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Original Research

Take Pity: What Disability Rights Can Learn from Religious Charity

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Disability rights advocates have traditionally denigrated charity as politically counterproductive and inherently demeaning. This article argues that this perspective mischaracterizes charity of a religious kind. Religious charity, I argue, must be understood immanently, through an exploration of the virtues cultivated in particular religious organizations. I consider two Catholic charities: L'Arche, a community for intellectually disabled people, and the end-of-life care facility Our Lady of Perpetual Help Home. At each organization, individual acts of charity are emblematic of an underlying virtue that I call caritas or charity-love. This transforms them into gestures that advance goals that are consonant with those of the disability rights movement. In the case of Our Lady, this is even true of pity, perhaps the most despised emotion of the disability rights tradition. But while disability rights advocates have characterized pity as essentially devaluing disabled people, at Our Lady, it is an emotion that freely circulates, undoing hierarchical distinctions between ability and disability, and even human and divine. This redefined notion of pity—which I term misericordia—can, I conclude provide a new foundation for disability politics, one that radicalizes the goals of the disability rights movement, while also positing objectives that go beyond legal compliance.

KEYWORDS: *charity*; *disability*, *end-of-life care*, *religion*, *virtue ethics*

I. INTRODUCTION

There is nothing more sacred, from a disability rights perspective, than the rejection of charity. "Charity," from this perspective, refers to the giving of material resources to disabled people because of the presumption that their disability leaves them in perpetual need. This presumption—which disability rights advocates have found in sources from "March of Dimes" pledge drives to Jerry Lewis's telethons—has been criticized for labeling disabled people as intrinsically inferior to their able-bodied counterparts, while ignoring the contribution of societal discrimination to their impoverishment (Shapiro, 1994, 41–73; Drake, 1996; Scotch, 2009, 31; Stramondo, 2010; Campbell and Oliver, 2013). It is against this understanding of charity that disability rights advocates have defined their own project as one that gives disabled people equality through political rights offered by the state. This rejection of charity is thus a kind of originary gesture of the disability rights movement.

This rejection of charity is, in many ways, correct. Yet, this article builds on recent scholarship that has argued that charity has a role in disability rights (Shakespeare, 2006, 153–66; Masters, 2016). It does so by examining charity of a religious kind. Such religious charity has not been addressed in this more recent scholarship. It should be considered on its own terms, within the logic of the particular organizations that provide it. In this article, I will do so by drawing on the philosophical tradition of "virtue ethics" (Hursthouse, 1999; Russell, 2013). This tradition understands communities to be oriented toward the cultivation of underlying virtues that organize institutional structures and give meaning to individual practices, relationships, and identity (Asad, 1987; Mahmood, 2011).

I will consider, in particular, two charitable Catholic organizations: L'Arche, a community for intellectually disabled people, and Our Lady of Perpetual Help Home ("Our Lady"), an end-of-life care facility. Both organizations cultivate a virtue classically termed *caritas*. *Caritas* refers to an expression of love that, though modeled on the love of God for humanity, is continually reenacted in each organization's charitable acts. Such acts do not, however, just flow from abled-bodied people to their disabled counterparts; they are two-way and form part of a relationship in which the categories of "ability" and "disability" are ultimately undermined in favor of a shared humanity. In radically subverting hierarchies that devalue disabled people, *caritas* transforms "charity" into a practice compatible with disability rights.

At Our Lady, *caritas* is accompanied by an emotion that, from a disability rights perspective, might seem even more problematic: *pity*. In disability rights literature, pity is taken to be the affect that enforces charity's most demeaning qualities; viewed as objects of pity, disabled people are trapped in an eternally dependent state that seemingly justifies their continued marginalization (Shapiro, 1994, 12–40; Stramondo, 2010). But this is not how "pity" operates at Our Lady. "Pity," like the *caritas* that underpins it, is a mutually circulating emotion that undoes the ability/disability divide. By doing so, pity functions not only as an emotion, but also, as Joseph A. Stramondo has put it, a "power relation" (2010, 122); but unlike the forms of "pity" that Stramondo focuses on in his insightful critique, "pity" at Our Lady is a power relation that undoes existing anti-disability hierarchies, creating an egalitarian community based on the universality of suffering. Thus reconstituted, this unique form of religious pity—which I will refer to as *misericordia*—can form a part of, and strengthen, the disability rights movement.

It is as a contribution to this movement that I understand this article's ambition. My goal here is not a deep, conceptual analysis of the discourse of "charity" in Western philosophy. Rather, it is a targeted intervention in the manner in which charity has been understood within the disability rights movement. In this movement, charity, religion, and pity, have been frequently entangled, forming a network of concepts in opposition to which disability rights advocates have framed their goals. By presenting the case of Our Lady, I hope to show that this opposition need not—and should not—be absolute.

That it is often considered to be so has, I believe, very negative consequences. It detrimentally limits both the manner in which disability rights advocates imagine their goals, and their ability to form the political alliances necessary to achieve them. The movement's misunderstanding of charity thus significantly impedes the work of disability rights. More broadly, it limits our understanding of disability *politics* by limiting politics to the realm of rights. But though the solution that I arrive at is, perhaps, counterintuitive from a disability rights perspective, the methodology that I use to arrive at it is less so.

In his critique of the philosophical discourse of "pity," Stramondo has emphasized the need for the concept to be considered in the immanent "context of social power relations," rather than the putatively transcendental one of abstract emotionality. But while such an analysis of "pity" will often affirm existing disability rights critiques, it also opens a space for different possibilities.

"There may be instances where pity is not a harm," Stramondo clarifies," but identifying such instances requires an analysis of the otherwise "obscured power relations" that give the concept its meaning (2010, 125–6). Here, through an analysis of such power relations, I hope to show that there are situations in which both "pity" and "charity," beyond avoiding harm, can advance and expand the project of disability rights. To develop this potential, however, it is first necessary to understand why disability rights advocates have treated them—understandably and, in large part, correctly—with suspicion. I thus begin by considering the disability rights critique of charity.

