

PARENTS WITH DISABILITIES

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April 15, 2014

Having and raising children is widely regarded as one of the most valuable projects a person can undertake.¹ Yet many disabled people like myself find it difficult to share fully in this value because of obstacles that arise from widespread social attitudes about disability.² A common assumption is that having a disability tends to make someone less fit to parent than others while having a severe disability makes someone unfit to parent at all.³ Parenting a child, some think, is just too burdensome for a disabled person who is already struggling to maintain herself. Disabled people, it is also assumed, are more likely to have disabled children with lives that are often worse than those of others.⁴ And some people with disabilities are discouraged from procreating because they are regarded as asexual and romantically undesirable in virtue of being regarded as ‘sick’ or ‘defective’.⁵

These attitudes about people with disabilities played a prominent role in the forced sterilizations of the eugenics movement, but even now the assumptions that

¹ For discussions of the parent/child relationship and the value of having and raising children more generally, see (Anderson 1990; Brighthouse and Swift 2006; Hursthouse 1987; Overall 2012; Paul 2015; Robertson 1994)

² (NCD 2012). This chapter has especially benefited from this government report, which outlines many of the legal hurdles that disabled people currently face if they decide to reproduce and raise children. Those who want to investigate some of the empirical claims I make should look at this excellent report in detail.

³ (Asch 1989).

⁴ (Asch and Roussou 1985; Fine and Asch 1981; A. Harris and Wideman 1988).

⁵ (A. Harris and Wideman 1988).

disabled people are generally ill-equipped to parent, genetically inferior and asexual have profound effects on our ability to have and raise children. Many disabled children, particularly those with more severe disabilities, are not taught much about sexuality, reproduction and parenting, they are not usually encouraged to date nor are they commonly subject to social expectations and informal inducements to raise a family of their own, and many of them are not seen as potential romantic partners by non-disabled people. Some healthcare professionals, who regard it as improper for people with certain kinds of disabilities to reproduce or parent, are less likely to screen for sexually transmitted diseases, discuss sexual health, dysfunction or contraception, or provide access to assistive reproductive technologies; they may also discourage their disabled patients from becoming pregnant and pressure them to have an abortion if they do conceive.⁶ If a disabled person decides to have or adopt a child, she is likely to be met with suspicion and scrutiny from adoption agencies, social workers, family court judges, friends, family and society at large. She may also have difficulty securing the kinds of accommodations she needs to be a good parent. These forms of treatment can send disabled people the message that procreation and parenting are not for them. Many of them simply acquiesce by choosing not to raise families of their own while others have formed mutually supporting communities that help them to be better parents.

The assumption that having a disability tends to make someone an unfit or bad parent may seem especially relevant as a factor in decisions about whether to allow, encourage and assist disabled people to reproduce and raise children. Yet

⁶ (Tankard Reist 2006).

there are reasons to doubt whether there is such a close connection between having a disability in general and lacking the ability to raise a child well. We may not fully appreciate the potential that many disabled people have to be good parents because of various unconscious biases about disability and because we lack adequate information about whether, for example, blind people or quadriplegics can, with the right accommodations, adequately care for a child. Some people have physical and mental impairments that prevent them from taking primary responsibility for an infant, yet other disabled people are fine caregivers who are able to meet the physical, psychological and emotional needs of their child very well.

Moral questions about allowing, encouraging and assisting disabled people to reproduce and raise children are likely to be contentious because they often depend on empirical facts that are tough to know as well as conflicting values that are difficult to interpret and apply. One way to make some progress in this area is to identify more specific questions to address along with some widely shared values that can guide our deliberations about them.

