

Introduction – a brief outline on the faces of friendship

In the following article, I argue that friendship with people with disability is not difficult or impossible in itself, but, due to historical stigma and mainstream socio-cultural attitudes towards the disabled, friendship with people with disability must overcome a lot of socio – cultural prejudice and obstacles. For this reason, mainstream thought on friendship with people with disabilities requires reconsideration. Before highlighting such obstacles and prejudices, let me briefly address a few lines about development of friendship and its importance for a person's well-being. What we think by friendship?

Friendship carries its universal application in the sense that it is recognized in all cultural contexts and life stages. It is a historically discussed concept (Krappmann, 1996), an important human relationship (Willmott, 1987), and a basic human need (Nussbaum, 2006). The approaches to friendship vary from ancient to modern, and they have developed as a subject of scholarly discourse within certain academic fields (e.g., philosophy, sociology, psychology, theology,) including the observance of virtual social networks such as Facebook. The emergence of the subject of friendship within various academic disciplines contains certain definitions and approaches. This is the reason different definitions of friendship emerge within contemporary scholarly literature. For instance, the philosophical approach to friendship has been greatly influenced by ancient authors (e.g., Plato's *Lysis*; Epicurus's *Principal Doctrines*; Seneca's, *Epistulae Morales*, II, LXIII; Cicero's *Laelius de amicitia*) and peak with Aristotle's treatise on friendship in *Nicomachean Ethics* (books VIII and IX).

According to Aristotle, friendship was important for the development of one's moral character; it was a reciprocal relationship based on well-wishing. Besides the distinction between true and derivative types of Aristotle's conceptions of friendship, the emphasis on virtue and the symmetrical character of friendship were specific to only one type of friendship, that is, the true or perfect character of friendship, impossible between master and slave and man and women (Cooper, 1977). The theological literature on friendship inspired by the Scripture and Gospel of John (Jn 15: 13-15), including Thomas Aquinas' treatise on charity as supernatural friendship with God and

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one's neighbor in *ST Ila-IIae*, q. 23 is different as it implies a metaphysical character to friendship that is, before all, friendship with God. Such a rationale for friendship brought a particular novelty in the conceptualization of friendship that, contrary to Aristotle's understanding, suggests a new order of relationship among human beings and emphasizes its communitarian character. This is to say that the ethical vision of, for instance, the New Testament literature (e.g. John's Gospel and the Pauline Letters) differs from that of the ancient world, in that it includes friendship with God, love for one's neighbor and love for one's enemies (Keener, 2005; Mitchell, 1997).

Contrary to such thinking, modern and late modern conceptions of friendship have been impacted by dichotomies, and the implications of those dichotomies, by those who based friendship on rational subjectivity (e.g., Kant, transl.1983), as well as those who, as a response to such rational morality, have seen friendship as emotional self-disclosure which includes certain levels of altruism, emotion, and sentiments (e.g., Blum, 1980).

These fluctuations and divergences have impacted not only the meaning of friendship but also the meaning of person and otherness. For instance, many sociologists, psychologists, and anthropologists have seen friendship as a relationship that is important for one's self-esteem and contributes to one's emotional well-being (Pockney, 2006; Blatterer, 2015), as manifested in a feeling of being accepted and to belong. This literature also distinguishes between friendship with a particular groups including friendship across gender, between children, between adolescents and adults, between aging populations, vulnerable adults, adults with different careers, and others. What about friendship with people with disabilities? The investigation of friendships with people with disabilities has been relatively recent in comparison to studies of other friendships. Regarding its context and ap-

