities as instances of pro tanto extrinsic harm does a better job capturing this idea than both our standard and revisionary evaluations of disability.

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Notes

- ¹I'm discussing disability for an *identifiable* individual. My analysis is not meant to apply to non-identity problems, such as cases where a parent decides to have a child with an impairment rather than a child without one. The issue is whether the parent's decision can be condemned, even if the child that comes into existence will have a worthwhile life. See Derek Parfit, *Reasons and Persons* (Oxford: Oxford University Press, 1984), Ch. 16.
- ²The fact that disability cannot be readily altered raises an important question concerning the relationship between disability and disease, as many diseases also cannot be readily altered. This means that any disease that is long-lasting will be considered an impairment, but diseases that are not long-lasting, such as a cold and flu, will not count as an impairment. Thus, many, but not all, diseases may count as disabilities.
- ³Defenders of a strong social model of disability can think of my argument as applying to impairments.
- ⁴Some may object that using dyslexia is distortive because disability covers a wide range of impairments, such as a static condition that involves limited or absent functioning, a disease process that involves pain and suffering, the absence of some sensory function, and psychological limitations (Asch and Wasserman 2014, 142). As I hope will be apparent from my argument, thinking about many disabilities as types of pro tanto extrinsic harm is consistent with using individualized normative responses tailored to different types of disabilities.
- ⁵Feinberg (1984) talks about one type of "harm" in the following way: X harms Y if and only if X wrongs Y (34–35). This is not the sense of harm I will be talking about in this paper.
- ⁶This point is not limited to prioritarianism. How we understand disability, as an evaluative notion, will have both direct and indirect implications for any question of justice that concerns issues of well-being.
- ⁷There is considerable disagreement about the nature of well-being. Hedonist theories argue that well-being consists of happiness and not suffering. Desire fulfillment theories argue that our well-being is increased when our desires are fulfilled, and our well-being is reduced when our desires are frustrated. According to an objective theory of well-being, there are certain things, such as knowledge and virtue, and so on, that are good or bad for people, whether or not these people would want to have the good things, or to avoid the bad things (Crisp 2013). See J. Griffin, *Wellbeing* (Oxford: Oxford University Press, 1986). For thoughtful discussions applying specific theories of well-being to disability, see Schramme (2014) and Asch and Wasserman (2014).
- ⁸This is not to deny that *some* disabilities may be tragic, but from that fact you cannot infer anything about disability as a class.
- ⁹In this paper, I will assume, without argument, that disability is a complex phenomenon that involves both stable biological and/or mental properties of a person and environmental barriers. The idea is that both biological and/or mental properties and environmental barriers are, at minimum, jointly sufficient for disability, which causes some personal or social limitation. This position is not without objectors from the strong social model of disability, but I take this to be the standard view even amongst most disability rights advocates now. The idea that individual impairment and the social environment are jointly sufficient for disadvantage has been adopted by the World Health Organization's International Classification of Functioning, Disability and Health.
- ¹⁰This is how disability is commonly understood in philosophical literature. The editors of a recent volume on disability ask whether disability is "intrinsically associated with deficiency or defect in the value of life" (Bickenbach, Felder, and Schmitz 2014, 7). Adrienne Asch and David Wasserman (2010) ask, "In suggesting that prenatal selection against disability typically reflects stigma-driven stereotyping, we have not had to resolve the issue of whether impairments, or certain impairments, are inherently disadvantageous" (201). Guy Kahane and Julian Savulescu (2009) define disability as a "stable physical or psychological property of subject S that leads to a reduction of S's level of well-being in circumstances C" (25).

