

Table 1 covers area of disability; table 2 the body image; table 3 language around person table 4 ability studies and linked terms such as ableism and table 5 health 52 references are at the end

Table 1

Glossary for the 21 st Century a starting point by Dr. Gregor Wolbring	
Term	Definition
Disability	
<p>If one hears the term disability or disabled person or people with a disability... often two different aspects (body image and social reality) are covered by the term disability</p> <p>a) the terms are used to label the body and its functioning as deficient as impaired as non normative as sub normative based on species-typical expectations and</p> <p>b) the terms are used to describe the social, environmental parameter a person with a certain body functioning faces.</p> <p>I do believe it is better to use different terms for the two areas of body image and social reality. This is reflected in the definitions below.</p> <p>Also to the discussion of “people first language” whether one should use 'disabled person' or 'person with a disability' within the context of this glossary the order is irrelevant as both orders have the same interpretation of the term disability they use. So I do not adhere here to one or the other order.</p> <p>Furthermore one can also reshape the two discourses within ability studies language</p> <p>Body image wording in ability studies language</p> <p>Impairment is a medical model of body understanding. A social model of body language could be <u>ability diverse body</u></p> <p>Social reality in Ability Studies language</p> <p>Disability so the social discrimination can also be rephrased in ability studies language namely <u>disabled people are ability expectation oppressed people. And people with disabilities are people that are oppressed by ability expectations and experiencing ability expectation oppression is a form of disability.</u></p>	

Models of disability

If we ignore for the time being the problem that the term disability is used to describe body image and social reality, there is a debate as to what causes the disablement. The oldest and most used model the medical model situate the culprit of the disablement within the body whereas the newer model put forward by disability right movement in the 1960's onwards perceives the lack of social accommodation to the ability difference of the person as the cause of the disablement. But to be clear the models are about where the disablement is originating from. The models do not say anything about the body image (deviation or variation, see below for body image options). I myself therefore prefer to have the term disability to be used just to highlight the disablement and use other terms to highlight the body image. Instead of using the term disability to label the body image.

Medical model of Disability	People disabled by their body-structure related sub species-typical functioning
Social model of disability	People disabled by the attitudinal and environmental barriers they experience due to their body-structure related sub species-typical functioning that hinder their full and effective participation in society on an equal basis with others
Transhumanized medical model of disability	People disabled by their body structure related -'as impaired labelled'- sub species-typical and species-typical functioning (everyone not performing beyond species-typical functioning).
Transhumanized social model of disability	People disabled by the attitudinal and environmental barriers they experience due to their body-structure related sub species-typical and species-typical functioning that hinder their full and effective participation in society on an equal basis with others

Table 2

The body image	
<p>This section is about the different ways the body can be perceived. In tune with my believe that disability should NOT be used to describe the body I use here impairment to signify a medical model of the body understanding and terms such as ‘variability’ and ‘ability diverse’ to signify a social model of the body understanding of the body.</p>	
Impairment/medical deficiency model of the body/body image	A body that is labelled to function sub species- typical
Transhumanized version of Impairment/medical deficiency model of the body/body image	A body that is labelled to function sub species-typical and species-typical
Vari-ability/ability diverse/ non medical/non deficiency model of the body/body image	A vari-ability in bodily functioning that differs from the species-typical norm but does not exceed the species-typical norm and is seen as a variation and not a deviation
Transhumanized understanding of Variability/ non medical/non deficiency model of the body/body image	A vari-ability in bodily functioning that exceed the species-typical norm and is seen as a variation and not a deviation

Table 3

The person (the definitions here take into account that there are two discourses around the person namely the labelling of the body and the treatment of the person) as outlined above and that the term disabled/disability... should only be used to classify the social reality and that if one wants to describe the body that there are terms such as impairment/variability, ability diverse. If one wants to highlight the body image and the social reality at the same time one has to use a combination.