plication, a considerable number of mainstream accounts exploring friendship among disabled people have been conducted within school settings including children and adolescents with and without disabilities (Luftig, 1988; Žic and Igrić, 2001). The results indicate various responses, ranging from social acceptance to rejection by non-disabled peers. Likewise, several studies from the field of philosophy and theology have investigated the possibility of forming friendships between people living with disabilities and people living without developmental disabilities (Swinton, 2000; Pottie and Sumarah, 2004; Reinders, 2008; Greig, 2015). Despite these achievements, the research in the UK carried out by SENSE, a UK National Charity, (SENSE, 2015) using questionnaire which involved 1004 participants with a range of disabilities, we learn that 53 percent feel lonely, 23 percent say they feel quite or very lonely on a typical day, and 6 percent of disabled people have no friends at all. Additionally, significant achievements made in recent decades towards the emancipation of people with disabilities in society have shown that, sociologically speaking, there is either a lack of coherent interpretation of disability within society or there are non-adequate understandings of inclusion. The findings indicate that people with developmental disabilities suffer from widespread loneliness, stress, depression (Lunsky, 2006), as well as lack of friendship (Amado, 1993; Cushing, 2010;). Regarding social inclusion, studies have revealed that relationships with people with disabilities were seen as forms of charity and sacrifice rather than true personal and self-transformative relationships between human beings (Reinders, 2000; Cushing, 2003;). Although the inclusion and participation of people with disabilities in society has, in recent years, been changed by social activism and civil rights initiatives, a complete change in socio-cultural attitudes, due to the (physical) "bodily appearances" of people with disabilities, has not been eradicated.

Not only does friendship discourse involving people with disabilities “complicate” mainstream discussions on friendship, but the real reason people with disabilities lack friends is, in my opinion, entangled within deeper anthropological and social realities. Therefore, the reality of friendship with people with disabilities, in the first place, requires rethinking the anthropology underpinning friendship’s interdependent character. Second, it requires rethinking the moral application of friendship and the friendship opportunities available for people with disability.

In this article I particularly aim to extricate those attitudes which imprison people with disability in certain categories, attaching their identities to marks of difference and unworthiness, thereby excluding them from full participation in relationships of friendship. I classify these realities as socio-anthropological factors that exclude socio-cultural behaviors towards people with disabilities and impact their lack of social relationships such as friendship. These include the marks of being *vulnerable*, *non-normal* and *pitiful* that not only label, stigmatize, isolate, dehumanize, and marginalize people with disabilities but, in a particular way, deprive them of the possibility of social contact (Stiker, 1999; Gladstone, 1996). To put it slightly differently, the marks of being vulnerable, non-normal and pitiful diminish opportunities for social interaction and communication, as well as simultaneously lowering a person’s sense of self-worth, self-esteem, and social belonging. The reason behind the difficulty of friendship with people with disabilities that I aim to highlight in this discussion, has been “triggered” not only by disability itself but by the socio-anthropological categories of mainstream society — such as vulnerability, non-normalcy, and piteous or charitable attitudes — attached to disabled people. These labels have created additional isolation, lack of acceptance (non-acceptance), and loneliness. In the following, I discuss each of these socio-anthropological marks and related socio-cultural behavior towards people with disabilities that threaten their inclusion in relationships of friendship. In the conclusion, I suggest my own perspective on rethinking friendship, emphasizing its interdependent character.

1. Vulnerability and Isolation in relation to friendship

Historically, people with disabilities have been considered “vulnerable”. (Stiker,

1999; Kittay, 1999). More precisely, vulnerability has been ascribed to their identities (Linton, 1998; Lennard, 1996). They remain classified as a vulnerable group of individuals even within International United Nations documents. This particularly includes the *United Nations Universal Declaration on Bioethics and Human Rights* (art. 8), the *Document on Biomedical Research Involving Human Subjects* (CIOMS, 2010), and — the most recent one — the *Report of the International Bioethics Committee of UNESCO on the Principle of Respect for Human Vulnerability and Personal Integrity* (IBC, 2013). The problem of such categorization does not only imply a biased anthropological position toward people with disabilities but also tends to undergird a lack of social relationships such as friendship. First, it creates an overall anthropological dichotomy between the vulnerable who need protection and non-vulnerable who do not need to be protected. In addition, on a socio-cultural scale, it creates offensive and exclusive attitudes towards people with disabilities — one of which is whether or not they can participate in friendships. Besides its semantic meaning, as the possibility of being wounded, physically or emotionally fragile, weak or helpless (lat. *vulnus*; *vulnerare*; *vulnerabilis*), its mainstream conventional meaning defines it as an existential, complex, and ambiguous notion (Vuk, 2021). This is to say that besides being attached to people with disabilities and other vulnerable groups (e.g. minors, women, migrants) there are layers in understanding vulnerability, and there are also ambivalences and inconsistencies in opinion as well as distinctions in approaches between those who have considered vulnerability as an existential category of all human beings (Hoffmaster, 2006; MacIntyre, 1999) or a specific category of only a few (Luna, 2009; Parley, 2011). This is the reason why, on the one hand, vulnerability fails to be applied univocally with either positive or negative connotations and, on the other hand, the conceptual division in opinion between its positive and negative sides continues. The context of scholarly discourses concerning the notion of vulnerability provides multiple and diverging analyses and approaches. After 1976, the implication of the meaning of vulnerability moved from a marginal academic interest to the center stage of medical ethics, anthropology, moral philosophy, sociology, feminism, care ethics, philosophy, and theology. Since each of these