There are questions, for instance, about what the law should say about disabled people who wish to procreate and parent as well as questions about what socially enforced moral rules a society should affirm regarding such matters and ones about how an ideally virtuous person would do in relevant circumstances. A disabled person may have the moral and legal right to reproduce even though it would be morally inadvisable for her to do so because her condition is so

unpredictable.⁷ Laws may not be fine-grained enough to give adequate guidance in uncommon cases or to fully realize the values that justify having the laws in the first place – the federal 15/22 rule, for example, says that if a child is in foster care for 15 of the last 22 months then states must file a petition to terminate parental rights, but some disabled people may run afoul of the rule because they were forced to spend that time separated from their child in order to adapt their homes, learn new parenting techniques and otherwise satisfy social workers that they are fit to parent.⁸ Professional standards that are sensitive to some of the non-standard but effective ways that many disabled people fulfill their parental responsibilities should guide courts, social workers, adoption agencies and assistive reproductive providers in their assessments of disabled parents. The law may give parents significant latitude about how they raise their children, but stricter social moral rules and individual judgment may be needed to determine the risks they may impose on their children as well as the circumstances in which others should intervene on behalf of another person's child. Disabilities of various kinds will raise different moral questions about procreation and parenting children of different ages and abilities, and disabled women and female care-givers face pressing issues about body image, gendered roles, sexual vulnerability, exclusion and oppression.⁹ And, many of us, disabled and non-disabled alike, have conscientiously asked ourselves

⁷ Some people argue, for example, that we are permitted to become parents only if we reasonably believe we can satisfy the basic needs of our prospective children or can ensure that they will live a life of at least average wellbeing. See (Cassidy 2006).

⁸ 1997 Adoption and Safe Families Act. 42 U.S.C. § 675

⁹ See (Card 1996; Kittay 1998, 1999, 2000, 2001; Overall 2012; Silvers 1995; Silvers et al. 1998; Silvers 1998; Wendell 1996; Young 2005).

whether we would be good parents and, if we already have children, we wonder whether we are doing enough for them.¹⁰

When considering these and other moral issues about disabled people who wish to procreate and rear children, reasonable people should agree that the rights, wellbeing and development of children are very important. We should also accept that the autonomy of disabled people matters as well, as does having meaningful opportunities to take part in the value of having and raising children. Reasonable people aim to avoid unjustified discrimination and prejudice, they value justice, and they try not to humiliate, degrade or otherwise disrespect themselves or others.

The aims of this chapter are, *first*, to identify and clarify some values that are relevant to questions about allowing, encouraging and assisting disabled people to procreate and raise children, *second*, to give an overview of how these values can help us to address certain legal questions that arise for disabled people who aim to procreate and parent, *third*, to raise concerns about how to properly assess the parenting capacities of people with disabilities, and *fourth*, to suggest some ways in which having a disability can actually make someone a better parent.

Reasonable values

We can identify several values that are at stake when assessing practical issues that arise for (prospective) parents with disabilities. The values are widely

¹⁰ For discussions about who should have children, what sort of children they should aim to have, how far they ought to go in helping them and how difficult it is to know these things in advance, see (Cassidy 2006; O'Neill et al. 1979; Overall 2012; Savulescu and Kahane 2009; Steinbock and McClamrock 1994; Velleman 2005).

shared when described at a relatively high level of generality, which allows us to set aside for practical purposes questions about their foundation and focus instead on how to interpret and apply them as a whole. The values can conflict with one another and none of them takes absolute priority over the others. Our task is not simply to weigh and balance the values against one another to determine what would bring about the best overall state of affairs. Some of the values are to be respected, honored and cherished, not just promoted, so moral judgment involves reconciling various presumptions that can override, defeat and enable one another.

First, many people deeply value reproduction and parenting. Although a life can go perfectly well without children, procreation and parenting usually involve creating a valuable relationship between parent and child that paradigmatically involves mutual love, trust and intimacy as well as special responsibilities and obligations to care for the child and to help her develop. Such relationships often give shape and meaning to the lives of parents, they tend to become part of their identity, and they often provide a deep source of satisfaction. Those who are unable to become parents but wish to do so tend to experience deep sorrow and despair for their inability to participate in what they see as a very great good.

Second, it is good for people to have the ability to make significant decisions about their own lives without undue influence from others, especially with regard to reproduction, marriage, parenting, religious faith, etc.¹¹ Autonomy in this sense may ground a presumptive moral right that imposes duties on others. A right to autonomy would include a right to make one's own choices about when and with

¹¹ (Dworkin 1993).

whom to reproduce and how many children to have as well as a right to direct their upbringing. Autonomy rights must be interpreted and qualified to specify what counts as undue influence on our decisions and what counts as a significant life decision; they must also say how potential conflicts among the autonomous choices of different people should be reconciled.