- ¹¹ Harris's point may be consistent with an objective theory of well-being because it may be rational to want what is objectively good for you. I'm only using Harris's basic idea here to help illustrate Disability_{SP}.
- ¹² I would like to thank the anonymous referee who helped clarify this point for me.
- ¹³ Johnson, Harriet McBryde (2003, February 15). "Unspeakable Conversations." Retrieved December 28, 2014, from <http://www.nytimes.com/2003/02/16/magazine/unspeakable-conversations.html>
- ¹⁴ Barnes is trying to explain and justify what she takes to be a common experience among people with disabilities. For example, she quotes Rebecca Atkinson who states, "If this experiment of going blind has taught me anything, it's that what you lose in one place you gain elsewhere, and while a blind life is different than a sighted life, it is not lesser" (Barnes 2009a, 342, quoting Rebecca Atkinson, "Do I Want My Sight Back?" *The Guardian*, 17 July 2007).
- ¹⁵ Barnes states, "A feature counts as a negative difference-maker only insofar as it makes a person non-standard in a way that they will be 'worse off' because of it. But this notion seems clearly connected to overall quality of life" (2009a, 342). Barnes's idea of a "negative difference-maker" seems equivalent to a "harmful condition" as used by defenders of the standard model of disability, since both are understood to be a feature that reduces a person's well-being. In this paper, I assume the two ideas are equivalent.
- ¹⁶ Barnes (2009a, 338).
- ¹⁷ Whether a failure to receive goods and services is unjust depends on a further argument about a proper conception of distributive justice.
- ¹⁸ I'm following Bradley here (2012, 400). Like him, I'm not suggesting that Shiffrin would agree with this modification.
- ¹⁹ I don't have the space to discuss this problem in detail. See Nagel (1991), Feldman (1991), Bradley (2004).
- ²⁰ This is not to suggest that a counterfactual comparative account of harm entails some objective theory of well-being. A comparative account of harm does not entail any substantive theory of intrinsic goodness. Even if we assume a hedonistic theory of well-being as true, testimonial evidence alone does not establish whether or not someone is harmed. For a hedonist, the question of whether person P is harmed depends on comparing the person's current state to some relevantly similar counterfactual world to see if she would be happier or would suffer.
- ²¹ Although I will try to provide a brief defense of the counterfactual account of harm, given the space provided I cannot give a complete defense here. I will return to this point later in this paper. In Section "Objections," I defend the counterfactual account against some objections. For a general defense of the counterfactual account of harm see Klocksiesm (2012) and Thompson (2011). For a rejection of the counterfactual account of harm see Bradley (2012).
- ²² Thomas Nagel (1991) puts the point in the following way: "A man is the subject of good and evil as much because he has hopes which may or may not be fulfilled, or possibilities which may or may not be realized, as because of his capacity to suffer and enjoy" (7).
- ²³ Or according to the weaker understanding of Disability_{SP}, it is likely we would raise her well-being if we removed her disability.
- ²⁴ Harman's non-comparative account of harm appears to be an account of pro tanto intrinsic harm. She contrasts her account with all-things-considered harm (2009, 141). A defender of the counterfactual comparative account will point out that such an account of harm is not a competitor to Harman's, as they are about different ways a person can be harmed. A defender of the counterfactual comparative account can agree that events that cause intrinsically bad states are pro tanto harmful. For more on this point of comparison between comparativist and non-comparativist accounts of harming, see Bradley (2012, 399).
- ²⁵ This is not to deny that some disabilities may be intrinsically harmful.
- ²⁶ "The Advantages of Dyslexia" (n.d.), retrieved December 28, 2014, from <http://www.scientificamerican.com/article/the-advantages-of-dyslexia/>; and A. Paul. "The Upside of Dyslexia," *The New York Times* (February 4, 2012), retrieved December 28, 2014, from <http://www.nytimes.com>

com/2012/02/05/opinion/sunday/the-upside-of-dyslexia.html. I'm not assuming that all disabilities are connected with beneficial traits. Living with a disability, however, may have beneficial consequences. It may allow one to develop resilience.

- ²⁷ Kahane and Savulescu (2009) also argue that disability is a harm that is best understood counterfactually. There are several important differences between their account and mine (24). First, they are stipulating that disability *just is* a reduction of well-being in certain circumstances. I'm trying to explain the relationship between harm and disability. Second, they are trying to provide a complete conception of disability, which is not my goal. Third, their account is designed to tell us if a specific person is disabled (27–28). My concern, while similar, is to explain how a specific disability or disability, understood broadly as a social classification, can be a harmful condition.
- ²⁸ Since a society's social and physical institutions are usually designed for people with statistically typical traits, a disabled person's ability to sustain important functions will be at risk (see Wolff and De-Shalit 2007, Chapter 3; Nussbaum 2006). For example, when most computers switched from DOS to Microsoft Windows, those computers were no longer compatible with voice output software. The effect of this technological change meant that people with visual impairments could no longer use their computers for productive activity (Silvers 1998, 107). For this reason, any acceptable normative response to disability must focus on social accommodation and modification (see Amundson 1992; Silvers 1998).
- ²⁹ An anonymous referee suggested that a person with a disability might be harmed if she is put in a position to adapt preferences to avoid internalizing harm. The concern is that it is harmful for one to exist in an environment where he or she is forced to change his or her preferences to avoid constant disappointment. As Tom Shakespeare has pointed out it is not easy to distinguish between the effects of an impairment and the effects of disability more generally (2014, 24–25). A person may suffer a reduction in well-being because she experiences social barriers which make her life more of a struggle, and a person may suffer because she is distressed at how the disability itself may cause her limitations. As a result, she may adjust her preferences according to the options available to her. Although I cannot respond to this interesting point in detail, since my account allows for more complexity in our assessment of disability and well-being generally, I can explain why such adaptations may be, in certain contexts, harmful, as they may reduce a person's well-being. I would like to thank the anonymous referee for bringing this interesting point to my attention.
- ³⁰ Thomas Schramme makes an important argument concerning our evaluation of disability and harm (2014). While dismissing the view that disability is necessarily harmful, he argues that disability may not be seen as an absolute non-comparative harm because disability may be an important part of a person's identity. In order for a disability to be a non-comparative harm, it must be something that a person cannot endorse or see as part of herself. He states, "Now to be absolutely harmful, a condition need not be experienced as harmful, that is, painful, but it needs to be something the affected person cannot endorse or see as part of herself; it is something the person wants to be rid off" (Schramme 2014, 87). Instead, disability is an essential part of her *identity*. He states, "well-being is closely related to one's identity, and it is therefore to be expected that once a disability gradually becomes 'internalized', its absolute harmfulness also gradually decreases" (Schramme 2014, 88). From this, however, Schramme does not deny disability may be a type of comparative harm. Since Schramme's important argument does not deny that disability may be a comparative harm under certain conditions, our accounts are compatible, as we are focusing on different aspects in our evaluations of disability. His account rejects the idea that disability is necessarily a type of non-comparative intrinsic harm, and my account focuses on whether some disabilities are better understood as a type of comparative pro tanto extrinsic harm.
- ³¹ Obviously, my dyslexia has nothing to do with the truth of my arguments. I bring this up because the "disability experience" is diverse. I would like to think that all thoughtful individuals, whether disabled or abled, can help systematize these experiences in ways that are philosophically important.

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