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Extended Minds, Extended Agents? Cognitive Disability and Agency in a Social World

Raymond Aldred
McGill University

Biography

I am a Ph.D. candidate in philosophy at McGill University. My present research amalgamates around ethical issues related to cognitively disabled people and agency, but I also dabble in other topics such as indigenous philosophies, disability, sexuality, philosophy of love, caregiving, care-receiving, bioethics, neuroethics, and more. When I am not thinking deep thoughts, I also enjoy learning programming languages, any and all things open source, and failing miserably at taking care of house plants.

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Abstract

The aim of some philosophical projects is to create a broader framework for agency that is inclusive of cognitively disabled people. On the face of it, this seems like a worthwhile and important project, because cognitively disabled people have historically been excluded from making decisions, and their autonomy was neglected and disrespected. Along similar lines, past philosophical traditions tend to neglect the way social environments can restrict or expand agency. Rather than being integrated into society and assisted with making decisions, cognitively disabled people either had their decisions made for them or were manipulated into situations that they may not have chosen. 'Agency' and 'autonomy' were narrowly understood as correlating with individuals exercising their intellectual decision-making capacities, rather than with joint projects that people can partake in together. As such, the notion 'agency' was narrowly equated with individual organism's capacity to exercise rational thought. In this article, I focus on the social environment in which cognitively disabled people exist and some contemporary philosophical literature that accounts for cognitive disability in their deliberations about agency. I present and critically appropriate a theory of mind that could provide a framework for understanding how cognitively disabled people could make decisions in their social world. According to this theory, one's mind and cognition extend into the world. More specifically, the theory implies that one's mind extends into the world to include iPhones, notebooks, and even other persons. While there is an advantage to this theory in the above project, there are also a number of problems. I will highlight a few of the problems with this theory and conclude with a promising and more modest alternative.

Keywords

Extended Mind, Cognitive Disability, Agency, Autonomy, Neuroethics

1. Introduction

The aim of some philosophical projects is to create a broader framework for agency that is inclusive of cognitively disabled people. On the face of it, this seems like a worthwhile and important project, because cognitively disabled people have historically been excluded from making decisions, and their autonomy was neglected and disrespected. Along similar lines, past philosophical traditions tend to neglect the way social environments can restrict or expand agency. Rather than being integrated into society and assisted with making decisions, cognitively disabled people either had their decisions made for them or were manipulated into situations that they may not have chosen. 'Agency' and 'autonomy' were narrowly understood as correlating with

individuals exercising their intellectual decision-making capacities, rather than with joint projects that people can partake in together. As such, the notion 'agency' was narrowly equated with individual organism's capacity to exercise rational thought. There are flaws in any theory of agency that restricts it in this way, because it does not acknowledge how cognitively disabled people exist within a social context, wherein their cognitive capacities can be improved or impaired by environmental features. There is a potential for other agents to assist cognitively disabled persons in forming and thinking about decisions, even when an individual lacks certain capacities that allow one to make decisions alone. It is important to acknowledge how a person is an agent, because if one is traditionally conceived of as always consenting, not capable of consenting, or not capable of being an agent, then there is a risk that a person will not be able to rightfully claim that their autonomy has been violated. There would be little to no legal or political means that one could take when a cognitively disabled person's autonomy has, in fact, been violated. To avoid this possibility, laws and policies should be formulated, implemented and enforced to broaden the scope of who is perceived as capable of making decisions, and who is capable of giving and withdrawing consent to medical interventions or receiving assistance for daily life tasks. Acknowledging this broader sense of agency expands the scope of who is seen as being able to make decisions and who can give and withdraw consent. In this article, I focus on the social environment in which cognitively disabled people exist and some contemporary philosophical literature that accounts for cognitive disability in their deliberations about agency. I present and critically appropriate a theory of mind that could provide a framework for understanding how cognitively disabled people could make decisions in their social world. According to this theory of mind, one's mind and cognition extend into the world. More specifically, the theory implies that one's mind extends into the world to include iPhones, notebooks, and even other persons. While there is an advantage to this theory in the above project, there are also a number of problems. I will highlight a few of the problems with this theory and conclude with a promising and more modest alternative.