Third, wellbeing is important as well, but different aspects of it matter in different ways. Basic needs for food, shelter, security, and health may ground presumptive moral rights and duties while other aspects of happiness may be good to promote without generating any moral requirement to do so. The wellbeing of children, whose basic needs also include education and moral development, may warrant special moral protection because of their vulnerability and dependence. A substantive theory of wellbeing, or perhaps a set of such theories that are suited to different purposes and contexts, would specify in more detail the ingredients of a good life.

Fourth, it is also important to avoid relying on morally irrelevant distinctions among persons in how we treat or regard them, particularly when such treatment is to their detriment.¹² A fuller account of discrimination in this sense would specify the kinds of distinctions among persons that are legitimate to rely on and in what contexts, but clearly denying university admission to someone simply because she is African American is unjustified discrimination while forbidding a blind person from driving a school bus because of safety concerns is not. Other kinds of potentially unjustified discrimination are more implicit, such as relying on morally irrelevant

¹² (Boxill 1984; Hill 1991).

factors because they correlate with relevant ones or disproportionately disadvantaging people on account of morally irrelevant characteristics as a side effect of an act or policy that was not aimed at doing so.

Finally, the dignity of persons is a great value, which means we have strong reasons not to demean, humiliate or ridicule others as well as reasons to *express* respect to them. This value needs further elaboration depending on the context in which it is applied, but various kinds of verbal and physical abuse, cruelty, objectification, and neglect are incompatible with having and showing full respect to the dignity of children, while it can be humiliating and degrading, for example, to be forced to justify one's parenting abilities to others.

Legal issues

To see how these values can come into conflict in certain contexts and be reconciled for particular purposes, let's consider how the U.S. legal system has addressed questions of disability, procreation and parenting.

Parental rights and child interests

The legal rights to procreate and raise children are included in human rights documents and recognized by the Supreme Court as falling under the Due Process Clause of the 14th Amendment.¹³ The Supreme Court has consistently affirmed that parents have fundamental but limited legal rights to reproductive freedom as well

¹³ See for example the UN Declaration of Human Rights and the UN Convention on the Rights of Persons with Disabilities.

as to nurture, care for, educate and direct their children as they see fit.¹⁴ These rights are grounded in the values of autonomy, privacy and parent/child relationships. The legal right to reproductive freedom is a right to decide for oneself whether or not to have children and, if so, with whom, when and how many children to have. It is not recognized in law as a positive right to assistance from others to reproduce, but only as a negative right that protects us from various kinds of interference from others when making certain reproductive choices. Having the legal right to raise children involves certain authorizations to make decisions for them regarding, for example, food, education and association; this right also comes with certain parental responsibilities to, for instance, meet the child's basic needs.

Human rights documents and the Supreme Court have also afforded children basic legal rights to security of the person, freedom from cruel or degrading treatment, and basic subsistence.¹⁵ These rights are grounded in their dignity, wellbeing and status as future full citizens.¹⁶

The Supreme Court has held that parental rights must be balanced against the interests of others, especially children and potential children.¹⁷ In one kind of case, a person's parental rights can be terminated if an individualized hearing, which satisfies standards of due process, finds that she is an unfit parent. But there

¹⁴ Major cases guaranteeing reproductive freedom include *Griswold v. Connecticut* 381 U.S. 479 (1965), *Roe v. Wade* 410 U.S. 113 (1973), and *Planned Parenthood of Southeastern Pennsylvania v. Casey* 505 U.S. 833 (1992). Major cases guaranteeing parental rights include *Meyer v. Nebraska* (1923), *Pierce v. Society of Sisters* 268 U.S. 510 (1925), *Stanley v. Illinois* 405 U.S. 645 (1972), *Wisconsin v. Yoder* 406 U.S. 205 (1972) and *Troxel v. Granville* 530 U.S. 57 (2000).

¹⁵ See the United Nations Convention on the Rights of the Child as well as the Supreme Court cases, cited above.

¹⁶ For a discussion of the moral status of children see (Schapiro 1999).