Disabled person/ability expectation oppressed people	Everyone who encounters body structure/function related attitudinal and environmental barriers that hinders one's full and effective participation in society on an equal basis with others,
Person with a Disability/people who are oppressed by ability expectations	Everyone who encounters body structure/function related attitudinal and environmental barriers that hinders one's full and effective participation in society on an equal basis with others,
Impaired person/Person with an Impairment	Everyone who identifies oneself as having a sub-normative functioning, deficient body based on a species-typical norm.
Vari-abled, ability diverse person/ Person with a vari-abled, ability diverse Body	Everyone who identifies oneself as having a vari- ability in bodily functioning that differs from the species-typical norm but does not exceed the species typical norm.
Vari-abled/ability diverse and disabled person (ability expectation oppressed person)	Everyone who identifies oneself as having a vari- ability in bodily functioning that differs from the species typical norm and who encounters body structure/function related, ableism related attitudinal and environmental barriers that hinder one's full and effective participation in society on an equal basis with others.
Impaired and disabled person (ability expectation oppressed person)	Everyone who identifies oneself as having sub-normative, deficient bodily functioning based on a species-typical norm and who encounters body

	structure/function related, ableism related attitudinal and environmental barriers that hinder one's full and effective participation in society on an equal basis with others.
Transhumanized impaired person (techno poor impaired person)	Everyone who identifies oneself as being deficient because one is not able to improve oneself beyond Homo sapiens normative functioning whether through a) external means by shaping the environment, or b) internal means by modifying ones bodily structures.
Transhumanized disabled person/ person (ability expectation oppressed person) (techno poor disabled person/ (ability expectation oppressed person)	Everyone who is not enhanced beyond Homo sapiens normative functioning whether through a) external means by shaping the environment, or b) internal means by modifying ones bodily structures and who encounters body structure/function related attitudinal and environmental barriers mostly justified by a transhumanized version of ableism that hinder one's full and effective participation in society on an equal basis with others.
Transhumanized impaired and disabled person (techno poor impaired and disabled person/ (ability expectation oppressed person)	Everyone who identifies oneself as being deficient because one is not able to improve oneself beyond Homo sapiens normative functioning whether through a) external means by shaping the environment, or b) internal means by modifying ones bodily structures and who encounters attitudinal and environmental barriers mostly justified by a transhumanized version of ableism that hinder one's full and effective participation in society on an equal basis with others,
Transhumanized vari-abled/ability diverse person	Everyone who identifies oneself as having a beyond species-typical functioning variability in bodily functioning that differs from the species-typical norm. This could be achieved by a) external means by shaping the environment, or b) internal means by modifying ones bodily structures

<p>Transhumanized vari- abled (ability diverse) and disabled person (ability expectation oppressed person)</p>	<p>Everyone who identifies oneself as having a beyond species-typical functioning variability in bodily functioning that differs from the species- typical norm and was achieved through a) external means by shaping the environment, or b) internal means by modifying ones bodily structures and who therefore encounters attitudinal and environmental barriers mostly justified by an Anti- transhumanized version of ableism that hinder one's full and effective participation in society on an equal basis with others</p>
<p>Examples of different combination of body image/image of the person and social treatment (disablement, disability)</p> <p>As stated above one can have different combinations of body image and social reality a) medical/medical; b) medical/social; c) social/social and d) social/medical. Below the term disability is use to cover social reality</p>	
<p>Medical/Medical</p> <p>medical model of the person/medical model of disability</p>	<p>The impairment (sub-species typical functioning) is the cause of the disablement, the lack of full and effective participation in society on an equal basis with non-impaired, species-typical people</p>
<p>Medical/Social</p> <p>medical model of the person/ Social model of disability</p>	<p>disability results from the interaction between persons with impairments (sub-species typical functioning) and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others. This is the combination used in the WHO model of “disability”, the UN convention on the rights of persons with “disabilities” and the American with “Disability” Act</p>

<p>Social/ Social</p> <p>social model of the person/ Social model of disability,</p>	<p>Disability is the attitudinal and environmental barriers an ability diverse/variable person faces due to their ability diverse/variable body related functioning that hinder their full and effective participation in society on an equal basis with others,</p>
<p>Transhuman medical/social transhumanist model of the person/Social model of disability,</p>	<p>disability results from the interaction between persons with impairments (species-typical and sub species-typical functioning) and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others,</p>