2. The Conditions that will be Discussed

The conditions I wish to discuss are disorders that affect the way one makes decisions and disorders that affect one's agency and autonomy. As a brief working definition, 'agency' refers to the ability to make decisions and translate them into actions, and 'autonomy' is the ability to direct one's self or self-governance. For the sake of clarity, I will

refer to specific conditions when such information is particularly relevant. But in many cases, my claims can be generalized to all or most of the conditions I present. My primary goal is to provide a general account for as many cognitive disabilities as possible. At the same time, even when a claim can be generalized to other disorders, it is still possible that the claim may not apply to all of them. Some conditions, because of the nature, may count as an exception to one of the claims I make. Acknowledging the nuances and complexities associated with specific impairments can make the task of giving a general account of cognitive disability more difficult. However, while acknowledging the myriad of complexities around these issues, something accurate, plausible and philosophically interesting can still be said about the various groupings I consider.

The specific conditions I will be discussing are autism, severe cases of cerebral palsy, Down syndrome, Alzheimer's disease, and intellectual and developmental disabilities (IDD). Autism, Down syndrome and cerebral palsy are neurodevelopmental conditions which occur because of an inhibition in the growth or development of the brain or central nervous system. Often, these conditions occur in infancy or childhood. More specifically, the group of conditions classified as "neurodevelopmental" include brain functions and brain systems that affect learning, memory, and emotions. In contrast, Alzheimer's disease and other forms of dementia are neurodegenerative and occur when there is progressive loss of brain systems and structures due to the death of cells and neurons. Intellectual disabilities include both neurodegenerative conditions and neurodevelopmental conditions. They can additionally include persons who have an intelligence quotient (IQ) lower than 70, along with persons with cognitive impairments who have a normal IQ, yet display the forgetfulness, difficulty concentrating and confusion that typically accompany brain injuries.

3. Extended Minds, Extended Agency?

First, I wish to emphasize the point that an account of agency for cognitively disabled persons needs to include the possibility of other agents helping agents exercise intellectual capacities. I lament that to ignore the appropriate social dynamics on which agency depends is to discount a particular mode that persons can be responded to and respected as agents. One promising way to account for the social dynamics of agency in care relationships is to borrow from extended mind theories that couple the mind with the environment in which it is embedded. The idea behind such theories is to match consciousness or cognition with items that exist beyond the brain, which implies that the mind includes items beyond the mere organic functioning of one's brain. In this way,

the mind is understood as extending into the world. It is additionally notable, for our purposes, that a central character of the thought experiments for extended mind theories is a person afflicted with Alzheimer's disease who uses a notepad to help him remember things (Clark & Chalmers 1998). Extended cognition theories suggest that cognition is much more than mere functioning of certain capacities of the brain, but extends beyond the brain to include iPhones, notepads, and other items in our environment.

One can broaden the extended mind theory to include other agents in the content of one's mental states. The idea behind this claim is that when we exercise certain cognitive capacities dedicated to decision making, our own agency can include other agents. If cognition includes other items featured in our environment and cognition supervenes on a wider range of factors other than one's own neural processes, then there does not seem to be any principled reason to deny that cognition can also include other agents. If cognition includes other agents, then in some cases cognition can extend into the social world. The idea of extended agency is featured in the work of Andy Clark, who presents and defends the theory. It is also applied to disability related issues in the work of James Nelson and in the joint work of Leslie Francis and Anita Silvers.

The theory of extended mind is primarily found in the pioneering works on the subject, started by David Chalmers and Andy Clark. One of the central ways that Clark and Chalmers flesh out their theory is via a thought experiment about a man who suffers from a moderately advanced case of Alzheimer's called 'Otto' (Ibid.). Otto enjoys the Museum of Modern Art, but cannot remember where the museum is located without the utilization of a notebook that contains the directions he requires. Otto has a friend named Inga who can remember the museum's location without a notebook. According to Clark and Chalmers, the different modes of performance of Otto and Inga do not matter. After all, Otto has an accurate belief about the location of the museum. Although his way of remembering how to get to the destination differs from Inga, his way of remembering is reliable as long as he has access to it. To separate Ingrid and Otto is to inappropriately privilege the brain or collections of neurons. Although it is not explicitly mentioned by Clark, this assumes that Otto retains some form of memory mediated by some degree of brain function.

