A Brief Statement on the Moral Model of Disability for IST 2010 (Constructive Theology)¹

[The medical model] of disability often operates in conjunction with a second interpretative framework, what scholars call the *moral model* or, alternatively, the *religious model* of disability. With roots deep in the ancient world, the moral model operated as the default understanding of disability until the Enlightenment.² Like its medical counterpart, this model regards disability as an individual and deficient trait. Its signature claim is that this deficiency is the result of sin or wrongdoing. Once again, the presence of a disability is warrant for intervention, here taking the form of religious measures or divine action.³ Paralleling the medical model's dichotomies of normal/abnormal and health/illness, the moral model interprets the spiritual status of a person as either saint or sinner and the fact of their embodiment as either a blessing or curse.⁴

The story of Jesus healing a man who is blind in John 9 illustrates the typical structure of "miracle stories" in the Christian tradition.⁵ Upon encountering this man, Jesus' disciples ask, "Rabbi, who sinned, this man or his parents, that he was born blind?" Jesus' responds, "Neither this man nor his parents sinned; he was born blind so that God's works might be revealed in him." Jesus then uses the divine powers at his disposal to enable this man to see for the first time in his life. Whatever subversion of the medical and moral models might be read in Jesus' verbal response, this narrative plays with the presupposition that only in the removal of the man's

¹ This excerpt comes to us from a text that is reputable, copyrighted, and (for pedagogical purposes) anonymous. ² Joel S. Baden and Candida R. Moss, "The Origin and Interpretation of *sara 'at* in Leviticus 13-14," *Journal of Biblical Literature* 130, no. 4 (Winter 2011): 658.

³ Ibid.

⁴ Deborah Beth Creamer, "Disability Liberative Ethics" in *Ethics: A Liberative Approach*, ed. Miguel De La Torre (Minneapolis, MN: Fortress Press, 2013), 223-38, 224.

⁵ All biblical citations in the present study come from the New Revised Standard Version.

bodily deficiency could his life be a revelatory site of God's presence.⁶ As in other miracle stories, the narrative presents a problematic body as clearly in need of intervention, some religious activity corrects the deficiency, and this correction testifies to the reality and character of the true God. This evaluation of the disabled body undergirds the long-standing practice of using blindness, deafness, and other disabilities as metaphors for an impoverished spiritual condition. These traits exemplify a state of brokenness, standing in for insensitivity to or ignorance of God's ways.⁷ To put the matter more sharply, in the absence of divine restoration, embodied disabilities and the persons who have them are aligned with evil and sin, antithetical to the fullness of human life experienced only by those in whom God's Spirit dwells.⁸

Present-day expressions of the moral model often exhibit a secular bent. Operating collaboratively with the medical model, the moral cause of disability is not sin but the failure to abide by well-known principles of health and nutrition. As Dawn DeVries notes, the birth of child with congenital defects will likely prompt people to ask, "What did the mother do, or what did she ingest, during pregnancy to make the baby this way?"⁹ Cases in which debilitating forms of obesity or diabetes result in part from patterns of poor eating and exercise can give rise to a similar habit of mind—this condition is a punishment for one's transgression against the instruction of medical authorities. These authorities serve as the analogue of God here, just as

⁶ For interpretations of John 9 as a text that supports a positive valuation of disability, see Kerry H. Wynn, "Johannine Healings and the Otherness of Disability," *Perspectives in Religious Studies* 34, no. 1 (Spring 2007); Reinders, *Receiving the Gift of Friendship*, 322-35.

⁷ Betcher, Sharon V. Betcher, "Monstrosities, Miracles, and Mission: Religion and the Politics of Disablement" in *Postcolonial Theologies: Divinity and Empire*, ed. Catherine Keller, Michael Nausner, and Mayra Rivera (St. Louis, MO: Chalice Press), 79-99, 92-93.

⁸ Baden and Moss, "The Origin and Interpretation of *sara 'at* in Leviticus 13-14," 658.

⁹ Dawn DeVries, "Creation, Handicappism, and the Community of Differing Abilities," in *Reconstructing Christian Theology*, ed. Rebecca S. Chopp and Mark Lewis Taylor (Minneapolis, MN: Fortress Press, 1994), 124-140, 136-37.

biotechnology and pharmacology replace spiritual healing as the means by which the diminishing effects of one's imprudence might be corrected.

The moral/religious model has the potential to both reinforce and supplement the medical model in powerful ways, especially in cases of persons with profound cognitive disabilities. As discussed above, the logical conclusion arrived at through the medical model would seem to be that the embodiment of a profoundly disabled person . . . amounts to a personal tragedy with no identifiable remedy. In one sense, interpreting such a life within the religious parameters just described only intensifies the tragic element; that person is not only "less than whole," but also "unholy." Yet, in a second sense, the moral model provides a ground for hope the medical model cannot—the possibility of a bona fide miracle.¹⁰

¹⁰ The moral model also shares a tight connection with theodicy. When a religious perspective assumes that the presence of disability in one's life is always a reason for lament, it is only natural for one to question why a loving God would allow, or even actively cause, human persons to have disabilities. The constructive proposal I lay out in the remaining chapters of this study details several reasons why Christians should not assume theodicy is most appropriate theological context for reflecting upon disability.