II. THE DISABILITY RIGHTS CRITIQUE OF CHARITY… AND ITS LIMITS

To the reader just getting introduced to the subject, it may be surprising that the disability rights movement is opposed to charity. After all, it would seem that disability rights and charity begin at the same starting point: the materially degraded status of disabled people. In the United States, disabled people account for more than half of those in long-term poverty, despite of making up approximately 12 percent of the working-age population. Their rates of both poverty and unemployment are each more than double those of able-bodied people (National Council on Disability, 2017). This high level of poverty is recognized by advocates of disability rights, as well as those of charity. And each group aspires to alleviate it, albeit through different means: political rights versus charitable donations respectively. But these means would not necessarily appear mutually exclusive. Why, then, do disability rights advocates oppose charity?

The answer is, to a degree, historical. Prior to the advent of disability rights, charity was the dominant social rhetoric for recognizing disabled people, both materially and interpersonally. This recognition took forms that were distinct. There was the spectacular charity of telethons and the poster children of the March of Dimes; both privately and publicly funded forms of custodial institutions; and the work of both local and national religious groups (Shapiro, 1994, 41–73; Longmore, 2015; Rose, 2017). As I am arguing here, such forms of charity were distinct. Yet, importantly, the disability rights critique generally grouped them together, finding in secular and religious charitable organizations a common inadequacy.

This inadequacy did not lie in the recognition by charitable organizations that disabled people lacked material resources. It lay, rather, in the explanation that they generally gave for this lack. Charitable organizations argued that it was a natural byproduct of disability, which they viewed as a medical condition that was inherently impairing (Shapiro, 1994, 41–73; Drake, 1996; Longmore, 2005; Campbell and Oliver, 2013). This view came to be called, by scholars in the field of disability studies, the "medical model" of disability (Oliver, 2013). Disabled people, in this view, were poor because their disabilities made it biologically impossible for them to work. And they would never be able to work so long as their disabilities remained incurable. Without a medical cure, disabled people could be given resources, but they would never be able to generate resources on their own. They would have to depend on charity forever.

Disability rights advocates rejected this understanding of why disabled people lacked resources. Rather, they argued that it was a result of disability discrimination, which they called "ableism" (Wolbring, 2008). In many ways, ableism was similar to other kinds of discrimination, such as sexism and racism. It could be both individual and structural, and took forms that were, in some cases, easily identifiable, and in others, quite counterintuitive (Campbell, 2009). But, though there were—and still are—debates within disability rights about the meaning of "ableism" (Bagenstos, 2014), there was a broad consensus that ableism was the root cause of the material inequality facing disabled people. This view came to be called the "social model of disability," because, in contrast to the medical model, it viewed the negative aspects of disability to lie not in biology, but in society (Oliver, 2013).

But charitable organizations—both then and, disability rights advocates continue to argue, now—rarely recognize these social origins. By viewing the materially degraded status of disabled people as inherent to their disabilities, they create the impression that only a cure would allow them to work for themselves. This obscures the ableism at the root of disability inequality (Reaume, 2014). This, in itself, is problematic.

But charity, disability rights advocates argue, does something even worse. It is predicated on converting this already unjust material inequality into a *moral* one. This conversion is an inherent feature of charity, which is considered in disability rights literature to have the structure of an exchange. The charitable giver's material diminishment comes in exchange for a sense of their own moral superiority over the recipient (Longmore, 2005, 506); this sense is personal, but also social, as their charitable giving leads them to be recognized by others as morally good. Such moral uplift is structurally denied to disabled recipients, who by virtue of their impoverishment, are unable to give (Shapiro, 1994; Longmore, 2005; Reaume, 2014). Their perpetual state of moral inferiority can be rationalized in different ways: either through the idea that their disability is a product of their own moral culpability or, alternatively, because they are viewed as guiltless infants (Joeckel, 2006; Stevenson, Harp, and Gernsbacher, 2011). Either way, they are doomed to a seemingly inherent state of inferior moral worth: they lack, by virtue of their disability, the ability to ever be "good people."

In charity's circular logic, this lack of moral status retroactively justifies disabled people's initial lack of material resources. They lack material goods *because* they were morally inferior all along. Charity thus functions as a perfect system to justify disability oppression. By bestowing on able-bodied people moral superiority, it justifies the immiseration of disabled people.

All of which might be acceptable, if charity paid well. But it doesn't. Its material elevation is insufficient to lift the recipient from poverty (Longmore, 2005; Reaume, 2014). Rather than uplift, charity maintains its "beneficiaries" alive in a state of degradation. This is frequently true in cases of disabled people as individuals. But it is always true of disabled people as a group. Individual disabled people may, on occasion, receive sufficient material benefits from charity that they can be elevated, perhaps even becoming charitable givers themselves. But this individual elevation comes to justify the continued maintenance of disabled people, as a population, in the inferior state of charitable recipients (Shapiro, 1994; Longmore, 2005; Reaume, 2014).

This is why it is necessary to move from charity to *rights* (Fleischer and Zames, 2012; Scotch, 2009). Rights, unlike charity, establish relationships of equality. They are predicated on the notion that everyone is entitled to the same protections from the state. Disability rights, in particular, provide disabled people with the resources necessary to enjoy shared social goods, and to earn their own living through labor. This access is part of a moral transaction: the equal moral dignity of everyone comes via a redistribution of material resources. This transaction does not elevate abled-bodied people over disabled people, but rather emphasizes that no distinction between them exists (Drake, 1996; Reaume, 2014; Longmore, 2015).