disciplines operates differently, notions of vulnerability have been conceptualized in various ways and from various approaches. Within both academic and mainstream discourses, “vulnerability” has become a puzzling and controversial term.

The history of disability has also been marked by the use of the term “vulnerability.” Due to their dependency status, neediness, atypical functioning, and physical and intellectual disadvantage, disabled people were marked as vulnerable (Gibson, 2006; Shildrick, 1999). In other words, having a disability — or, more precisely, an intellectual disability — historically, and even in some societies today, implies vulnerablizing attitudes, deprivation, or neediness. This entails that having a disability means being dependent and disposed to illness and care (medical model of disability)¹ as well as being seen as disadvantageous and insufficient individuals (social model of disability)². On a socio-cultural scale, being assigned the attribute “vulnerable” not only diminishes a person’s right to self-dependency, independent living, freedom, rights, and participation in society, but it perpetuates oppressive conceptual misrepresentations and socio-cultural behaviors towards people with disabilities. Friendship, in this regard, remains a quality of those described as capable and self-dependent — concepts often only reluctantly applied to the vulnerable, dependent, and disabled. This further entails that friendship only functions between those similar in character or social status and not between (existentially) the vulnerable and “non-autonomous” and “non-vulnerable” and autonomous individuals. Chappell, for instance in her analysis of why people with disabilities have few friendships, lists the lack of autonomy and self-determination as one factor that limits disabled persons’ capacity for self-establishing relationships (Chappell, 1994). Others, such as Gilmore and Cuskelly, highlight the connection between vulnerability and chronic loneliness in children and adults with intellectual disabilities due to the lack of social contentedness and emotional isolation (Gilmore and Cuskelly, 2014). Few disability studies scholars contend that marking people with disabilities as vulnerable and threatened within societal and cultural practices serves to repress the personal fragility, liminality, and fear of dependency of the so-called non-vulnerable (Marks, 1999). Others have seen the implication that naming disabled people as

“vulnerable” attributes, in a way, “invulnerability” to the non-disabled. Such attitudes culminated in the “vulnerable-izing” and exclusive attitudes towards the disabled.

The greater problem of being marked as vulnerable refers to a misconception of the very notion of vulnerability within contemporary cultural settings that impose exclusion and already mentioned *vulnerable-izing* attitudes towards disabled individuals. These attitudes on the one hand foster their isolation from the relationships of friendship; on the other hand vulnerability (anthropologically) presents a threat to self-dependent and existentially non-vulnerable individuals. In these settings vulnerable persons, due to lack of self-dependency, are exempt from relationships of friendship. The greater problem consists in socio-anthropological perceptions of the notion of vulnerability and a failure to recognize vulnerability as an existential anthropological horizon and friendship as a universal human relationship accessed by all. Thus, it is exactly this — the condition of being vulnerable and dependent — that determines the reason which, on the one hand, creates the mainstream social behaviors of fear and prejudice towards people with disabilities and, on the other hand, fosters the isolation of disabled people from relationships of friendship. Instead of being fully included as participants in friendship, people with disabilities ascribed with a mark of vulnerability have been set aside, institutionalized, or simply understood as icons of vulnerability. This reduces their sense of belonging and increases isolating attitudes towards themselves and others. The access to friendship as a universal category for all, and as a relationship of receiving and giving, remains limited and, for this reason, the very concept of friendship as a moral category of inclusion fails to be applied.