In *The Extended Mind* Clark and Chalmers ask, "[w]here does the mind stop and the rest of the world begin?" (Clark & Chalmers 2010, 27). The idea behind the extended mind is that the environment plays an active role in the content of cognitive processes and it does so through causal coupling. Causal coupling refers to the idea that there is a strong interaction between internal and external systems, and modulation of one system can change the other. Referring to causal coupling, Clark and Chalmers state, "[b]

ecause they [external objects and systems] are coupled with the human organism, they have a direct impact on the organism and on its behaviour” (Clark & Chalmers 1998, 9). The so called ‘parity principle’ is an additional concept necessary to the extended mind theory. According to the parity principle, external elements that are causally coupled with cognitive systems associated with the brain partly constitute the mental content. Referring to the case of Otto, the notebook plays an active role and is coupled with Otto’s mind. According to the parity principle, what occurs in Otto’s notebook is part of Otto’s cognitive system. The mind, therefore, extends into the external environment, and mental contents can be external to the person and his or her brain.

The extended mind thesis is comparable to externalist theories about meaning or so called ‘semantic externalism’. According to semantic externalism, the meaning and reference of the words we use are not solely determined by an internal physical state or the ideas we associate with them. Hilary Putnam famously argued for semantic externalism with his ‘Twin Earth’ thought experiment (Putnam 1975). Imagine that in 1750, there was a remote planet called ‘Twin Earth’ which is exactly like Earth but contains no water (H₂O). Rather than H₂O, twin earth has a similar substance to water but has a different chemical compound, XYZ. The macro properties of XYZ are just like water: it tastes like water, nourishes the body like water, is found in rivers and oceans, and citizens of twin earth put their tea bags in it at tea time. In 1750, nobody on Earth or Twin Earth could distinguish between water and XYZ. It is argued that a person on Earth in 1750 who used ‘water’ would refer to H₂O and not XYZ, even though he or she did not know that water was H₂O. Similarly, if he pointed to XYZ and said, “this chemical substance is water”, the utterance would be false. The meaning of the word, according to semantic externalism, depends, at least in part, on the external environment the linguistic user is embedded in.

The distinction that Clark and Chalmers make between semantic externalism and extended mind theories is that extended mind theories are an *active* version of externalism. The externalism Clark and Chalmers defend extends beyond content to acts and functions. Clark and Chalmers say, “[o]thers are impressed by arguments suggesting that the meaning of our words ‘just ain’t in the head,’ and hold that this externalism about meaning carries over into externalism about mind” (Clark & Chalmers 2010, 27). Therefore, Clark and Chalmers propose that if some process plays a role in the cognition of agents such that the process could go on inside the cognitive agent, we should count it as part of her mind, regardless of whether the process occurs in the brain or in the environment.

This theory has some implications for persons with cognitive disabilities, since the external environment that the person is embedded in could be counted as part of their mind. Otto, for example, becomes cognitively enabled through interacting with his notebook. Otto's notebook is part of his mind and himself rather than merely a simple piece of paper with etchings. In *Alzheimer's Disease and Socially Extended Mentation*, James Nelson explores how extended theories of the mind might bear on conditions and Alzheimer's disease, particularly when it comes to proxy decision makers. First, Nelson claims that the mind extends into both artifacts and people. He says,

externalism allows, at least in principle, that our minds may extend not only into artifacts but into other people as well...Some of my memories or my evaluative beliefs may have been stored not in a notebook or an iPhone but in another person. (Nelson 2010, 235)

Presumably Nelson wants to imply that a memory could still be mine but stored in another person's brain to be utilized later. But when are memories mine and when do they belong to the other person? Or, alternatively, are they both mine and the other person's at the same time? Sadly Nelson leaves these pressing questions unanswered. Naomi Scheman similarly argues that mental states encompass and supervene on other people (Scheman 1993). Second, it is also possible, according to Nelson, for demented persons to be assisted by their caregivers or proxy decision makers. In such cases, Nelson states, "a now-demented person may be autonomously forming or consolidating new evaluative beliefs that constitute respect-worthy responses to situations unanticipated earlier in her predementia life" (Nelson 2010). There is a possibility, according to Nelson, that other agents constitute one's own agency when they are being utilized as proxy decision makers or caregivers.