Such equality would, in theory, make charity materially unnecessary. But, on a deeper level, it would make it conceptually impossible: there can be no moral elevation if it is taken for granted that able-bodied and disabled people are fundamentally the same. In this sense, the relationship of charity and rights is—in spite of their seeming compatibility—necessarily one of opposition, not coexistence. That charitable organizations continue to exist—and thrive—today indicates that, whatever the success of the disability rights movement, there is still much work to do (Drake, 1996; Burrows, 2003; Rickell, 2006).

This is the disability rights critique of charity. But though broadly shared by disability rights advocates, its support is not universal. Most extensively, Tom Shakespeare has argued that the disability rights movement will always need charity. The movement has typically understood equality to exist in labor. But there will always be disabled people who, no matter what degree of accommodation, cannot work (Shakespeare, 2006, 162). And charity itself need not be anathema to the ideals of disability rights. Through a survey of charitable organizations in the United Kingdom, Shakespeare finds that such organizations recognize and attack disability discrimination, leading them to "become more like disability rights groups" (2006, 161). For these reasons, Shakespeare finds the disability rights critique of charity to be "outdated" (2006, 162).

Shakespeare profiles charities that are largely secular. This raises the question of how a foundation in religious observance might change the nature of charity from a disability rights perspective. This question is important, first, because many charities for disabled people are religious and, second, because the disability rights movement has itself been generally suspicious of religion, in part because it associates it with the charitable model (Hutchinson, 2006). Prior to exploring how religious charity can subvert this model, I will first explain why this suspicion of religion is somewhat misplaced.

III. THE DIFFERENCE THAT RELIGION CAN MAKE

Religion has generally not been a central concern of the disability rights movement. Major histories of disability rights give little attention to the role played by religious organizations (Shapiro, 1994; Fleischer and Zames, 2012; Scotch, 2009). And disability studies—the academic field traditionally representative of the larger disability rights movement—has generally not considered the study of religion to be one of its central fields (Berger, 2013; Goodley, 2016; Imhoff, 2017); indeed, of the forty chapters of the *Disability Studies Reader*, not one examines the relationship of disability and religion (Davis, 2016).

This lack of inclusion is not coincidental. Much in the same way as with regard to charity, the disability rights movement is often represented, by its proponents, as being a progressive movement away from religion (Shapiro, 1994; Fleischer and Zames, 2012; Scotch, 2009). Prior to the advent of disability rights, religion was a dominant framework for understanding disability. One prominent manner in which Judeo-Christian groups viewed disability was as a sign of "divine punishment or, more generally, disfavor" (Joeckel, 2006, 326). The resulting "divine-disfavor model," as Samuel Joeckel puts it, pathologized disability, while blaming disabled people for a diminished state that was, in reality, largely a result of ableism. It is entirely understandable that the disability rights movement reject this model and those religious groups that promulgate it.

Nevertheless, the equation of religion with the "divine-disfavor model" is simplistic. Scholars have studied numerous examples of religious individuals and groups that balance the "divine-disfavor" model with more positive conceptions of disability, some even eschewing the "divine-disfavor model" altogether (Friedner, 2014; Hinojosa, 2018; Swinton, 2017). Such examples have long predated disability rights (Belser, 2015; Masters, 2016). But, since the advent of the disability rights movement, more religious groups of various denominations have incorporated disability rights into their respective theologies (Reinders, 2008; Elliott, 2018). The very success of the field of disability theology is an indication of the extent to which academic theology has moved beyond the "divine-disfavor model"—and can continue to do so.

This movement should allow for a greater willingness to include religion in disability rights. Such engagement can bring significant benefits. These benefits are in part political: religious people make up the vast majority of the world's population, a trend that researchers expect to grow in the future (Pew, 2017). Most of these people engage religion through participation in particular religious organizations, including houses of worship, employers, and charities. A richer engagement with these organizations could create a significantly greater constituency to advance disability rights. But religious organizations can do more than just enhance the disability rights movement's political power. In order to understand this, it is necessary to consider what such organizations—broadly speaking—do to disability.

Religious organizations redefine disability, situating its meaning within their particular theological framework. Such redefinitions do not necessarily challenge the "medical model" of disability, which views disability as an inherently negative biological condition that should be cured (Drake, 1996a). Indeed, as disability theologians have argued, religious groups often rely on the cure of disability as proof of God's existence; religion, in such conceptions, though distinct from medicine, implicitly reinforces the medical model by casting "cure" in salvific terms (Eiesland, 1994; Iozzio, 2011; Masters, 2016). But, though they have frequently not done so, religious groups *can* potentially challenge the medical model from a particularly powerful perspective because their theological framework rejects this model's secular presumptions. Because it begins at a remove from these assumptions, religious organizations are arguably more closely aligned with disability rights than their secular counterparts, particularly those in the biomedical sciences.

Religious models of disability are not identical with the secular version of the "social model" of disability. But because they frequently begin with a basic questioning of medical authority, they have the potential for a broad common ground. This shared critical distance from medicine can create the possibility of new political alliances in defense of the social model (Elliot, 2018). It can also highlight ways of understanding disability that, though not the social model, are themselves valuable to both individual disabled people and, more broadly, the disability rights movement because of their emphasis on the essential equality of disabled people.

Through this emphasis, religious organizations can enable the valorization of people whose significant disabilities can, at times, even render them excluded from the disability rights movement itself: for example, as I mentioned earlier, some intellectually disabled people have been implicitly excluded from the disability rights movement because they will not be able to work paying jobs even if given a high level of accommodation (Shakespeare, 2006, 162; Reinders, 2008). At the same time, religious groups can also enable a richer experience of those disabilities that are normally considered to be subject to disability rights. In this sense, religion can support, even enhance, disability rights by expanding our understanding of what "disability" is.

One example of such an expansion is provided by religious charities for disabled people. Charitable religious organizations are ideal examples of this work of religious redefinition. Such organizations do not simply justify the provision of charity in religious terms. They use their theology to transform the very meaning of "charity," in the process wresting it from the ableist model that has, correctly, been criticized within disability rights. They can be compatible with disability rights, and, in fact, can provide goods for disabled people that disability rights do not.