¹⁷ *Stanley v. Illinois* 405 U.S. 645 (1972), *Wisconsin v. Yoder* 406 U.S. 205 (1972).

is a strong legal presumption in such proceedings for retaining parental rights, according to the Court, so the government must provide compelling and convincing evidence that the person, for example, abused or neglected her child. Simply showing that someone is not the best parent possible, or only mediocre at parenting, is not legally sufficient to override her parental rights, even if severing them would be good for the child.¹⁸ Others, however, may prefer different legal arrangements that give greater legal priority to the interests of children over the rights of parents by, for instance, allowing courts to abnegate or limit parental rights when there are alternative arrangements that are found to be practicable and significantly better for the child, even if the parents are capable of adequately caring for the child themselves.¹⁹

Another kind of conflict between the rights of parents and the interests of children can arise when the parents of a child divorce, or when a child is born outside of marriage, or when the parents disagree about how to raise the child. The law allows significant latitude for parents to decide among themselves how to handle such matters, but when an agreement cannot be reached and courts must step in to resolve a dispute, they are directed to base their decisions on what is in the best interests of the child.²⁰ Some may think, however, that courts should play a more active role in scrutinizing even private child custody, visitation and rearing arrangements among parents in order to ensure that the parents do what is best for the child.

¹⁸ *Lassiter v. Department of Social Services* 452 U.S. 18 and *Santosky v. Kramer* 455 U.S. 745 (1982).

¹⁹ (Tittle 2004).

²⁰ (NCD 2012: 138).

Tensions between the interests of children and the legal rights of *prospective* parents can arise when a person seeks to adopt a child. Prospective parents have the legal right to try to adopt a child, but the government can impose eligibility requirements on adoption that are (perhaps mistakenly) taken to be in the best interests of those children. In practice, states have placed relatively few legal restrictions on who may adopt a child, although some of them forbid adoption by people who have been convicted of a sexual offense, who are under a certain age or who are gay.²¹ Adoption agencies are for the most part legally free to make adoption decisions based on their own extra-legal criteria, which are ostensibly aimed at placing children with parents who will best serve the child's interests. A different legal arrangement, however, would be to recognize a positive legal right to become a parent, perhaps one grounded in the value of the parent-child relationship, and so alter eligibility and placement criteria to allow and encourage adoption by more people who can satisfy the basic needs of children.²² Or, some may favor the current system but insist that the government should play a more active role in ensuring that adoption arrangements are in the best interests of the child.

Finally, legal conflicts can arise between the rights of *prospective* parents and the interests of *potential* children. Although the law does not recognize fetuses as full legal persons, the Supreme Court found in *Roe v. Wade* that the state has reasons to protect the interests of potential legal persons, although it also held that these reasons are not strong enough to override the reproductive rights of women. In

²¹ (Gateway 2012; James 2013; Press 2009).

²² (Daar 2013; J. Harris 1998; Robertson 1994).

some states, for example, a pregnant woman who engages in substance abuse that is likely to substantially harm her fetus can be prosecuted or involuntarily committed to a treatment center, while federal law makes it a crime to commit violent assault against a fetus.²³ Another context in which the interests of prospective parents and potential children can be at odds is when someone seeks to use assistive reproductive technologies, such as *in vitro* fertilization, to produce a child. The government has mostly left unregulated how assistive reproductive technology providers decide who is eligible for their services. This has allowed them to consider the ability of prospective parents to care for a potential child when making those decisions. These various legal arrangements would be substantially different, however, if there were a positive legal right to reproduce or if fetuses were regarded as full legal persons. Some have gone so far as to argue, for instance, that the government should regulate who can reproduce by issuing parenting licenses only to those who can prove that they are likely to secure the best interests of their potential child.²⁴

Discrimination and child interests

In addition to protecting the rights of parents and prospective parents along with the interests of children and potential children, U.S. law forbids certain kinds of discrimination on the basis of race, sex, religion or disability. One kind of illegal discrimination would occur if, for example, the parental rights of a disabled person were terminated just because she has a disability, or if a disabled person were not

²³ (Eckholm 2013; Rights 2000) Unborn Victims of Violence Act of 2004.