Leslie Francis and Anita Silvers appear to share Nelson's intuition about other agents constituting a part of one's own agency. They argue that people in general cooperate with each other in constructing their conception of the good and depend on each other in important ways in retaining this conception. Francis and Silvers present a metaphysical theory for how persons with disabilities collaborate with a trustee to build conceptions of the good, by borrowing from a metaphysical theory of how persons use prosthetic body parts. According to this metaphysics, a prosthetic arm or leg, "executes some of the functions of a missing fleshly one without being confused with or supplanting the usual fleshly limb" (Francis & Silvers 2010, 247). Like a prosthetic limb, a trustee may not necessarily supplant the ideas or beliefs of the cognitively disabled individual. More importantly, Francis and Silvers argue that one usually attributes the functioning of the

prosthesis to the agent using them, and not a metal foot who does the walking (Ibid.). If a person were to utilize a prosthetic limb, the limb compensates for the lack of fleshy limb and gives its wearer the capacity to roll, walk or run. Comparatively, a collaborator would compensate for the cognitive deficits of the disabled person, to provide a capacity that they would otherwise lack or enhance a capacity they have to a limited degree. To utilize the extended mind terminology, the prosthetic device is coupled with the agent, and the prosthetic device becomes a part of the individual's body. The identification of the person with the device would presumably be influenced by proprioceptive and somatosensory feedback between the device and the person's brain. There are a few ethical worries, but ideally a trustee assists thinking by functioning as a prosthesis to amplify the functionality of the individual rather than being used as a separate tool. Francis and Silvers suggest that one should proceed with caution "to safeguard against substituting the assistant's standpoint for the person's own" (Ibid., 249). By utilizing the metaphysical theory of prosthesis, I take it that Francis and Silvers assume some sort of extended mind theory. In other words, I take them to be arguing that when a person utilizes a collaborator, the mind extends to the trustee, so the trustee and the capacities granted by the trustee become part of the agent.

A recent neurological study corroborates Francis and Silver's intuitions about a prosthetic limb actually functioning as a part of the agent. According to a study by Mariella Pazzaglia and colleagues, the human brain learns to treat a prosthetic as a substitute for a non-working body part (Pazzaglia, Galli, Scivoletto, & Molinary 2013). The researchers discovered that wheelchair users with spinal cord injuries perceived their wheelchair as part of their body (Ibid. 2013). Their body's edge was perceived as flexible, and this association was particularly strong for patients who retained upper body movement (Ibid. 2013). To the brain, the prosthetic limb or device becomes a substitute for the affected body. Pazzaglia states:

[T]he tool did not become an extension of the immobile limbs; rather, it became an actual tangible substitution of the functionality of the affected body part. These findings suggest that the brain can incorporate relevant artificial tools into the body schema via the natural process of continuously updating bodily signals. The ability to embody new essential objects extends the potentiality of physically impaired persons and can be used for their rehabilitation. (Ibid. 2013) According to Pazzaglia, the human brain literally treats prosthetic devices, including wheelchairs, as a functional and tangible part of the body.

This finding corroborates Chalmers and Clark's intuition that the mind could extend into non-organic objects in one's environment, because -assuming the brain takes a body as part the self- the brain appears to treat inorganic, environmental elements, as part of the self too.

4. Limitations of the Extended Mind Theory and Extended Agency Theory

There are limitations to the extended proxy-decision making theory. A problematic case may be presented wherein an agent, with the help of a proxy-decision maker, forms inconsistent beliefs, which also may be a part of one's mind. When one considers this problematic case, it can involve some complicated ethical decisions about which beliefs one may ethically privilege. Regarding problematic cases of inconsistent beliefs, Nelson states,

[s]orting out how to adjudicate the conflicting implications of those beliefs for practice will, of course, often require the most careful judgment –and in selecting judges, we would do well to bear in mind that we may have real-time access to some of the very same deliberative resources by which those undergoing disease habitually achieved and sustained mature values, and sorted out their tangled practical consequences (Nelson 2010, 235).

However, Nelson's worry does not imply that extended proxy-decision making is false or fails to consider the person's best interest; nor does his worry make the theory untenable. He merely points to some ethical complexities that one should keep in mind when applying extended mind theories in contexts that include a proxy-decision maker.

