This is a preprint version of Michael Buttrey, “Reconsidering Intellectual Disability: L’Arche, Medical Ethics, and Christian Friendship by Jason Reimer Greig (review),” Modern Theology 32, no. 4 (October 2016), XXX-XXX.

Reconsidering Intellectual Disability: L’Arche, Medical Ethics, and Christian Friendship by Jason Reimer Greig (Washington, DC: Georgetown University Press, 2015), + 304 pp.

Reconsidering Intellectual Disability opens with the story of Ashley, a young girl who in 2004 underwent a combination of estrogen therapy to restrict her growth, and surgery to remove her breast buds and uterus. This experimental combination, later known as the Ashley Treatment, were deemed necessary by Ashley’s parents and doctors because of her profound disability, and because they feared her growth and development would otherwise make it difficult for them to care for her at home. The hospital’s ethics committee approved the procedures, but after the parents took Ashley’s case public, significant controversy ensued. Particular criticism came from disability groups, who voiced concerns about Ashley’s dignity and physical autonomy, the objectification of her life and body, her parents’ unacknowledged conflict of interest, and the use of medicine to address a social problem.

Jason Reimer Greig begins with an account of Ashley, her treatment, and the debate surrounding it both to illustrate the relevance of the topics he will address, and to provide a practical and personal impetus for his work. Greig recalls that he first learned about the Ashley treatment at a meeting of the L’Arche Cape Breton community, who found Ashley’s treatment incomprehensible, even horrifying. Since then Greig has continued to be disturbed and curious about the dissonance between the perspective of Ashley’s parents, doctors, and ethicists towards the Ashley Treatment, and that of his L’Arche community, to which he dedicates the book. I dwell on how Greig introduces Ashley’s story – and his own – because it demonstrates his choice to use a case method for the book. According to Greig, his goal is not to “solve the ‘problem’ of Ashley” but rather to bring “a *particular* person into Christian moral thinking about bioethics” (9). As he recognizes, the use of cases carries risks: individual narratives can be exploited to make dry academic prose more exciting, or to attempt to manipulate readers into premature agreement. However, he also contends that careful attention to particular stories – and particular people – can highlight questions about human flourishing, practices, and narratives that are otherwise obscured by the supposedly universal discourses of medicine and bioethics.

Considering these neglected questions is the task of Greig’s remaining chapters. After reviewing the debate around the Ashley Treatment in the first chapter, chapter 2 connects the medical model of disability assumed by advocates of the treatment to the “Baconian Project” of eliminating suffering described by Gerald McKenny. Here Greig also sketches a brief summary of how Christian narratives and theology can provide an alternative view of medicine and suffering to that of Ashley’s parents, who assert that “knowingly allowing avoidable suffering for a helpless and disabled child can’t be a good thing in the eyes of God” (70). Here Greig’s initial response is clumsy, in that he segues too quickly from the parents’ words to the claim that the Baconian project must end up seeking the elimination of those whose suffering cannot be relieved. Even if there may be a wider trend towards euthanasia of people with disabilities, Greig has not presented any evidence of it being discussed in Ashley’s case. He is on firmer ground when he questions the conflation of disability and suffering by the non-disabled, including Ashley’s parents. As Greig puts it: “the great Other of disabled embodiment can only look pathological when independence and agency characterize authentic human being” (73). This chapter also sees the introduction of a variety of theological voices that will influence Greig’s work, including Stanley Hauerwas, Therese Lysaught, and Hans Reinders.

Chapter 3 is devoted to an appreciative critique of the social model of disability, which identifies disability as a product of the social exclusion, oppression, and disabling of people with impairments, not disabilities. Although Greig agrees that the social model has encouraged needed inclusion and transformation for both individuals and society, he fears its goals of empowerment and liberation cannot accommodate those like Ashley who live with persistent dependency and are “not able to write books and blog posts” (92). Greig argues that even within the social model, people with profound intellectual disabilities remain excluded from full participation, and he contends that this exclusion is reproduced in the work of Nancy Eiesland and Sharon Betcher on disability. Both theologians emphasize the ideals of autonomy and self representation, and to Greig “the fundamental importance they place on self-representation makes little room for Ashley and others whose embodiment make them radically dependent on others” (95). He suggests that instead of the social model, a better foundation for the inclusion of all people with disabilities is the theological idea of friendship with God, as the ultimate goal and destiny of all human beings.