²⁴ (Tittle 2004).

awarded custody of her child or denied access to assistive reproductive technologies or adoption simply on the grounds that she is disabled. Often, however, disabled people are at a disadvantage in such situations, not merely because we are disabled, but because it is assumed that having a disability tends to make someone an unfit or bad parent, so there is a question of whether such treatment counts as unjustified discrimination.

The Americans with Disabilities Act of 1990 and its subsequent amendments, along with the Rehabilitation Act of 1973, prohibit many kinds of discrimination on the basis of disability.²⁵ These laws also aim to give disabled people an equal opportunity to participate in and benefit from a variety of public and private programs and services. Someone has a disability, according to U.S. law, if she has as an impairment that substantially limits a major life activity, such as seeing, hearing or walking, or she has an impairment that substantially limits a major bodily function, such as digestion, respiration or reproduction.²⁶ Taken together, the ADA and the Rehabilitation act forbid public entities, such as governments, commercial facilities, and public transportation, from excluding disabled people from their activities solely on the basis of disability. These laws also require public entities to provide reasonable accommodations so that disabled people can participate fully in their programs.

²⁵ The Rehabilitation Act applies to any organization that receives federal money while the ADA also covers parts of the private sphere, such as commercial facilities, telecommunications and employment, as well as state and local governments, including public transportation and public schools.

²⁶ See 42 U.S.C. § 12102 and *Bragdon v. Abbott* 524 U.S. 624 (1998).

There are several explicit exceptions to these anti-discrimination provisions, however, that are included in the law. Public entities may include disability as a criterion of eligibility and refuse to provide certain reasonable accommodations to disabled people as long as doing otherwise would (1) fundamentally alter the nature of their programs, (2) place an undue burden on them, or (3) pose a *direct threat* to the health and safety of others.²⁷ When public entities choose to exclude certain people with disabilities from their programs because of the direct threat that including them would supposedly pose to others, they are legally required to conduct individualized assessments that take into account current medical knowledge and objective scientific evidence in order to assess the “nature, duration, and severity of the risk; the probability that the potential injury will actually occur; and whether reasonable modifications of policies, practices, or procedures or the provision of auxiliary aids or services will mitigate the risk.”²⁸ Public entities may not legally rely on stereotypes or mere speculations about disability when making such determinations and they must take into account reasonable accommodations when making their assessments.²⁹ Although the law is not always followed in these respects, in order for adoption agencies, assistive reproductive technology clinics and courts to exclude or disadvantage a disabled person as posing a direct threat to his (potential) children, they must legally show a connection between that specific person’s disability and his parenting capacities.

²⁷ 28 C.F.R. § 36.104, 208.

²⁸ 28 C.F.R. § 36.208.

²⁹ 28 C.F.R. § 35.130(h), 139.

Many states nonetheless use disability in general as one among several factors that can justify terminating a person’s parental rights. Many family courts take into account the physical and mental health of parents when deciding what custody arrangements are in the best interests of the child. Jurisdictions vary regarding what sort of connection (if any) must be made between a person’s disability and her ability to parent, which leaves room for discrimination by social workers, psychologists, judges and juries who can rely to some extent on common stereotypes about the parenting abilities of disabled people. A trial court judge, for example, altered a custody order because, in his judgment, the child’s quadriplegic father could not take his son fishing, play baseball with him or otherwise have a “normal” relationship with the child.³⁰ Another trial judge granted primary custody to a father because the mother had a developmental disability that, he assumed, meant that the woman could not help the child develop normally.³¹ And, in a recent case, two blind parents were separated from their child as unfit parents because the mother was having trouble breastfeeding.³² Subsequent proceedings overturned the rulings in each case on grounds that there was not sufficient evidence to establish in these cases that having a disability made these people unfit or bad parents.³³

Adoption agencies and most assistive reproductive technology providers are public entities that fall within the scope of the ADA. Many of them, however, deny their services to prospective parents with disabilities altogether or significantly

³⁰ *In re Marriage of Carney* 24 Cal.3d 725 (1979). See (Stein 1994).

³¹ *Holtz v. Holtz* ND 105, 595 N.W.2d 1 (1999).

³² (James 2010).