A more pressing concern is presented by Fred Adams and Ken Aizawa in *Defending the Bounds of Cognition*. Adams and Aizawa argue that extended mind theorists commit the coupling-constitution fallacy by inappropriately making "an object cognitive when it is connected to a cognitive agent" (Adams & Aizawa 2010, 67). Clark and Chalmers commit the coupling-constitution fallacy by coupling Otto with his notebook, then inferring that the notebook constitutes part of his memory system. However, Adams and Aizawa point out, "coupling relations are distinct from constitutive relations, and the fact that object or process X is coupled to object or process Y does not entail that X is part of Y" (Adams & Aizawa 2010). It is argued that extended mind theories fail because there is no distinction between what the mind and cognition causally depend on and what properly constitutes the mind or cognition. While one might agree that the mind

depends on a causal coupling relationship between the brain and the environment, it is an entirely different matter to assert that the resources one uses form part of the larger cognitive system. Therefore, Adams and Aizawa conclude that extended mind theories commit a fallacy, and they deny that the mind extends into the world.

Drawing on similar intuitions of Adams and Aizawa, another objection against extended mind theory is presented by Kim Sterelny, who draws an analogy between unconscious or conscious systems and the digestive system. Sterelny notes that our digestion is supported in pervasive ways that depends on technological advances to cook and ingest food, which allows us to extract more nutritional value. Yet we are not tempted to suggest that the digestive system extends into the world. Sterelny says,

We have engineered our gustatory niche; we have transformed both our food sources and the process of eating itself. Our under-powered jaws, short gut, small teeth and mouth fit our niche because we eat soft, rich and easily digested food. Our digestive system is environmentally scaffolded. But is my soup pot, my food processor and my fine collection of choppers part of my digestive system? As far as I know, no one has defended an extended stomach hypothesis, treating routine kitchen equipment as part of an agent's digestive system. (Sterelny 2010)

Sterelny presents a less metaphysically presumptuous view than the extended mind theory and argues that the mind is environmentally scaffolded or supported by the environment. Although Sterelny does not argue that extended mind theories are false, he does present some pressing concerns for the extended mind theory through his analogy between the mind and the human digestive system and offers a more plausible option for understanding shared and helped agency than extended mind theories.

Recall that Francis and Silvers utilize metaphors about the usage of a prosthetic limb and the usage of a trustee. There seemed to be corroborating neurological evidence that the brain treats prosthetic devices as if they were part of the body; but there are limitations to this metaphor. While it might be plausible that certain inorganic objects in the environment constitute part of one's body or self, it is less obvious that the brain treats other people as a similar part of oneself. Indeed, it seems more plausible to assume that caregivers and trustees are not like a prosthetic limb, because another person has subjectivity, cognitive flaws, well-being, and a different mind. A person can't manipulate another person in the same way that person can manipulate a prosthetic device. Indeed, the brain even represents what other agents are thinking and doing, and this information is utilized to negotiate the social world and cooperate with others. Therefore, the corroborating neurological evidence may not extend to other agents. Furthermore, just because a brain treats objects as if it were part of one's own body does not imply that

a prosthetic device, in fact, constitutes part of the body. In other words, the brain may *think* that the prosthetic device is part of its body, but that does not make it so.

Finally, additional worries about the nature of Alzheimer's might complicate whether the mind or agency can be extended. Recall that Otto writes in his notebook and uses it to find his way to the museum. Alzheimer's is a progressive disorder that, at a certain point, impedes one's capacity to retrieve memories and construct meaning from those memories. In other words, at some point the notebook would be useless for Otto, because he could not properly contextualize the information in the notebook. Furthermore, Alzheimer's affects one's capacity to use and interpret language. It is, in part, a linguistic disorder, which hinders an agent's capacity to use language to write in a notebook, and hinders one's ability to negotiate in the social world in a way that communicates one's wants, needs, or desires. This suggests that the extended mind has its limitations, and how the brain functions plays a crucial role in how extended the mind can actually be, if it is extended at all.