2. The mark of “non-normal” and “non-accepted” in relation to friendship

The very meaning of the concept of being different is often associated with a departure from a certain calculus of the “norm” or “normality.” Therefore, non-compliance with the norm of normality assigns individuals marks of being non-normal or different. According to sociologists, norms are explained through various perspectives and approaches, whereas the meaning of being normal is

often associated with a certain calculus (Axelrod, 1986). A stigma, in the discourse of normalcy vs. non-normalcy, signifies an attribute ascribed to the individual who departs from established social categories and therefore discredits the person’s true value. This implies a mark of failure, a shortcoming, or mental illness (Goffman, 1963).

The interaction between being labeled as a non-normal stigmatized individual and being non-accepted due to the stigma of non-normalcy—in terms of social relationships as a context of stigmatized circumstances—aims to link the feature of being considered non-normal in socio-anthropological terms with the very meaning of the notion of being non-accepted within social relationships. This, in my view, means that the discrediting attitude close to the meaning of stigma, when applied to people with disabilities, corresponds to the meaning of being described with certain deviances. In line with this discussion, these deviances correspond to non-normalcy. Thus, with regard to people with disabilities, being marked as non-normal means being discredited on the ground of two differences: cognitive and biological. This, in view of this discussion, further impacts socio-relational, culturally established, non-accepting behaviors. Moreover, the differences that depart from norms of established cognitive or bodily criteria are not only perceived as differences in a strict sense, but they also are perceived as personal failures. In this regard, and according to certain calculus, for people with intellectual or profound intellectual disabilities, cognitive differences refer to mental incapacities, low IQ, and deviant behavior which depart from normal intellectual criteria. The physically shaped body, furthermore, departs from the fitted, desired, and perfectly shaped bodily criteria.

But how is this dichotomy between being normal and non-normal perceived within disability discourse? Canadian theologian Thomas Reynolds raises awareness of these problems concerning the dichotomy of the normal-abnormal within the framework of body capital and a cult of normalcy. It is the cult of normalcy, according to Reynolds, that represents an ideal and antithesis to the abnormal, which is considered dysfunctional. The normal implies a fit, able-bodied, economically independent, and autonomous individual. Able-bodied functions have become the main indicator of being human (Reynolds, 2008)

Those whose bodily structures depart from this are often considered either deformed, different or abnormal. The problem of such thinking, of which Reynolds is also critical, is that the cult of normalcy as a social construct represents what it means to be a person, feel good, flourish, or have worth. On the contrary, having a deformed body or appearing as “different” is a corruption or privation of the good marked with derisive socio-cultural meanings and behaviors. The cult of normalcy as socially constructed includes social control by “mainstreaming body capital” and at the same time exclusion of what lacks standardized “body capital.” (Reynolds, 2008, pp 179) What is frequently assumed as normal, according to Reynolds’ framework, refers to able-bodied functions. People with disabilities whose cognitive capacities or whose physical body forms are often perceived as *deformed* do not correspond to these requirements and are often at the bottom of this “body normality scale” and thus do not fit into the body capital scheme. For these reasons, the cult of normalcy has developed biased attitudes towards differences — especially concerning those living with (intellectual) disability. This further entails that the meaning of normalcy is accordingly legitimated in terms of its contrast — the non-normal — which bears many negative connotations (Reynolds, 2008).

Further discussions on the conceptual dichotomy between normal and non-normal have also assumed central places within disability discourses. Namely, within the framework of the study of disability, disability is conceived as an abnormal or unnatural condition that attaches itself to a few normal persons. In other words, disability needs prevention or cure in order to reach the commitment to normalcy: *disability matters to the study of disability because normalcy matters* (Titchkosky & Michalko, 2009). Unlike the study of disability, Disability Studies interrogates the disability/non-disability dichotomy and the normalcy /non-normalcy dichotomy in different ways. Disability, here, is first of all considered as a disruption of normalcy and, in this perspective, becomes an occasion to interrogate normalcy. This is to say that normalcy in relation to disability is in the center, and non-normalcy, as something that departs from the norm, becomes a marginal term. Therefore, disability matters to disability studies in the sense that it is an integral part of the essential diversity of human life both indi-

vidually and collectively (Titchkosky and Michalko, pp.4-5). Being discredited from the category of normal — in the way in which people with disabilities are — not only exacerbates social exclusion but limits the possibility of being accepted into relationships of friendship. Not only are social exclusion and isolation marks of disabled people identities but they are labels of being somehow (physically and mentally) different which among other factors contribute to a socio-cultural lack of acceptance of people with disabilities.