A useful philosophical tradition for examining their potential is virtue ethics (Hursthouse, 1999). Virtue ethics has been productively applied to religious communities in order to understand the daily work of moral formation that participation in them entails (Asad, 1987; Mahmood, 2011). Studying religious charities from this perspective would entail considering how charitable acts cultivate underlying virtues that are central to a particular organization's identity. These virtues are essential for understanding the very meaning of "charity," and such understanding requires an immanent analysis that is cognizant of the underlying power relations that Stramondo identifies as central from a disability rights perspective (2010, 125–6). I now consider a charitable organization that has been the main focus of scholarship on disability and religious charity.

IV. "CRIPPING" CHARITY THROUGH CARITAS

L'Arche is a network of communities in which intellectually disabled people live alongside able-bodied members. These communities are bound by relationships of friendship (Reinders, 2008, 350–74; Greig, 2015). As friends, L'Arche members are not organized by a strict dichotomy between disabled and able-bodied people. Rather, they undo this dichotomy to find a new way of being in community. As the theologian Stanley Hauerwas writes: "L'Arche offers an imaginative portrayal of what a purposive community might look like in which the mentally handicapped serve and are served" (2012, 20).

This relational undoing of the disabled/able-bodied dichotomy is based in a rethinking of human nature. This rethinking asserts the primacy of *weakness*. At L'Arche, weakness is not an aberration to be eliminated. It is rather the defining feature of humanity—one to be nurtured. In the words of theologian Matt Edmonds, the organization "operates on the principle that to be visibly broken is not an obstruction to humanity or divinity, but is in fact the true path to both" (Edmonds, 2011, 185). This view differs starkly from that of liberal individualism which, because of its focus on independent rationality, excludes intellectually disabled people (Swinton, 2012, 5). Thus, L'Arche does not simply try to integrate intellectually disabled people into the dominant liberal conception of humanity. It rather proposes what theologian Elizabeth Antus calls a "discourse of expansion" in which "persons with disabilities reveal more fully the truth of what it means to be human and thus reside at the center rather than the margins of theological anthropology" (2013, 246).

This discourse subverts the conception of charity that, correctly, draws the ire of disability rights advocates. L'Arche does not establish a unidirectional relationship between the giver of charity and its recipient. On the contrary, the community's supporters emphasize the extent to which the "gift" given comes from intellectually disabled people themselves (Spink, 2006, 10, cited in Edmonds, 2011, 185). By doing so, they create a new meaning of charity: one based in a fundamental underlying equality that is intrinsic to who we are. This meaning can be helpfully clarified with the language of "virtue." Charity at L'Arche is not primarily a practice. It is an underlying character trait that the organization seeks to cultivate in all its members, disabled and non-disabled alike. This trait is not morally neutral. It is ethical in that it enacts what is good for the organization's members and, more fundamentally, enacts a relationship to the highest good: the love of God.

In this sense, to categorize what happens at L'Arche as "religious charity" is in a way misleading. The adjective "religious" does not just specify a particular articulation of the existing definition of "charity"; it refashions this definition, converting charity from a unidirectional giving into a bond of friendship accessible to all. Religious "charity" de-naturalizes the given meaning of the term, thwarting both the medical and the "divine-disfavor" models. In the process it creates a conception of charity true to what Anne Masters has argued is the "original" meaning of the term: a fundamental expression of *love* (2016, 225). It is this conception of charity-love that I refer to with the term *caritas*.

Caritas is the virtue that L'Arche cultivates and, as cultivated there, it is an alternative to the forms of charity that have been criticized by disability rights advocates. *Caritas* provides an implicit critique of existing charities, without requiring the abandonment of the charitable project itself. Indeed, one might go so far as to say that *caritas*, as cultivated there, is a form of "cripping" charity, one that radically destabilizes its meaning so that everyone can participate (Lewis, 2014). Recognizing it as such builds on the recent work of the philosopher Matthew Shea (2019), which builds a scholarly bridge between virtue ethics and disability studies through an analysis of L'Arche. But, outside of the academy, recognizing *caritas* can also powerfully advance the cause of disability rights.

For example, disability rights advocates have themselves bemoaned the lack of broad popular support for—and even understanding of—disability rights in America (Schriner and Scotch, 2010; Bagenstos, 2014). Forming alliances with religious charities like L'Arche could help expand this support. In addition, the *caritas* cultivated at L'Arche can be of assistance in creating new forms of integrated communities. Such communities need not be religious; indeed, there are secular organizations that create alliances between disabled and non-disabled people that are analogous to the *caritas* cultivated at L'Arche (Elliot, 2018). But my point is that they *can* be, and to the extent that it furthers integration, their religious content should be embraced.

Embracing this content can expand, and indeed radicalize our conception of disability rights not only practically but conceptually as well. There is perhaps no thinker better suited to capture this radicality than Thomas Aquinas, whose philosophical system places *caritas* at its center. For Aquinas, *caritas* is the fundamental virtue, one that can be received by all people and, without which, no other virtues can be possessed (Willows, 2017). This is because *caritas* is most emblematic of the love of God for humanity, and the love that humanity, in turn, can and should reciprocate to God. The result is the foundation of a *friendship* between humans and God (Bobik, 1986). This radically democratic notion of divinity is at the heart of *caritas* as encountered in L'Arche.

L'Arche is not beyond criticism. The organization's founder, Jean Vanier, has been credibly accused of sexual abuse that is deeply antithetical to the virtue that I have described here (Conley, 2020). To the organization's credit, it has investigated and publicized these accusations, though the work of repairing the damage done by Vanier (to the extent that this is possible) is still in process—and will likely remain so for a long time. With regard to disability specifically, Madeline Burghardt (2016), who is both a disability studies scholar and L'Arche member, has listed several ways in which the community should more explicitly incorporate disability rights. I agree, and all religious charities should be similarly pushed. But the flow of learning between religious charities and disability rights should not be one way. Such charities can themselves expand our ways of conceptualizing and implementing disability rights.

