

## Is Transhumanism a Health Problem?

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In medical sciences, health is measured by reference to our species-typical anatomy and functional integrity – the objective standard of human health. Proponents of transhumanism are committed to biomedical enhancement of human beings by augmenting our species-typical anatomy and functional integrity. I argue that this normative impasse is not only a problem for the transhumanist movement, but also undermines the rationale for some common medical interventions.

The medical standard of human health is based on our predominant, innate biological characteristics, our species-typical natural state, which is in turn associated with a range of innate biological functions. [1] When any innate biological function cannot be reliably fulfilled towards a species-typical outcome, this constitutes a deficiency of health. There appears to be no other objective point of reference for the concept of human health. The Public Health model specifically, requires an empirically grounded standard in order to justify any population-wide medical interventions or guidelines, for example vaccines, pandemic preparedness, or even food safety regulations. Nevertheless, not all public health interventions are strictly compatible with the objective standard of health. Vaccine mandates, for example, are motivated by the prospective benefit of vaccines to human health, but the mechanism of vaccination is to alter the innate state of our immune system, which is one of the healthy, species-typical biological characteristics [2]. Vaccine mandates therefore implicitly negate the normative standard they rely on to justify their public health benefit.<sup>1</sup> Another example is the inclusion of contraception in the category of reproductive health; it is unclear why the medically induced, temporary infertility should count as health, given that fertility is also one of the species-typical, healthy characteristics. Based on the objective standard of health, contraception may be generally unhealthy, but is deemed desirable for other reasons.

One possible objection to this argument is that the idea of improvement in public health, associated with vaccines, for example, or with certain transhumanist enhancements of the body, does in fact respect the standard of health based on our species-typical, innate biological characteristics, but makes an additional conceptual step of extrapolating this healthy human functionality towards some ideal state. The characteristics developed via evolution offer us the conceptual basis for further optimisation or improvement. Nevertheless, logical consistency demands that the notions of optimisation or improvement beyond the healthy natural state are bound by the same standard of health as that which applies to our natural state, in which case transhumanism is normatively on par with contraception, motivated by reasons other than health. In any case, it is a strange proposition that by altering an organism that is already healthy we could make it healthier. At present, transhumanism seems to evade this explanatory problem via a conceptual sleight of hand, by replacing health understood as the state of functional integrity of a living organism with 'health' as the purely functional capacity of a tool. In light of this objection, transhumanism could be characterised as a deficiency of health, which is tolerated only for the sake of gaining access to new tools.

The key justificatory challenge for this kind of augmentation, according to McNamee and Edwards [3], is "to show that all of what are described as transhumanist enhancements are imbued with positive normative force and are not merely technological extensions of libertarianism, whose conception of the good is merely an extension of individual choice and consumption." In the absence of an objective, naturalistic standard of health, which is implicitly rejected by transhumanism, this kind of justification becomes logically impossible. The hypothetical agency of the tool is thus, 'pathologically', given normative priority over the functional integrity (or health) of its conscious user.

This consideration dovetails with what I call the evolutionary argument against transhumanism. Conceptual errors have, throughout human history, demonstrated a destructive potential vastly exceeding that of any naturally occurring phenomenon, let alone any biological feature optimised via

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<sup>1</sup> *Vaccine mandates and human rights.* Vaccines are biotechnological enhancements intended for healthy people. They augment the species-typical, innate characteristics of the human race. Any discrimination against the unvaccinated therefore amounts to racial discrimination in favour of a transhuman, biotechnologically augmented sub-species (the vaccinated). This could constitute a crime against humanity.

evolution. Our innate biological characteristics are consistent with the conditions of our evolutionary success, so it seems frivolous to stray from the established path of evolutionary fitness in the pursuit of technological utopia.

A committed transhumanist could retort that health is not necessarily the ultimate value, not a legitimate standard for human agency but just another tool, which is subordinate to our individual preferences. This hypothetical justification, although superficially appealing, seems to commit us to monadic individualism, which, as I have shown elsewhere [4], is impossible. Conscious agency is not ontologically self-sufficient but is constituted in terms of reflexive relations with other beings of the same ontological kind. If this is correct then the standard of human health is not a contingent tool or a subjective value-judgement but an objective feature of conscious agency, in which case transhumanism amounts to self-harm.

### References:

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- 3 Kowalik M. Ontological-Transcendental Defence of Metanormative Realism. *Philosophia*. 2020 573-586. <https://link.springer.com/article/10.1007/s11406-019-00149-6>
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