As Bill Hughes correctly asserts, the lack of capacity for purposive actions has been a mark of those with a cognitively inferior status—with no or little moral standing (Hughes, 2009). This entails that the significance of being non-normal due to cognitive and physical differences additionally consists in attached deprecatory terminology (e.g., mentally retarded, morons, idiots). Such terminology not only compromises basic human dignity, but it leaves people with disabilities at risk of social devaluation which drives them to the extent of being socially defined and treated as less than human or even considered *inhuman* (Wolfensberger, 1976). This further means that personhood and the capacity for relationships for people with disabilities have not been adequately evaluated and have resulted in a wider social non-acceptance (Kittay, 2005) that prevents people with disabilities from developing relationships of friendship. In this regard, I determine the cognitive (e.g., lower IQ from normal standard requirements) and bodily differences (e.g., deformity, lack of mobility or slow cognitive processes) as indicators of a wider socio-cultural non-acceptance of people with disability. Being considered non-normal or departing from a measure of normality on the socio-cultural scale not only deprives people with intellectual disabilities of social relationships and communication with other people, but also produces fear towards them. The fear in the able-bodied or so-called normal person's mindset towards people with disabilities (stimulated by pejorative expressions such as morons, retarded, and idiots) is one of the many reasons for the resulting socio-cultural non-acceptance of people with disabilities. In other words, the socio-cultural prejudices towards the disabled as less normal and therefore non-accepted underline for people with disabilities their status of being unsuitable in processing friendship relationships. The prejudices upon people

with disabilities considered non-normal and therefore non-accepted does not end there. It goes further, pointing towards piteous and charitable attitudes resulting in loneliness. In the next section, I suggest a perspective on the link between the mark of being an object of pity, charity, and the relation to loneliness.

3. Charity, the Loneliness and Friendship

Charity (Latin: *Caritas*) is one of the most appreciated virtues in Christian morality and the highest ethical principle in relation to one's neighbor (Cunningham, 1998). The meaning of charity in such a perspective is thus intertwined with the Christian understanding of love, *communicatio*, solidarity, and friendship. The Latin roots of the term charity go beyond pure objectification, materialization, or almsgiving; its end is not almsgiving but rather a sacrificial love that flows from one person to another. The same thinking cannot be met when discussing charity within the charity model of disability that prescribes charity with an objectifying and pitiful attitude towards disabled perceiving them as poor, needy and helpless.³ The scholarly discourses on disability regarding the disabled person lacking friends list several reasons for this problem (Bogdan and Taylor, 1987). The most frequently mentioned reasons imply, on the one hand, objectification, and on the other hand, negligence of a person's relational and cognitive potential to develop meaningful relationships (Kittay, 2005; Stiker, 1997).

Several Disability Studies scholars—including disabled people's activists—have been particularly critical of the role of the charity model. Their main critique claims that the charity model locates disability as a problem within the individual, looking upon his/her disabled condition as pitiful and tragic. Such attitudes force disability activists to react (Barnes and Mercer, 1996; Linton, 1998); and such initiatives have brought liberation to disabled people from the interventions of charity organizations and systems of healthcare that historically looked upon the disabled as objects of pity or subjects for able-bodied individuals' moral obligations (Reinders, 2008). The continuous work of those engaged in the study of disability aims to show that people with disabilities are not the objects of pity or tragedy but rather representatives of their own lives. (Kittay, 2009). However, the link between being disabled and pitiful-

ness has reduced the dignity of people with disability to the work of social aid or the system of social care as people with disabilities have been approached as objects of charity. They have been regarded as persons in need of care and protection. Although this has many positive benefits, persons with disabilities have not only been deprived of the means of being self-dependent but have been perceived as objects of almsgiving and pity by so-called able-bodied individuals.