Table 4

<p>Ability Expectation and Ableism Studies (Ability Studies)</p>
<p>Ability Studies Ability studies investigates how ability expectation (want stage) and ableism (need stage) hierarchies and preferences come to pass and the impact of such hierarchies and preferences[38]. Within it, it allows to investigate eco-ability expectations and eco-ableism that focuses on ecological dynamics of human-human; human-animal and human-environment relationships. Ability Studies allows for the study of multiple subject formations, social relationships, and lived experiences based on diverse ability expectations and the actions linked to such expectations. It encourages the study of how legal, ethical/moral[32], biological, cultural and social constructs are exhibiting ability expectations and how such ability expectations and the actions they trigger leads to an ability based and ability justified understanding of oneself, one's body and one's relationship with others of one's species, other species and one's environment [38]. Ability studies can be used in inter-, trans- and intra-disciplinarily ways to generate policies and advance the relationship between humans, animals and their environment.</p>

Some History

“The concept of ableism was developed by the disabled people’s rights movement (Various, 2006) to question species-typical, normative body ability expectations and the ability privileges (i.e. ability to work, to gain education, to be part of society, to have an identity, to be seen as citizen) that come with a species-typical body (although they did not use the term ability privilege). Disablism conceptualized within this meaning of ability privilege suggests that people with expected, normative body abilities are not willing to give up their ability privileges.” [47]

Or in other words

Ableism: A set of beliefs, processes and practices that produce based on ones abilities a particular kind of understanding of oneself, one’s body and one’s relationship with others of one’s species, other species and one’s environment and includes one being judged by others.

Or in other words

Ableism privileges „species-typical abilities“ while labelling „sub species-typical abilities“ as deficient, as impaired and undesirable often with the accompanying disablism the discriminatory oppressive, or abusive behaviour against the sub species-typical people.

Moving beyond disabled people

Ableism exhibits in general a favouritism for certain abilities that are projected as essential while at the same time labelling real or perceived deviation from or lack of these essential abilities as problematic leading or contributing to the justification of a variety of other isms such as sexism, racism, castism, Age-ism and so forth [38];[40].

Here the claim is not about species-typical versus sub species-typical, but that one has - as a species or a social group- superior abilities compared to other species or other segments in ones species.

Moving beyond the body

Ableism exhibits in general a favouritism for certain abilities that are projected as essential for certai humans to exhibit while at the same time labelling real or perceived deviation from or lack of these essential abilities as problematic leading or contributing to the justification of a variety of other isms such as GDP-ism, consumer-ism, productivity-ism, competitiveness-ism and so forth [38];[40], 47.

Moving to the inclusion of human-animal and human-nature relationships

Eco-ableism is a conceptual framework for analysing enabling and disabling human ability desires, a class of desires that shape the relationship between humans, between humans and animals and humans and their environment.(9;24, 47)

Moving beyond the species-sub-species typical

Human related: A set of beliefs, processes and practices that perceive the improvement of human body abilities beyond homo sapiens typical boundaries (species-typical and sub species-typical) as essential. This enhancement version of ableism, sees all human bodies as limited, defective and in need of constant improvement of their abilities beyond homo sapiens - typical boundaries. The body ability enhancement can be of three types a) external by shaping the environment, b) internal reversal by modifying bodily structures in an reversible fashion and c) internal non-reversal by modifying bodily structures in a non-reversible fashion.

Animal related: A set of beliefs, processes and practices which champions the especially cognitive enhancement of animal species beyond species typical boundaries leading to cognitive or otherwise “enabled species”.

Environment related: A set of beliefs, processes and practices which champions the a) enhancement of especially the Homo sapiens beyond species typical boundaries to cope with the environmental challenges to come b) shaping the environment (geo-engineering, gated biospheres...)

Moving beyond the negative aspect of Ability Expectation and Ableism

Exhibition of ability expectations or ableism’s can also have positive consequences(enablement/enablism)[49]; ones desire to have the ability to live in an equitable society, some see the concept of sustainable development as positive step in what huans expect ability wise from nature...