L'Arche is not, in this respect, an isolated example. I will show this through an analysis of a Catholic end-of-life care facility called "Our Lady of Perpetual Help Home." I base my analysis on seven months of ethnographic research that I conducted there during the year 2012.[1]

V. SEEING JESUS, CIRCULATING THE CROSS

Our Lady of Perpetual Help Home ("Our Lady") is a facility that provides care to people who are dying. Such individuals have multiple disabilities, many of which preceded, but were exacerbated by, their diagnosis of terminal illness. The home cares for them in an inpatient setting that synthesizes long-term care for activities of daily living with palliative medicine specifically tailored to the needs of dying patients. This synthesis of long-term and end-of-life care is unique in the US health system, which tends to regard them as two separate treatment modalities (Braswell, 2017, 2018; 2019).

Our Lady can provide this unique form of care because of its charitable structure. The home operates only on donations, refusing reimbursement from either patients or government funding agencies. This charitable structure limits its operation in some ways: for example, the home only has space for around twenty-five patients. But in others it is enabling: for example, Medicare—the primary funder of US end-of-life care—disincentivizes the synthesis of long-term and end-of-life care provided at Our Lady (Braswell, 2017, 2018, 2019). Our Lady's ability to practice its unique form of care is, in part, a consequence of the home's voluntary exclusion from normal reimbursement.

The home owes its charitable structure to its Catholic religious foundation. Our Lady is run by a group of nuns known as the Dominican Sisters of Hawthorne. The home's sisters themselves give their labor to the facility for free. They do so because they identify as Catholic, and their Catholic beliefs provide a framework through which they understand their decision to dedicate their lives to end-of-life care. More specifically, they believe that charity supports their spiritual progress toward a loving union with Jesus Christ. This relationship between charitable work and Christ's love was recognized in an interview by one of the home's sisters:

> I've given my whole life because I believe this. I believe in the Resurrection. I believe that one day our body and our souls will be reunited with the lord and we will go to heaven and be with the Heavenly Father, the Trinity, all the saints, our relatives, our family members that have gone before us . . . . And I hope and pray that [Jesus] will say to me "Well done, my good and faithful servant." Because that's what I long to hear, those words "Well done, you have served me well. Come share my father's joy."

The sister's understanding of her work was common—indeed, shared—among the nuns I spoke with, and it was reinforced in daily rituals such as Mass. It was also presumably shared to some degree by the largely Catholic donors who contributed funding to keep the facility running.

On the face of it, this description of Our Lady might seem, from a disability rights perspective, extremely problematic. It arguably depends on the instrumentalization of disabled people for the purpose of the edification of the home's sisters and supportive donors. In the process, it seems to affirm a fundamental—and fundamentally infantilizing—inequality between these sisters and donors and the dying patients under their care. The latter's fixed status as recipients of charity is seemingly necessary for the home's theological foundation to operate. Even granting that the home's charity does significant material good, this structure would, from a disability rights perspective, seem degrading.

But such an interpretation would be limited. This is because Our Lady's charity is, for the home's sisters, the enactment of a universalizing charity-love. *Caritas* is what the sisters hoped to receive from Christ and God; such a reception would be a continuation of the love they had already received through Christ's sacrifice and God's creation of the world. This love provided a foundation for the care they gave to the home's residents: *caritas* that was a form of modeling Christ. But, as with L'Arche, this *caritas* was not one-way: it flowed from the home's patients to the sisters, and from both of them to Christ himself. The result is a radical challenge to the idea of "charity" criticized in disability rights. To illustrate this challenge, I will describe a practice that the home's sisters called "seeing Jesus."

At Our Lady, the home's sisters try to treat each patient as if he or she were Jesus Christ. The sisters refer to this practice as "seeing Jesus." But the Christ that the sisters see in dying patients is a very specific one. It is Christ as he was dying on the cross. By seeing the dying Christ in their patients, the sisters motivate themselves to provide a particularly high standard of care: indeed, the kind of care that they would give to a dying god. Nevertheless, though divinely inspired, such care is itself tailored to the needs of the individual patients. The sisters "see Jesus" in everyone, but he never looks the same.

Christianity is perhaps uniquely situated to foster such identification because, while centered on the Risen Christ, it includes a strong focus on his suffering and dying; this emphasis on Christ's suffering and dying, as well as the ethico-religious obligation to bear witness to both, is very prominent in the Hawthorne Dominican's interpretation of Catholicism. As such, the nuns identify Christ with terminally ill patients, while understanding these patients' families through other key biblical figures, such as the Virgin Mary, Mary Magdalene, and Saint Joseph. At times, this identification can be literal, facilitated by the iconographic representations of the crucifixion that are present in each one of the home's rooms. One sister remarked to me that as dying cancer patients grow thinner, "their cheeks hollow out and they look just like Jesus on the cross."

But this literal interpretation is not the dominant way in which the home's sisters "see Jesus." Rather, the iconographic representations of Jesus serve as starting points that enable them to see Jesus not just in the home's dying patients, but in everyone. Indeed, the home's resident priest argued that the identification between Jesus and dying patients would not, in a "mature" formulation, be based on physical resemblance, but rather on a shared suffering that underlies surface appearances and contemporary medical categories. Describing the relationship of his practice of seeing Jesus in patients to his looking at the cross, the priest explained: "When I look at the cross of Christ I think of [the patients] going through their cross. Or me going through my cross."