Though the civil rights movement brought liberation to people with disabilities and played an important role in increasing their part in civil inclusion (Shakespeare, 2014), this does not mean that rights and charity removed the loneliness which people with disabilities continue to experience. In other words, the rights indeed have given people with disabilities better participation within society and increased their socio-economic condition, but neither charity nor rights bring true human flourishing — one aspect of which is friendship. Several contemporary ideas related to charitable works continue to be structured around delivering help and support to people with disabilities within institutional care as well as fund-raising on their behalf. Despite the nobility of these actions, the fund-raising donations, perceived as a fulfillment of the socio-economic needs of the disabled, have not solved the problems that people with disability face in forming friendships. People with disabilities continue to experience loneliness, since the distribution of rights cannot replace the need for participation and belonging including the need for creating friendships (Chappell, 1994; McVilly et al., 2006). The 2014 Australian Ted Talk presented by a person with Downs Syndrome goes in such a direction. Addressing the problematic view that mainstream society projects at people with disabilities, in their own experience, people with disabilities are still perceived as objects of pity and care or, to some extent, as a type of moral inspiration for "normal" people. (@StellaYoung, «I am not your inspiration, thank you very much», April 2014). All this evokes an appeal for respect for their dignity and a deeper sense of belonging that surpasses the framework of charity and rights and, instead, centers on their appeal for personal, relational, and friendly communication. The work perceived as charitable and the distribution of rights to people with disabilities has not eradicated deeper loneliness and the request for love and acceptance, nor has

it stopped disabled people's appeal for having meaningful relationships. The objectification of a person to care and charity, in a broader sense, can create within people devastating feelings of rejection, isolation, and loneliness. People with disabilities, like every "normal" or able-bodied individual, want to belong not only as icons of pity and charity but as human beings capable of relationships. Thus, the deepest problem that comes from feelings of loneliness is not only the lack of social relationships, such as friendship, but the objectification of people and, relatedly, the deprivation of a person's dignity in so much as she/he is reduced to a means for other people's charity. Being reduced to charitable care or being seen as objects of mercy, besides bringing isolation, eclipse a person's dignity and his/her desire for relationships. Participating in friendship, on the contrary, can not only initiate a feeling of true belonging, but it can transform social attitudes and actualize the return of disabled people into socio-relational visibility. Instead of remaining the image of prejudice or stereotypes of help, rights, or charity, relationships of friendship can overcome disabled persons' loneliness and re-open the way of social solidarity in terms of common belonging instead of the distribution of rights and performance of an "incomplete" sense of inclusion. In order to transcend the objectification of disabled people, relationships of friendship continue to look to different ways that promote individuals' subjectivities and treat others not as objects of cure/care but as subjects of relation. Thus, relationships of friendship are not only ways to combat loneliness, but they reveal a person's identity and subjectivity, and they express his/her relational need for the other. For a disabled person — as for any other person — friendship is the process whereby a person is realized as a subject instead of an object of care, pity, or someone else's moral benevolence.

Concluding remarks and a proposal to rethink friendship

In the foregoing discussion, I aimed to rethink the reasons for the socio-cultural obstacles for people with disabilities in forming friendships. Despite large-scale contemporary cultural endeavors and inclusion initiatives, including those of Pope Francis, the broader cultural mindset causing the exclusion of people with disabilities remains. The notions of vulnerability, non-normalcy, and piteous and

charitable attitudes that I find to be socio-anthropological marks appear undesirable notions that, on the one hand, can lead to disabled people's lack of friendship and, on the other hand, challenge contemporary frameworks of the invulnerability, normalcy, and charity of the general population's mindset. In order to overcome these attitudes, the above discussion first suggested rethinking notions of vulnerability, non-normalcy, and social solidarity. This first means that as humans people are vulnerable by virtue of the need for another person — a possible friend — and as such interdependently belong to each other. The isolation as a result of being marked as vulnerable can have harmful and challenging consequences (Wilson – Krueger, et al. 2007) not only for people with disabilities but also for so-called able-bodied persons. This suggests that rethinking how common responsibility enfolded in the work of social solidarity and social justice can help to transcend the anthropological divide between those marked as vulnerable (e.g. people with disabilities) and those who identify as non-vulnerable. The rethinking can thereby decrease isolation by opening up toward a more participatory account of solidarity, not only as inclusive towards the promotion of disability inclusion, but furthermore interested in promoting equal access to friendship. In this regard, I suggest that before common actions are taken and the work of social justice — including equal participation in friendship — continues, changes in mindsets regarding the above-mentioned anthropological settings such as vulnerability and dependency ought to be properly reconsidered. When confronted with the caveats surrounding the dichotomy of normalcy/non-normalcy, the stigma of non-normalcy often reveals that not only are disabled people excluded from the normality scale but every person who falls out of the so-called standardized norm of physical or intellectual functioning is disposed to a mark of less normalcy, a kind of "less than normal" existence. The notion of charity, in confrontation with disability and friendship, requires an interdisciplinary approach based on the assumption that charity is one's love for a friend, and charity as a mark of disabled people's social status requires integration and reevaluation. Not only does the hermeneutic of these two approaches to charity oppose one another, but they also require adequate elaboration within the social and disability community. This elaboration will either stimulate integration or con-