One should be skeptical about extended theories of agency where one's own agency extends to other agents, even if the mind is extended to inorganic objects. Recall that according to extended agency theories, other agents constitute part of one's mind. It appeared to be a promising endeavor to consider caregivers and proxy-decision makers as part of a cognitively disabled individual. But, if one were to consider trustees or proxy-decision makers as part of the agency of a cognitively disabled individual, one may run the risk of losing the caregiver's autonomy. It is appropriate, at least sometimes, to consider an agent as separate from the person they are helping or assisting. When one violates another's autonomy is a strong example of when an agent is not extended to another agent. However, even when one is being assisted to make decisions, the helper still has their own subjectivity, preferences, weaknesses, desires, goals and well-being. To say that the helper is "extended" to the person they are assisting, could run the risk of ignoring a caregiver's well-being, desires, and goals at the expense of the cognitively disabled person's well-being, desires and goals. This assumption could also undermine the agency of the cognitively disabled person. This shows that combining the extended mind hypothesis with paternalism can have harmful results for the cognitively disabled person, because it fails to appreciate his or her own distinctive needs and interests. The worry I present is particularly relevant in contexts where two individuals' well-being, desires and goals conflict. In such cases, in my experience, one needs to take into account both individuals' autonomy, as separate agents, to negotiate a course of action that is in the best interests of each.

Taking account of two separate individuals' minds is more representative of the interpersonal exchanges that occur in care relationships than an extended theory. In my own life, as a severely disabled individual, I have utilized the help and assistance of caregivers. In the process, while my desires, goals, and well-being are of central importance, it seems inappropriate to perceive my caregivers as an extension of me. It is true, my own caregivers compensate for capacities I may lack, but I frequently negotiate with my caregiver(s) as a separate entity, to appropriately assess whether my requests are reasonable. Indeed, there is an operative assumption when I negotiate with another, separate agent, and this assumption plays an integral part of the interdependent nature of our care relationship. Thus, a metaphor of extended mind might be useful in some contexts that include a cognitively disabled person and their caregiver. In other contexts, a metaphor of extended mind threatens to presumptuously negate crucial aspects of the caregiver's and the disabled person's humanity and identity.

So, the ethical worry is this: extended agency theories inaccurately reflected the interpersonal dynamics of an actual care relationship. In my own care, it often involves negotiating with another agent and all of the complexities that accompany negotiating with that agent. The conceptual framework offered by extended mind theories fall short of acknowledging these complexities, because they understand the trustee as closely akin to a prosthetic or external object. The latter conceptual framework runs the risk of ignoring what can actually go on in a care relationship.

By understanding the care relationship as a joint action, as opposed to the caregiver as an extension of the disabled individual, there are implications for pressing bioethical questions pertaining to giving care. Consider controversial cases of sexual facilitation. Sarah Earle describes sexual facilitation as follows:

'facilitated sex'...might mean that assistance is required to attend social events such as parties, or go to pubs and clubs...or that assistance is required to negotiate the price when using the services of a prostitute. More specifically, a person might be required to facilitate sexual intercourse between two or more individuals, to undress them for such a purpose, or to masturbate them when no other form of sexual relief is available (Earle 1999, 312).

In the above description, Earle describes a continuum of activities that might enable a person with a disability to be sexual via the utilization of a caregiver or nurse. Operating under the view that the caregiver is an extension of the person they care for, one can easily understand all the activities described by Earle as morally permissible, with very

little cause for concern. After all, if the caregiver is understood as a prosthetic extension of the disabled client and the client would otherwise engage in self-pleasure, then it seems as if there would be a very small logical step to concluding that the caregiver should provide masturbatory relief to the client as an extension of their care duties. However, if the care relationship is understood as a joint action and the caregiver is understood as another agent, then there is a real moral concern as to whether the caregiver consents to providing sexual relief. Furthermore, a worry arises that an understanding of the caregiver as an extension of their disabled client or a cognitive prosthesis can encourage treating the caregiver as only a means to an end and merely instrumental to the disabled person's needs.

5. Conclusion and a Modest Alternative

Taking account of the social world in which persons with cognitive disabilities exist is important, because it provides a theoretical structure that broadens our ability to perceive cognitively disabled persons as capable of giving or withdrawing consent. This opens the possibility of acknowledging when a cognitively disabled individual's autonomy is neglected and disrespected. With this perception in place, we can begin to create guidelines, policies and laws that allow cognitively disabled persons to make decisions that are in their best interests to the best of their ability. Drawing from the literature on agency and cognitive disability, I presented an issue that is relevant for accounting for the distinctive agency of the cognitively disabled: extended mind theory.