³³ For discussion of these and other cases, see (NCD 2012).

discount disabled applicants as such.³⁴ They defend such treatment by claiming that, even with reasonable accommodations, people with disabilities are unlikely to be good parents because they are disabled. Assistive reproductive technology providers also tend to assume that pregnancy is too dangerous for many disabled people and that certain people with disabilities are likely to pass on their disability to their child. As they see it, there is no positive right to reproduce, they are not preventing the disabled people from procreating or adopting a child, only refusing to assist them in doing so, and they reasonably think that assisting a disabled person to become pregnant or adopt a child would pose a significant risk to others that could not be mitigated by reasonable accommodations.

Further legal issues

There are various other legal questions that arise for disabled people who wish to have and raise children. Perhaps there should be a positive legal right to reproduce or parent, which would require providing greater assistance to disabled people in the form of, for example, surrogacy or home attendants. There are questions of distributive justice about people with certain kinds of disabilities who are less capable of becoming pregnant naturally than other people yet who have fewer resources to devote to hiring expensive adoption agencies and assistive reproductive technology providers. Disabled people who are economically disadvantaged as a result of their conditions may not have the money to secure legal representation in custody proceedings or to hire outside parenting assessments by

³⁴ (Bartholet 1996; Collier 2008) (both cited in (NCD 2012))

those who are more familiar with alternative and accessible parenting styles.³⁵ We can also ask what sorts of accommodations, if any, the should government provide to specifically allow disabled people to fulfill parenting responsibilities. And there are issues of respect that may arise when disabled people are disproportionately called upon to justify their parenting abilities, particularly when people who can reproduce by natural means are typically not required to explain why they would be good parents. This kind of treatment can intimidate otherwise capable disabled people from becoming parents and lead the ones who have children to avoid associating with others, asking for help, revealing the extent of their disability or leaving bad marriages for fear that their children will be taken from them.

Parenting assessments

Let's now consider how we should go about assessing whether and to what extent a disabled person can and will serve the interests of a child. As we have seen, this issue is central for addressing legal questions about parental rights, custody, adoption and access to assistive reproductive technologies. Within the bounds of the law a disabled person may also sincerely ask herself, or seek guidance from others about, whether she should have children in light of her condition and her social environment or, if she already has one, what accommodations she should seek and what decisions she should make in order to be a good parent to her child. Her friends and neighbors may wonder as well what kinds of parenting assistance

³⁵ The Supreme Court held in *Lassiter v. Department of Social Services* 452 U.S. 18 that parents do not always have a right to council in proceedings that may terminate their parental rights.

they should offer her, whether it is appropriate to allow her to babysit their children, under what circumstances they should raise concerns about the welfare of her child, and so on.

When we consider whether a disabled person is able to be a fit and good parent, we must try as best we can to identify and overcome any biases we may have that may prejudice our assessments. There may be connections between a person's disability and her parenting skills, but in making such determinations we should be careful not to assume that an impairment in one area automatically diminishes other abilities, that impairments are permanently disabling even with reasonable accommodations, or that the usual ways of completing parenting tasks are the only ones available. We may initially find ourselves assuming that our own experiences make us good judges of what people with disabilities can and cannot do for children – we may think, for instance, that if we were to become blind then we would certainly be unable to keep track of a child or give her appropriate medicine, which may lead us to conclude that those who are congenitally blind must lack those essential parenting skills as well. Further investigation, however, would have revealed that many blind people have developed adaptive strategies that allow them to fulfill these parental functions. We may also have a tendency to over-ascribe certain behaviors to a person's disability rather than to her choices and luck – we may take the irritation an autistic man shows at a recalcitrant social worker or the difficulty a blind woman has at breastfeeding as confirming evidence that their disabilities make them unfit parents. Yet we would not usually draw the same conclusions if we observed these behaviors in non-disabled people. Shocking news

reports, folk wisdom, gut reactions and social stigma about disability may all lead us to overgeneralize about the parenting abilities of people with disabilities.