ceptual clarity concerning friendship anthropology.

Secondly, the discussion further suggested rethinking the notion of friendship in close relation to disability. My suggestion is to *rethink friendship as interdependent participation*. This notion puts forth that with regard to disability, friendship requires rethinking the notions of otherness, vulnerability, and solidarity. The aspects integrated into a framework of rethinking friendship in this regard are possibilities for every person to relate with others on levels of respect for a person's intrinsic dignity instead of attachment labels and social behaviors. The integration of vulnerability and solidarity as two embodied elements of the reconsideration of friendship contributes to the re-co-creation of a person's dignity in terms of a rebirth of one's moral and personal values. The rethinking of friendship's interdependent character stresses attention to the notion of difference and, based on the implication of this difference, results in rethinking the concept of an "alter ego" meaning, the other. This means that contrary to friendship grounded in a high appreciation of similarity, the difference and uniqueness embodied in friendship evoke otherness and friendship in its ontological perspective and disability as an integrative part of such a framework. Belonging interdependently as friends does not mean being enslaved, possessed, or immersed by the other. The friend, as the other, discovers in the other his/her own actualized human and relational potentiality, becoming who one truly is through being accepted as a friend.

Overall, friends are unequal, never exactly the same, and often not even similar. They are different persons who together process the actualization of the community of friendship. When friends accept one another's vulnerability and difference, not only is the relationship of interdependent participation developed, but together they create interdependent unity. This is a far cry from enslavement by one's moral obligation towards another. Being together not only means friendship as *relational anthropology* of interdependent participation, but it is a possibility of a dual unity where each person remains oneself in relational respect towards the other.

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NOTE

1. Medical model of disability has been used in describing disability as physical condition

understood as “personal tragedy”, disadvantage or illness that requires to be fixed, cured or prevented. As such disability requires medical expertise, rehabilitation, cure, or prevention. (Cameron, 2014).

2. Social Model of Disability emerged as the response to medical model of disability in 1970s. Contrary to the medical model, the social model rationale is oriented towards people’s experiences of disability and critical of societal and cultural prejudices towards disabled people. The social model sees disability as a social barrier and a problem of society not an individual disadvantage. The social model distinguished between the ‘impairment’ (physical disadvantage) and ‘disability’ (as a social disadvantage, restriction activity due to impairment). (Oliver, 1990; Barnes, 1996).

3. The charity model is the sub-model of the medical model of disability and is in close link with a rehabilitation model. The main characteristic of such a model is that despite its noble and humanitarian intentions towards disabled people it has reduced and objectified people with disabilities into objects in need of mercy or cure of institutional or medical intervention. In such regard disabled people were associated as images of pity, needy, impoverished, and poor. Not only is a true meaning of charity within such a model materialized, but disability is described as tragic, and reduced to requirements of institutional medical or social cure (or otherwise care). This resulted in many people with disability being placed into mental institutions in order to receive “adequate care.” The charity model was also applied in fundraising, advertising campaigns,

and video commercials (e.g. Children in needs video; The Spastics Society in UK). The disabled people and children with disabilities were in such regard identified with the image of poor child-like victims or tragically portrayed as a means to raise the moral aspiration of able-bodied people and make them a goodly donor. In such regard, the charity model simply remains perceived as negative. This not only creates confusion in discussing charity within context of disability studies and other academic fields such as philosophy or theology. The confusion is also imposed on regard of a distinction between the meaning of charity, love and almsgiving. (Vuk, 2020).