All of the above fits with these three terms

Ability expectation: One likes as an individual or as a social structure to have a certain ability),

Ableism: One perceives as an individual or as a social structure certain ability as essential

Disablism: A given ability expectation or ableism is used by an individual or a social structure to disabled the one without that ability

Active disablism: One actively tries to generate social conditions that disable the one without the ability or where one generates new ability expectations with the expressed purpose to generate a hierarchy between social groups with one being the dominant one. So the primary purpose is to disable one based on the difference in abilities (perceived or real)

Omission or passive disablism: One disables someone else by not accommodating the other

individual or social group that does not exhibit the ability due to simply not being aware, not thinking about it (see further down section on ability privilege). The primary purpose was not to generate the disablement due to ability differences (perceived or real) but it's a side effect of one not wanting or one being unable to accommodate the other (see ability privilege further down).

Passive disablism can become active disablism and vice versa

Some Ability Studies concepts

Ethics of Ableism/Ableism Ethics is a framework of standards and values that (a) guide beliefs, processes and practices that produces based on ones abilities a particular kind of understanding of oneself, one's body and one's relationship with others of one's species, other species and one's environment and includes one being judged by others; (b) guide the favouritism for certain abilities and how one decide which abilities to favour over others; (c) guide the reactions towards humans and other biological entities that are seen -real or perceived- to lack these essential abilities.

The study of the Ethics of Ableism/Ableism Ethics, also includes (a) the study of those standards and values, incorporating the perspectives of many different groups especially of the people labelled as lacking certain 'essential' abilities or labelled as exhibiting 'as negative seen abilities'; (b) the impact assessment of different forms of ableism onto different ethics theories and ethical principles including health ethics theories and their use to govern science and technology and health research, care and policy and (c) identification of ethical actions that flow from a favouritism for certain abilities. This inquiry also looks at ability expectations intrinsic to ethics theories. (28)

Ability Security

that one is accepted, and is able to live one's life with whatever set of abilities one has, and that one will not be forced to have a prescribed set of abilities to live a secure life. (32)

Governance of ability expectations / Ability expectation Governance

is about how we govern ability expectations and ableism, the favouritism for certain abilities and the reaction towards non favoured abilities (for example [49][51].

Ability expectation oppression: Being oppressed by ability expectations [52] see linkage to colonial theory [52]

Ability Privilege

Ability privilege describes the advantages enjoyed by those who exhibit certain abilities and the unwillingness of these individuals to relinquish the advantage linked to the abilities especially with the reason that these are earned or birth given (natural) abilities. To link it back to disabled people as the originator of the term ableism. The concept of ableism was developed to question the ability privileges (i.e. ability to work, to gain education, to be part of society, to have an identity, to be seen as citizen) that come with a species-typical body (although they did not use the term ability privilege)[47]. Disablism conceptualized within this meaning of ability

privilege suggests that people with expected, normative body abilities are not willing to give up their ability privileges[47]. The cultural phenomenon of Ability privileges, however, can be employed beyond the social group of disabled people and their encounter with the 'ability normative' body.

Ability privileges can play themselves out between traditionally defined social groups (e.g. race, gender, class). However at the same time social groups are also formed based on ability privileges whereby the social group is defined by whether its members have or don't have a given ability (the ability-have and the ability-non-have social groups)[47]. Ability privilege also influences how one relates to nature and to animals and shapes one identity[47].

Ability Inequity and inequality from [32]

For both, ability inequity and ability inequality two subgroups exist. One group is linked to intrinsic bodily abilities and the other group is linked to external abilities, abilities generated by human interventions that impact humans. These two subgroups of internal and external ability inequities and inequality are quite distinct in their effects and discourse dynamics, involved stakeholders and goals.

Definition: *Ability inequality* is a descriptive term denoting any uneven distribution of access to and protection from abilities generated through human interventions, right or wrong (modified from Cozzens [9]).

Example: Lack of access to education employment.... Ability inequalities also are experienced by so called body normative people. Eating certain food leads to better abilities, but not everyone has access to this food. Clean water leads to better abilities, but not everyone has access to it.

Definition: *Ability inequality* is a descriptive term denoting any uneven judgment of abilities intrinsic to biological structures such as the human body, right or wrong (modified from inequality definition from Cozzens [48]).

Example: Negative judgments of people who 'lack' certain 'normative' intrinsic set of body related abilities as defective (e.g. not hearing as impairment person versus ability diverse person), at the same time people do not define themselves as defective because they cannot fly; or less payment for the same amount of work for women versus men....