Here, the priest analogizes Christ's cross to the "cross" of dying patients. This "cross" presumably includes their terminal illness, but is not exhausted by it. This "cross" can contain any number of adverse elements. Indeed, though the priest himself is not terminally ill, he clarifies that he too has a "cross." This is because the suffering of the cross is not, for him, particular to any specific condition or individual. In this sense, rather than making Christ's dying body representative of terminal illness, seeing Jesus makes terminal illness into a representation of the universality of human suffering.

Accordingly, Our Lady's sisters do not just see Jesus. They too want *to be seen* as Jesus by others, including the dying patients under their care. As one sister commented: "So we see Christ in the patients and their families and we hope they see Christ in us. And so it's just like a continuous thing of going from Christ to Christ to Christ." Seeing Jesus thus breaks down the typical barriers structuring the delivery of medical care. In medical terms, there is a stark line between Our Lady's religious staff and their terminally ill patients. But in theological terms, there is none. Both patient and provider have to bear a cross that, though appearing different on the surface, is, in essence, the same. The result is rejection of the medical category of "terminal illness," and of the accompanying divide between "able-bodied" and "disabled."

The mechanism of this rejection is *caritas*. On the surface, Our Lady's *caritas* seems to affirm existing ableist power structures. But, on a deeper level, it subverts them through its dependence on the universality of the cross. This universality makes it possible for dying patients to carry out *caritas* themselves—and for the nuns who care for them to desire to be the recipients of their care. More fundamentally, it transforms this care into an act of caring for Christ himself. Thus, Our Lady changes charity from a one-way act of giving that privileges the able-bodied into a dynamic circulation in which any person, no matter how disabled, can take part.

This egalitarian circulation among humans is situated in a larger dynamic between the human in the divine. The sisters cultivate *caritas* not only because of Christ. Their doing so is a way of caring *for* Christ; and the same is true for the home's terminally ill residents as well. They, too, are caring *for* Christ, just as, in the facility's logic, they are also recipients of Christ's care. The result is the most profound of reversals, and indeed, the most profound form of mutuality conceivable: that in which humans who have been utterly excluded by the social order, living in states of physical debility and material poverty, find themselves charged with, and capable of, tending to the needs of a god.

This circulation undercuts the binary structure of the disability rights critique. Charity, at Our Lady, does not maintain the power of able-bodied caregivers over their disabled patients. It gives these patients equal ability to recognize the home's caregivers, and to provide care themselves. This is neither infantilizing, nor morally degrading. On the contrary, in its insistence on the shared obligations of both patient and clinician, it is both equalizing and ennobling. Charity elevates its recipients because it denies the possibility that any person is *just* a recipient or, for that matter, a giver. At Our Lady, everyone is always both. This is a radical redefinition of the conception of "charity" that has been, appropriately, subjected to disability rights critique. "Charity" is an inherently unidirectional venture predicated on a presumptively inherent inequality; *caritas* takes the fundamental equality of all humanity in God's love as its premise, while still elevating all who take part. The elevation, like its foundation, is *shared*.

This shared quality permeating the home's religious framework, in turn, creates material possibilities for the home's residents to engage in complex relations of mutual *caritas* with its staff. The home has a high staff/resident ratio relevant to other US long-term care facilities; this makes it possible for staff to be unrushed in their interactions with residents, giving them ample time to converse with them, even joining them, when possible, in shared leisure activities (Braswell, 2019, 129–49). In addition, the home allows residents to enter much earlier that inpatient hospice facilities, which, in the United States, are generally only for people who are dying with a few days (Braswell, 2019, 74–75). This favorable staff ratio and ample length of stay makes it possible for residents and staff to develop the kind of in-depth relationships necessary for mutual charity.

A number of staff members had such relationships with a resident whom I will call Julian (a pseudonym). Julian stayed at Our Lady for several months prior to his death; during this time, he developed close relationships with the home's staff. In these relationships, staff members talked with him about their own lives—just as he did with them—and Julian was able to draw on his ample personal experience, as well as his background as a former mental health professional, to offer them help with problems that they were experiencing in their personal lives (Braswell, 2019, 153–5). Such help was based in the *caritas* that had developed between Julian and the staff members over the course of numerous interactions and which, in turn, underpinned the assistance that they offered him.

Julian is a strong—but not isolated—example of the *caritas* that pervaded the relationships between Our Lady's residents and staff. In its cultivation of *caritas*, Our Lady is in many ways like L'Arche. But though the home certainly cultivates an environment of charitable love, here I want to emphasize another affect that it inculcates—one that, from a disability rights perspective, seems much more troubling.

VI. PITIFUL, PITYING, AND PROUD

There is no emotion more detested in the disability rights movement than pity. *No Pity* reads the title of Joseph Shapiro's (1994) best-selling history of the movement. "Piss on Pity" remains a popular slogan at disability rights rallies (Shakespeare, 2006, 153). This denigration of pity is closely linked to the denigration of charity. Indeed, pity is considered to be the signature emotion of charitable giving, its motivating factor: givers give because they pity their recipients (Shapiro, 1994, 5; Fleischer and Zames, 2012, 10). This emotion itself contains ableist assumptions: namely that disabled people are worse off because of their disabilities. It is an emotion so toxic, from a disability rights perspective, that even advocates of religious charity frame its benefits in terms of "love" or "friendship," rather than basing their claims on the role that "pity" might play (Reinders, 2008; Edmonds, 2011; Masters, 2016; Swinton, 2017). Indeed, in defining *caritas* as charity-love, I have, up to this point, largely avoided the issue of pity myself.

In response to pity, the disability rights movement organized around the signifier of "pride." Pride, unlike pity, does not inherently denigrate the person who is labeled with it (Corbett, 1994; Triano, 2006; Martin, 2012). It signals something that is morally good, something *to be proud of*. Pity reinforces the ableist stereotype that disability is inherently bad. Pride recasts disability as a good thing—and turns the mirror onto society, which it now reveals to be flawed.