If the mind extends into the environment, then we can use objects and other agents to carry out decision making and other cognitive tasks. Indeed, much of the literature on agency and cognitive disability draws from metaphors of extended minds. However, extended mind theories are controversial and marred with problems. It is questionable whether the mind is extended in exactly the same way that theorists presuppose, and it is even less plausible whether it can provide an adequate conceptual framework to account for the agency of persons with cognitive disabilities. With that being said, my own account is not an extended mind theory. I do not claim that extended mind theories are false, but I propose a less presumptuous view. I propose that cognitively disabled individuals are "helped" by other agents. Persons *assist* cognitively disabled individuals by helping them make decisions, by taking over for cognitive capacities that are lacked by the individual but are required to make decisions. This involves promoting or facilitating capacities that are intact in the disabled person. With that being said, I recommend

drawing a necessary distinction between persons and their caregivers but remind that both parties still interact in interesting and novel ways.

Theories about shared agency -or theories about when two agents jointly participate to carry out an action- provide a promising and useful conceptual framework for developing an account of the social nature of agency and the autonomous agency of persons with cognitive disabilities. This alternative framework would allow one to interpret care relationships, and the help that one receives when acting inside them, as a type of shared agency. I call this framework 'helped agency' or HA. HA avoids worries associated with understanding care relationship within an extended mind theory because it integrates helpers as central figures of the decision-making process. This theory includes both the cognitively disabled person and the caregiver, since both characters play integral parts in decisions and actions. Thus, it is a better framework for understanding the agency and autonomy of cognitively disabled persons, and it respects the dignity of the helper and disabled individual better than other theories presented in the literature.

As a conceptual framework, HA coheres well with feminist approaches to ethics. Nel Noddings has developed and defended an approach to ethics that places care, a value traditionally associated with women, as a central virtue to ethics (Noddings 1984). According to Noddings, ethics is about actual relationships between a person doing the caring and a person being cared for. Likewise, Eva Kittay suggests that human relationships are often between unequal and interdependent persons (Kittay 1999). She valorizes actual life that people experience on an everyday basis, and that life often consists in being in a dependent relationship on others, a relationship that consists of those in need and those who can meet those needs (Ibid.). Kittay's approach extends to theories about public policy to suggest that society ought to take care of and value its care workers, including mothers and those who care for disabled individuals (Ibid.). If society wants to be properly functional, Kittay argues that the goal of public policy should be to empower those who care for dependants (Ibid.). HA coheres well with Kittay's approach to care ethics and public policy because it acknowledges trustees and those who provide care into a conceptual framework for care in a way that does not minimize their humanity. Instead, HA theorists acknowledge the caregiver's agency, wellbeing, intentions and autonomy as a central element in its framework. I would also propose that one of the first steps towards empowering those who care for dependents is to actually acknowledge their existence as human beings with their own decision-making capacities that need to be respected.

The conceptual framework of HA can also expand to encompass when non-disabled people are helped. We are all equal because and we all require assistance from time to

time. We all face situations where we need another's assistance to accomplish difficult tasks. When we are young, we all require the helping care that is described by HA. As we age, we may require more assistance from others, when we begin to feel the corporeal effects of old age. Furthermore, with current advances in medical sciences that can extend our lives with treatments and not entirely cure us, the population of physically and cognitively disabled persons grows and changes. To embrace HA in the situations where we need help from others and provide assistance when needed, is to embrace at least one aspect of how we are agents and how we are autonomous in a social world. By acting with HA as a practical guide, one can respect the dignity and autonomy of persons who may struggle to make decisions alone, and respect the dignity of those who provide care. To acknowledge HA is to appreciate another way of being human that has been previously under-appreciated: being helped to accomplish tasks and helping others to accomplish their goals. HA broadens the boundaries of agency and autonomy to encompass persons with cognitive disabilities, so that policies can be formed to empower them to carry out plans of action consistent with their interests and values. With HA as an operating assumption about how persons with cognitive disabilities make decisions in a social world, policies and practices can be created so that persons with cognitive disabilities can be appropriately acknowledged and morally responded to as autonomous agents. In sum, persons with cognitive disabilities have dignity to be respected, and it is through HA that we begin to understand how we can respect it, not extended mind theories.

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