The end of chapter 3 and the beginning of chapter 4 serve as the hinge of the book, marking where Greig moves from a primarily negative critique – of the Ashley Treatment, modern bioethics, and the social model of disability – to his more constructive work. Drawing on Paul Wadell and John 15, Greig favourably contrasts the asymmetrical, covenantal friendship between Jesus and his disciples with the Aristotelian (and contemporary) ideal of symmetrical, reciprocal friendship. For Greig, the Incarnation also reveals the embodied nature of friendship: "God not only desires to be friends with our spirits but also fundamentally recognizes that true *philia* must include our *bodies*" (120). This leads into the argument of chapter 5 that the church is a community of friends shaped by Christian scripture, theology, and practices to accept, even celebrate, embodiment and vulnerability. Greig then contends that the church provides an alternative politics of dependence to the dominant modern politics of independence. He acknowledges that placing dependence at the centre of Christian community and friendship will appear "odd" to a society that celebrates autonomy, but suggests that "the integrity of the relations within the community of faith expressed through its strange political narrative has the potential to compel as much as dispel others" (171). The chapter ends with a discussion of how the practice of footwashing is a sacramental and eschatological expression of the mutuality, hospitality, and recognition needed to include people with profound intellectual disabilities in a community of friends.

Finally, to anticipate the objection that the contemporary church is unable to practice the consistent witness Greig describes, chapter 6 is devoted to the shared life and theology of the L'Arche community and its founder, Jean Vanier. Here Greig affirms that "Christianity must be seen to be believed" (201) and presents L'Arche as a model of and for the church and for society. He highlights Vanier's comments that L'Arche core members, even those with profound intellectual disabilities, have radically reshaped how he and other assistants understand what is worthwhile, who is valuable, and how to be human. Greig then exposits the practice and theology of footwashing in L'Arche, emphasizing how the whole community – both core members and assistants – wash each other's feet, witnessing thereby to the interdependence and mutuality of the body of Christ. The book concludes with a brief recapitulation of Greig's arguments and a series of suggestions for how his work could be taken deeper in areas ranging from liturgical studies to medical training.

Reconsidering Intellectual Disability is a compelling book. It is both well argued and well written. However, one weakness of the book is a certain methodological unevenness, created by Greig's attempt to blend the case method with the more theoretical approach typical of academic theology. While the story of Ashley – and in part the author – is the focus of the introduction and first chapter, this narrative emphasis quickly diminishes through the subsequent chapters. Only in chapter 6 and the conclusion do narratives re-emerge, primarily in Greig's discussion of Jean Vanier and L'Arche but also in increased references to Ashley's story. These narrative dominant chapters sandwich the theoretical sections, creating an elegant structural symmetry, but the lack of overall consistency sits uneasily with Greig's claim that the book uses the case method. Specifically, Greig writes: "the book is based upon the particular case of Ashley X and the medical interventions that made up the Ashley Treatment" (9). In that context, Greig's juxtaposition of quotations from Ashley's parents with Hans Reinders's concerns about infanticide appear not just unwarranted, but a seemingly insensitive departure from Greig's commitment to the real particulars of the case. Similarly, given Greig's arguments against the social model's expectation that people with disabilities must only ever speak for themselves, it is unfortunate that the voice of Ashley's parents only appears in the first half of the book, which is primarily critical. The parents' actions and attitudes towards Ashley justify a certain suspicion towards them, but their blog (still available at www.pillowangel.org) is also the primary way Greig and his readers have access to Ashley's experience. For that reason, more interaction with the words of Ashley's parents throughout the book could have augmented Greig's focus on Ashley's case.

Extending the use of the case method could also have bolstered the rhetorical force of some arguments in the second half of the book. For example, Greig's inspiring claims for the sacramental power of footwashing to shape Christian communities are weakened by the absence of any examples of churches that understand the practice in the holistic sense he advocates. An extended meditation on the L'Arche experience with footwashing is of course provided in the next chapter, but in the context of Jean Vanier's theology, which has different emphases and starting points than Greig's own. A closer integration of Greig's theology of footwashing and L'Arche's practice of footwashing would not only clarify and support his proposal, but also illustrate how sustained attention to particular examples can help make theological arguments more practical and plausible. Similarly, despite the mention of ethics in the title and the detailed critique of medical ethics early on, Greig makes few of his constructive ethical insights explicit, leaving the reader to derive them from his reflections on ecclesiology and ecclesial practices.

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To be fair, the proper role of cases, ethnography, and qualitative research in Christian theology is highly contested, and as of yet there is no generally accepted model for how to integrate particular narratives and more theoretical work. Moreover, the stories of Ashley, Jean Vanier, and L’Arche clearly strengthen the book as a whole, grounding both Greig’s concerns about contemporary medicine as well as his constructive proposals for the church in concrete examples. Therefore, my identification of some minor methodological and structural issues should not deter prospective readers from enjoying Greig’s work. The title will be of obvious interest for scholars of disability theology, but I would also recommend the book for those working and teaching in the areas of constructive ecclesiology, practical theology, and medical ethics, and at the intersection of moral theology and liturgy.

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