Pride must remain the signature emotion of the disability rights movement, just as rights should remain the movement's basis—not charity. But just as Our Lady's model of religious charity shows that there can be a place for *caritas* in disability rights—that religious charity can even by a tool by which to destabilize ableist norms—so too it highlights that pity can have a role. Indeed, incorporating pity can help resolve some of the disability rights movement's internal contradictions.

The *Oxford English Dictionary* defines "pity" as "[t]enderness and concern aroused by the suffering, distress, or misfortune of another, and prompting a desire for its relief" (Pity, 2018). At Our Lady, the body of the dying Christ is a call to such tenderness. The work of "seeing Jesus" therefore entails taking pity. Pity is, in a sense, the thing that circulates in the home: *caritas* is merely the mechanism by which it is dispersed. By circulating pity, Our Lady converts it into a universal emotion, one that everyone can both give and receive. Pity, then, is the substance that undoes the able-bodied/disabled divide.

Such universalizing pity subverts the one-dimensional version of "pity" that is rightly criticized in disability rights. To clarify its difference from this thin conception of "pity"—as well as to situate it more explicitly in the virtue ethics tradition—I will refer Our Lady's pity as *misericordia* ("pity" in Latin). Just as *caritas* is a form of charity that challenges the ableist notion of "charity" that disability rights advocates have fairly criticized, so too *misericordia* is a variant of pity that subverts ableist hierarchies, enhancing the care given to disabled people by their caregivers, even as it also empowers them to provide the same quality of care to them. *Misericordia*, then, is a virtue that undoes the hierarchical subordination of disabled people.

This radical potential of this undoing can be further clarified via recourse to Aquinas's philosophy. For Aquinas, *misericordia* is the emotional disposition generated by charitable obligation, creating within us "both sorrow and a desire to succor those whose afflictions we share" (Floyd, 2009). The need to feel *misericordia* for others, and to act on this feeling, is *obligatory* and, though finding application in legal context, is also required to go beyond the law (Floyd, 2009). Defined as such, and coupled with the "pride" framework fundamental to disability rights as a legal enterprise, *misericordia* makes it not just possible, but required to go beyond the legal definition of accommodation in meeting the needs of disabled people. A Thomistic approach to *misericordia* can thus significantly radicalize disability rights.

In the process, it enables a new way of viewing disability: as a feature that can make an individual deserving of pity, not because it affirms their distinctiveness from other people, but because they are deserving of compassion in a way that is similar to everyone else. I am not arguing for a necessary relationship between disability and pity. On the contrary, at Our Lady, terminal illness was but one component of the "cross" of dying people, and, in some cases, it not even a part of it at all. My point is, rather, that, at times, disability *can* be implicated in a person's suffering. This point, though seemingly controversial, is held by a broad spectrum of disability rights advocates (Scully, 2008; Kafer, 2013; Sherry, 2016). And if disability can sometimes cause suffering, there is a need for the recognition of this suffering's unfortunate nature: a need, in other words, for *misericordia*.

At Our Lady, to give and receive *misericordia* is considered constitutive of being human. This expands the emotional language and ethical obligations that we have toward disabled people. But it does not do so by singling them out. It rather renders them universal in Christ's body. There is something to be learned from this for the disability rights perspective. It illustrates a way of recuperating pity as an emotion that can exist alongside pride: a pride that exists, in part, in the wellspring of pity that we have for each other. Such a recuperation is not a flight from the political struggle of disability rights.

It in fact expands this struggle to a population that has, generally, been left out of the disability rights movement. Terminally ill people are extremely disabled—indeed, arguably the most disabled population group. Yet, dying people have not figured centrally—or, arguably, at all—either as participants in the disability rights movement, or in that movement's rhetoric or legislation; perhaps the sole exception to this would be the issue of euthanasia, but even there disability rights advocates have tended to focus on people with long-term disabilities (Braswell, 2017). The result has been the relative exclusion of dying people from the disability rights movement. There are some valid reasons for this exclusion. Terminal illness can often be very different from long-term disability in its severity, its speed of progression, and unpredictability (Braswell, 2018, 89–90).

But, in spite of these differences—which, though significant, are not necessarily more so than those between existing disabled populations—there are areas of significant overlap between these groups. Terminally ill people can be subjected to disability discrimination, living in segregated environments—either at home or the nursing home—lacking basic access to shared social resources and needed care (Braswell, 2017). Many disability rights critiques of the so-called "right to die" could be, and have been, aimed at the provision of this right to dying people (Braswell, 2018). Though there are significant differences between these groups in this case, these differences are not absolute.

But while terminally ill people have largely not been recognized by the disability rights movement, they have been recognized by the Hawthorne Dominicans. This recognition through religious charity is different from the state recognition conferred by rights—but, again, not absolutely so. On the contrary, religious charities like Our Lady, precisely because they care for patients denied normal material and symbolic forms of recognition, provide ideal sites for identifying those groups that have been excluded from rights discourse, and for expanding this discourse to include them. There is thus the potential of a complex, and valuable, dialectic between charity and rights, one in which religious charity might both deepen and extend disability rights (Braswell, 2019, 172–4).

But, in addition to extending disability rights to new populations, religious charity can expand our sense of disability politics *beyond* rights. The result, I believe, can be extremely generative.

VII. CONCLUSION: POLITICS OF PITY

In her book *Politics of Piety*, the late anthropologist Saba Mahmood (2011) argued that the Egyptian "Piety Movement"—composed of devout Muslim women—made an important contribution to feminist politics. To call this claim counterintuitive would be an understatement. As described by Mahmood, the Piety Movement embodied everything that feminists had opposed: an ethic of "piety" based in modesty, subservience, and conservative religious values. And yet this seemingly radical incompatibility between feminism and Islamic piety is precisely the problem to which Mahmood wanted to draw attention.