There are other biases that those who work for government services such as public health clinics, housing departments, and welfare offices should be particularly careful to avoid. People in these positions are often required by law to report suspicion of child abuse or neglect, yet because disabled people are in general more likely than others to require government services, disabled people tend to come to the attention of government workers more often than those who are more financially secure.³⁶ This heightened scrutiny can lead to more reports of abuse and neglect for disabled people and the illicit inference that disabled people are therefore more likely than others to abuse or neglect their children. Yet, because of sampling bias about who is likely to receive such increased review, the rates of abuse and neglect among disabled people may be the same as or lower than the population as a whole. Once a report to child protective services is made there may be a tendency to assume that the accusations contain some truth, which can lead to invasive and overly thorough investigations, especially when combined with other commonly accepted assumptions about the parenting fitness of disabled people. There is some evidence that people with disabilities are thus disproportionately put into the child welfare system, and once there, they are disproportionately likely to lose their children.³⁷

When we attempt to assess a person's fitness as a parent, either formally or informally, we must also be careful to take account of various accommodations that

³⁶ (Chand 2000; Shade 1998; Watkins 1995) (all cited in (NCD 2012)).

³⁷ (Swain and Cameron 2003) (cited in (NCD 2012)).

have been or could be made for the person's disability. Observing a disabled person in an environment that has not been modified for her parenting needs may not fully reveal her ability to rear a child effectively. In some cases parenting assessments are simply made in an unfamiliar office, other times a "home study" may be completed before the person has completed modifications to her home, while in most cases an observer may simply lack the training, rubrics or data to determine whether an individual with a disability has the potential to be a good parent in an adapted environment.³⁸

It is difficult to determine, however, what sorts of accommodations should be taken into account when making such assessments. If someone has the resources and willingness to secure structural modifications to her home and to hire an extensive support staff then such accommodations should be considered, but what about someone who cannot afford such accommodations? Part of the solution may be to regard parenting as a major life activity under the ADA, which would then require public entities, including the government, to provide reasonable accommodations so that a disabled person can fulfill her parenting responsibilities. A further problem is how parenting assessments are to be made if certain accommodations are legally required but are not actually being made. If, for example, public transportation for the disabled were dependable, if medical offices, parks and schools were accessible, if teachers provided accessible materials to parents, and if employment discrimination against the disabled did not occur then a disabled person might be a fine parent. But, as things stand, these areas of life give

³⁸ (McWey et al. 2006) (cited in (NCD 2012)).

her great difficulty, so how do we assess her parenting abilities in a non-ideal and unjust environment that is likely to persist?

Parenting with a disability

There may be a remaining suspicion, even after correcting for various biases about disability and taking into account reasonable accommodations for disabled parents, that children nonetheless tend to be better off, all else equal, if they are raised by sighted parents rather than blind ones, by people who have full use of their limbs rather than by those who are quadriplegic, and by people who are mentally well-adjusted rather than by those who are chronically depressed. Perhaps we should do more to support disabled parents and exercise greater caution before severing their parental rights, but we may nonetheless think that some hesitation is appropriate before allowing, encouraging or helping people with certain kinds of disabilities to become parents or take primary custody of a child.

We must strike an appropriate balance, it may seem, between the interests some disabled people have in procreating and parenting with the interests of their (potential) children, for it may appear obvious that children are usually worse off when their parents are disabled. It is true that some people have disabilities that prevent them from taking primary responsibility for the care of a child while other disabled people are unfit or bad parents for other reasons. But in many cases the interests of disabled parents and the interests of their children are aligned and mutually supporting. Having a disability need not prevent someone from meeting

her child's basic needs, while being disabled can actually make someone an even better parent.

One major concern may simply be that people with certain kinds of disabilities cannot provide for the basic physical needs of a child in, for example, food, clothing, shelter and safety. People with disabilities, however, have developed effective and clever ways of caring for their children. Many of us who have children have extended the adaptive strategies that allow us to meet our own physical needs to allow us fulfill our parental responsibilities. Blind people, for example, often do their own grocery shopping with ease by navigating public transportation, relying on smell and feel when picking out food, utilizing technology that can read aloud labels and paper money, and relying on contingency plans if they become lost or disoriented. There are also many types of equipment that are specially designed to assist disabled parents. Wheelchair users, for example, can use accessible cribs, changing tables, bathtubs and highchairs, they can attach child seats to their wheelchairs, and they can use lifting harnesses. People with disabilities have developed adaptations for particular parenting functions. Blind people, for example, can install security alarms on bookcases, cupboards and doors as well as attach bells to their child's shoes; they can purchase different sized medicine plungers; they can use labeling tape around the house; and they can rely on their other senses to determine if their child is clean and eating properly. Disabled people can train their children in various ways by placing special emphasis on teaching their children not to run off or to come when called. And people with disabilities can rely on our

spouses, partners or attendants to assist them as well as utilize specialty training from occupational therapists to ensure that the physical needs of a child are met.