Definition: *Ability inequity* is a normative term denoting an unjust or unfair distribution of access to and protection from abilities generated through human interventions (modified from inequity definition from Cozzens [48]).

Example: One could say that one of the purposes of the United Nations Convention on the Rights of Persons with Disabilities was to highlight which ability inequities are unjust and to prescribe some remedies for them.

Definition: *Ability inequity* is a normative term denoting an unjust or unfair judgment of abilities intrinsic to biological structures such as the human body (modified from inequity definition from Cozzens [48]).

Negative judgment linked to the abilities or perceived lack thereof of disabled people or women are judged unfairly with their abilities in work payments.

Table 5

Models (identity) and determinants (interventions) of Health
If one deals with models and determinants of health one in the end deals with two issues. The models of health define the client (animal human, nature) and the cause whereby the determinants define the intervention
Medical model of health (31;46) Within the medical model of health, health is characterized as the normative functioning of biological systems (e.g. in humans or animals, nature) whereas disease/ illness is defined as the sub- normative functioning of biological systems. The “patient is the target of improvement through intervention (cure or prevention) .
Medical determinants of medical health place the cause of sub-normative functioning within the individual patient’s biological system leading to medical interventions towards the species typical norm on the level of the individual focusing on medical cure, medical individualistic care and individualistic normative rehabilitation as the primary endpoint and at the political level the principal response is to make curative medicine more efficient (31;46)
Social determinants/ interventions of medical health identify external factors as the cause for the “ill medical health” the sub-normative functioning of the individual, the patient and tries to fix the external factors to prevent medical ill health. This includes, for example, the elimination of contaminated water that leads to bacterial or parasitic infections, or job insecurity that contributes to stress and heart disease. (31;46). Although some social determinants interventions such as decreasing job insecurity also increase social well being, the performance indicator is a positive change in a medical parameter.
Social Health Social well-being of a person not labeled as being in ill medical health or in danger of being medical ill (31;46);
Social determinants of social health Interventions on the societal level that improve the social well-being
Transhumanized health

Transhumanized medical determinant intervention

all Homo sapiens bodies – no matter how conventionally “medically healthy” – are defined as limited and defective as in ill health in need of constant improvement made possible by new technologies appearing on the horizon (a little bit like the constant software upgrades we do on our computers). Health in this model is the concept of having obtained maximum (at any given time) enhancement (improvement) of one’s abilities, functioning and body structure. (31;46)

These interventions see enhancement beyond species-typical body structures and functioning as a therapeutic intervention (transhumanization of medicalization) (31;46). Enhancement medicine is the new field providing the remedy and maintenance through surgery, pharmaceuticals, implants and other intervention on the level of the body. (31;46)

Existing understanding of Rehabilitation

Rehabilitation is a treatment or treatments designed to facilitate the process of recovery from injury, illness, or disease to as normal a condition as possible.

The purpose of rehabilitation is to restore some or all of the patient's physical, sensory, and mental capabilities that were lost due to injury, illness, or disease. Rehabilitation includes assisting the patient to compensate for deficits that cannot be reversed medically.

The aim of rehabilitation, "to restore an individual to his/her former functional and environmental status, or alternatively, to maintain or maximize remaining function" (Williams, 1984, p. xiii),

<http://medical-dictionary.thefreedictionary.com/Rehabilitation>

Transhumanized understanding of Rehabilitation

Rehabilitation is a treatment or treatments designed to facilitate the process of recovery from injury, illness, or disease to as optimum a condition as possible.

Rehabilitation is a treatment or treatments designed to facilitate the process of gaining a as optimum a condition as possible.

The purpose of rehabilitation is to restore some or all of the patient's physical, sensory, and mental capabilities that were lost due to injury, illness, or disease. Rehabilitation includes assisting the patient to compensate for deficits that cannot be reversed medically.

The aim of rehabilitation, "to restore an individual to his/her former functional and environmental status, or alternatively, to maintain or maximize remaining function" (Williams, 1984, p. xiii),

Modified from <http://medical-dictionary.thefreedictionary.com/Rehabilitation>

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