For Mahmood, the exclusion of such Islamic religious practices from feminist politics is both telling and alarming. From a scholarly perspective, it makes it impossible for feminist researchers to even ask questions about the behavior of Muslim groups, who are presumed to be patriarchal in advance (Mahmood, 2011, 196). This lack of scholarly engagement is troubling in itself, and it can have disastrous political consequences. It leads to a tendency, in feminism, to support the unreflective domination of Muslim women whom feminists do not truly understand—and to do so in the name of "feminism" itself (Mahmood, 2011, 198). Writing in the midst of the US invasion of Iraq—one justified in part on the ostensibly feminist grounds of "liberating" Iraqi women—Mahmood could not be accused of hyperbole.

There is an analogy between the piety at the center of Mahmood's study and the pity that I study here. Just as feminism emerged as a rejection of the piety practiced by the Muslim women in Mahmood's book, so too disability rights was born from the critique of religious—and specifically Christian—pity (Shapiro, 1994; Fleischer and Zames, 2012). This analogy has limits. The feminist rejection of Islamic religious identity comes accompanied by violence because it is a prejudice backed in recent history (as in the war in Iraq) by the US military, arguably the strongest in the world. But there is no “army” for disability rights. On the contrary, America is an overwhelmingly Christian nation (based on self-identification) (Pew, 2015), and the country’s disability rights advocates are relatively few (Schriner and Scotch, 2010; Bagenstos, 2014). If there is any danger of domination, it comes via the mistaken belief that *caritas* might make disability rights unnecessary.

For this reason, the disability rights movement’s rejection of Christian charity is more understandable, and much less potentially dangerous than the feminist movement’s rejection of Islamic modesty. But it represents a missed opportunity nonetheless. In part the existing danger of domination is an indicator of this opportunity: the opportunity for the disability rights movement to increase its political coalition by understanding the beliefs of a broad range of Americans. But there is a deeper loss as well.

For Mahmood, the Piety Movement was not just the excluded “other” of feminist politics. It represented a different way of doing such politics. Feminist politics had, like other varieties of identity politics, largely been based on calls for recognition from the state. But the Piety Movement was not oriented toward “the juridical language of rights, recognition, and distributive justice.” Its goal was “the *retraining* of ethical sensibilities so as to create a new social and moral order” (Mahmood, 2011, 193, italics in text). It sought to achieve this goal through the practices of religious modesty that Mahmood studies in her book.

For many commentators, such religious practices would not seem to be “political,” since they are not primarily oriented toward the state. But, for Mahmood, this misunderstands the nature of political action in late modernity: “to the extent that all aspects of human life … have been brought under the regulatory apparatuses of the nation- state, the piety movement’s effort to remake any of these activities will necessarily have political consequences” (2011, 193). By providing a refashioning of subjectivity that serves as an alternative to that of the dominant Egyptian government, the Piety Movement becomes political, whether it identifies with state action or not.

The same is true of the *caritas* and *misericordia* demonstrated by the Hawthorne Dominicans. The Dominican sisters do not make rights claims upon the US state. As such they would not seem to register as “political” acts, as the term is generally understood within disability rights. Yet they provide a way of retraining the sensibilities of those who practice them in order to create a social order in which disability, far from a disadvantage, is representative of the common substance of all human life. This is a radical political act in the context of a US society that remains pervasively ableist. But it is also radical because it represents an alternative form of political action itself.

That this political transformation comes from a traditional religious community need not be surprising. Such communities have, as bioethicist Jeffrey Bishop has argued, been excluded from modernity, in a manner that parallels the exclusion of disabled people themselves (Bishop, 2011). It thus makes sense that such traditions have resources from which the disability rights movement can learn. Yet, though resources like this are perhaps best embodied in religious communities, one need not be religious to appreciate them. For example, Max Horkheimer—the atheistic leader of the Frankfurt school—viewed pity as a necessary foundation for emancipatory politics in the wake of the failure of traditional Marxism (Stirk, 1992, 181–202). Similarly, feminist legal theorist Martha Fineman’s (2010) argument for the universality of vulnerability paves the way for a constitutive role for pity in secular law and politics.

Yet, though there are secular models of the politics of pity that I am advocating here, they are precisely that: models. But the pity of the Hawthorne Dominicans is not a “model.” It is the substance of a community that already exists. As such, it not only represents the politics that we *might* have, but also those that we have *already*, whether we want to recognize them or not. But, by recognizing them, we gain powerful tools for creating the kind of egalitarian community that the disability rights movement has always longed for, and a more expansive sense of the forms that such a community might take.

The Aristotelian-Thomistic tradition of virtue ethics, particularly as it has been reinforced by recent interventions by Talal Asad (1987), Alasdair MacIntyre (1981), and Mahmood (2011) herself, is one such tool. Reorienting disability politics around virtues can serve as both a complement and an alternative to a rights-based approach: one where disability justice is implemented not via legal coercion but rather through habitual practices that make up the shared substance of life. *Caritas*, in this regard, should be considered a cardinal virtue, one essential for the formulation of communities where no one—disabled or not—is left behind.

Such a politics of virtue is not a replacement for disability rights. But it can complement them. It can support existing anti-discrimination laws by making legal compliance part of individual moral formation in communal life; and it can push individuals and communities to go beyond the letter of the law. Given the difficulties in enforcing current anti-discrimination legislation with respect to disability (Bagenstos, 2014), grounding disability politics in virtue can prove useful to theorizing and achieving a just and equitable society for disabled people. Religious charities like L'Arche and Our Lady provide a glimmer—incomplete but arresting nonetheless—of the form that such a society might take. But though I have here focused on these two Catholic organizations, there are many other religious charities, affiliated with diverse faiths, that themselves provide promising models for disability rights advocates to learn from, ally with, contribute to, and, more generally, explore.

NOTES

1 This ethnography was conducted under the supervision of the Emory University Institutional Review Board.

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