Creating an environment in which the basic needs of a child are taken care of requires planning, ingenuity, flexibility, perseverance, patience and good sense. Disabled parents often must exhibit these qualities to a higher degree than other parents in order to care for our child, however, because we often do not have access to the same kinds of received parenting wisdom that others may rely on. Disabled parents often must work harder than others to decide how we will care for our child given our abilities and social circumstances, which are not widely shared by others. Until an extensive fund of parenting knowledge is available to blind parents, for example, assessing a blind person's parenting skills should sometimes take account of how well she manages her own disability as well as her ability and willingness to develop parenting strategies that allow her to meet the basic needs of her child.

Parents with disabilities can also provide various special benefits to our children that may also need to be considered when assessing our fitness as parents. Disabled parents can be especially attentive to our children because our parenting strategies often require extensive sensitivity, time and effort, as well as close proximity to the child, which can lead to a stronger bond between them. Children of disabled parents can learn greater patience, self-reliance and flexibility when it takes their disabled parent requires greater time and effort to accomplish various parenting tasks.³⁹ They can become sensitive to their parent's abilities and needs, which may encourage sensitivity and compassion for others as well. If our child is

³⁹ (Asch 1989).

disabled then we may be in an especially good position to guide the child's development.

Children of disabled people have opportunities to assist their disabled parent. When the assistance that children are expected to provide their disabled parent or their siblings should be age-appropriate and tailored to avoid placing undue burdens on them, children can develop independence, problem-solving skills, a sense of responsibility and self-esteem.⁴⁰ These experiences also teach them that people often rely on one another without shame or disgrace. They also learn how to offer and give help in respectful ways.

Disabled people often exhibit virtues that can positively influence our child's character development. Disabled people are often humble because of our limitations but also confident in advocating for our rights. We tend to be independent in securing our own basic needs but also gracious when asking for and accepting help. We usually accept our limitations, hardships and vulnerabilities and we are often accepting and tolerant of physical and cultural differences more generally. We have usually suffered prejudice, oppression and injustice without lapsing into despair or cynicism, but we also tend to appreciate the good will of others who have helped us. Many disabled people have a sense of humor, especially in adversity, and we often take a broader perspective on the world that downplays various kinds of fads and social expectations. Disabled people can also pass down our concern for social justice, compassion and respect as well as the high value many of them place on family and friends.

⁴⁰ For discussions of what is called "parentification" see (Chase 1999).

Having children can also provide great benefits to disabled people as well. People with disabilities sometimes find ourselves somewhat socially isolated because of their condition – we may have difficulty forming close relationships with non-disabled people because we have difficulty communicating with others, engaging in the kinds of activities where people often make new friends, or relating with non-disabled people who are awkward around us. Raising a child can be an opportunity to form and foster a deep, loving and lasting relationship of a kind that we may not otherwise have much opportunity to form. Raising a non-disabled child can give a disabled person some understanding of how non-disabled people view disability while raising a disabled child can help us to find more ways to adapt. And having a child is likely to require people with disabilities to exert our own powers to a greater extent than we otherwise would, which tends to improve our self-esteem and sense of accomplishment, and so make us even better parents.

Conclusion

When my wife and I were deciding whether or not to have children, I was concerned that my visual impairment would prevent me from being the kind of parent I aimed to be. What I have found, now that we have two children, is just the opposite. The skills I have developed adapting to new environments, handling adversity, advocating on my own behalf and seeking necessary assistance, as well as my heightened patience, compassion and sensitivity, have prepared me to recognize and appreciate the responsibilities and joys of parenthood. Although my children have responded in different ways to my disability, one spontaneously reading movie

subtitles for me while the other sends me down wet slides at the park she knows I cannot see, both of them will grow up with an awareness and appreciation of the good that people with disabilities have to offer.

I have found

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