



Meaning and medicine: An underexplored bioethical value

Thaddeus Metz

Received: 12 April 2021 / Accepted: 28 July 2021 / Published online: 1 October 2021
© Springer-Verlag GmbH Deutschland, ein Teil von Springer Nature 2021

Abstract

Definition of the problem Since the origin of bioethics as a discipline, the field has been dominated by consideration of two main values, well-being and morality. I cast doubt on whether those are sufficient to resolve an array of important debates about which decisions to make in respect of medicine, and I also consider whether a third, under-explored value should play a much larger role.

Arguments I provide reason to believe that the value of what makes a life meaningful is essential to being able to provide conclusive judgements about several contentious matters in bioethics. After first indicating how meaningfulness plausibly differs from rightness and happiness, I point out how it cannot be reasonably ignored when making decisions in six ‘life and death’ matters.

Conclusion My aim is not to draw any firm conclusions about what to do when it comes to these life and death topics, but rather to show that in order to arrive at any, one has to consider the category of life’s meaning, which has, until recently, been nearly absent from Western bioethics since its inception.

Keywords Aims of medicine · Enhancements · Euthanasia · Life extension · Life support · Meaning in life · Procreation · Reproductive ethics · Transhumanism

This article is a substantially revised and expanded version of Metz T (2016) Life, meaning of. In: Ten Have H (ed) Encyclopedia of global bioethics. Springer, Cham, pp. 1–6, https://doi.org/10.1007/978-3-319-09483-0_267, published under CC BY-NC-ND 4.0 license. Reprinted with permission from Springer.

Professor Thaddeus Metz (✉)
Department of Philosophy, 20-10 Humanities Building, University of Pretoria, Private Bag X20,
Hatfield, 0028 Pretoria, South Africa
E-Mail: th.metz@up.ac.za

Sinn und Medizin: ein neues Forschungsfeld

Zusammenfassung In diesem Artikel argumentiere ich dafür, dass einige bioethische Herausforderungen nicht angemessen im Rahmen eines traditionellen Deutungsmusters verstanden werden können, das sich allein auf die Werte Moralität und Wohlergehen stützt. Ich werde zeigen, dass für eine angemessene ethische Behandlung vielmehr insbesondere auf den Wert des sinnvollen Lebens rekuriert werden muss. Nachdem ich kurz erläutert haben werde, wie sich Sinnhaftigkeit von moralischer Richtigkeit und Glück unterscheidet, werde ich darlegen, wie sich die Sinnfrage in sechs wichtigen bioethischen Debatten stellt, und aufzeigen, dass sie nicht vernünftigerweise ignoriert werden kann. Hierbei will ich nicht die Frage nach dem richtigen Handeln innerhalb dieser Problemfelder beantworten, sondern zeigen, dass sich diese Frage nur dann angemessen beantworten lässt, wenn man die bislang vernachlässigte Kategorie des Lebenssinns berücksichtigt.

Schlüsselwörter Ziele der Medizin · Enhancement · Euthanasie · Lebensverlängerung · Lebenshilfe · Sinn im Leben · Fortpflanzung · Reproduktionsethik · Transhumanismus

Introduction

In bioethics, we often ultimately want to know the answers to questions such as: ‘What should a medical professional do?’; ‘Which policies should a publicly funded hospital adopt?’; and ‘How should the government distribute healthcare?’. Notice that these are questions about which decisions an agent ought to take. While moral considerations would normally be pertinent to arriving at well-founded answers to these questions, notice that these questions are not *themselves* moral ones. They are instead, as philosophers would say, ones of ‘practical reason’; they are about what *should be done*, taking all relevant considerations into account. Moral considerations will count heavily when figuring out what to do, but one point of this article is that they implausibly exhaust all the relevant considerations.

Another way to put the point is that there is a logical gap between judging that a certain decision in a medical context would be permissible and that one ought to make it, and even between judging that a certain decision would wrong and that one should not make it.¹ Sometimes, even if on rare occasions, moral considerations are not the most weighty ones, and, furthermore, moral considerations can be indeterminate in respect of decision-making, as when two courses of action

¹ The gap would be traversed if it were the case that, say, the word ‘moral’ by definition meant the most weighty considerations for or against an action. However, contemporary philosophers have demonstrated that this is not what the word ‘moral’ means. If talk of ‘right’ and even ‘morally required’ by definition connoted the most important reasons, then it would be logically contradictory to pose the question of whether one ought to do what is right or morally required. However, even if one in fact ought to do what is right or required, it is not incoherent to wonder whether one should. An ‘amoralist’, one who asks whether one should live a moral life, is intelligible and is not speaking nonsense. See Brink (1989, pp. 46–50, 59, 84).

are neither morally required nor forbidden. I argue in particular that the category of life's meaning often has to be considered when determining what an agent ought to do in regard to healthcare, all things considered. There are probably some occasions when the value of meaning in life outweighs moral value and also when meaning provides reason to decide one way rather than another when morality is equivocal. Furthermore, I show below that sometimes judgements of whether a course of action is right or wrong depend on prior ones about its likely effects on the meaning of people's lives, requiring much more reflection from bioethicists on meaning as a distinct value.

Some readers will be familiar with issues of meaning in life from the 'transhumanism' or 'enhancement' debates. As is discussed below, there is disagreement about whether changing biological human nature so that we are, say, intellectually or emotionally more intelligent would be likely to add more meaning to our lives or to subtract it from them. I demonstrate that the category of meaning in life should be central to many more bioethical debates than this one. Several issues encountered in a medical context are inadequately addressed with value concepts of only welfare and morality. Although we, upon reflection, realize that meaning is often in our minds when considering what to do in medical and related contexts, that value is infrequently invoked in the bioethical literature.

After briefly indicating respects in which the concept of life's meaning has only recently begun to appear in Western bioethical discussions, I clarify what talk of 'life's meaning' and of cognate terms means, at least to many of the Western philosophers who have used them. I especially work to show how these terms have senses that differ from talk of 'happiness' and 'rightness'. Then, I point out how meaningfulness is plausibly central to making decisions in six areas: when to create life; which life to save; how far to extend life; whether to transform life; whether to end life; and how to die. My aim is not to draw any conclusions about what to do when it comes to these controversial 'life and death' topics, but is rather merely to show that in order to arrive at any firm ones, one cannot ignore the category of life's meaning, which has been nearly absent from Western bioethics since its inception.

Brief history of bioethical values

It is striking how rare it is find to explicit discussion of the category of meaningfulness when it comes to healthcare, at least in comparison to the categories of happiness (welfare) and rightness (morality). The reason that a large majority of the bioethical literature cited in this article is from the past 15 or 20 years is not merely that its main aim is to enable readers to become aware of cutting-edge debates; it is also that little other literature is readily available, despite the field having been in existence since at least the late 1960s or perhaps early 1970s (on which see Scher and Kozłowska 2018, pp. 31–44).

For about two hundred years in Western ethics, the field was dominated by egoism, utilitarianism, social contract theory, Kantianism, and Divine Command Theory. Adherents to those perspectives tended to divide motivational and normative categories into only two: self-interest, construed in terms of a person's welfare, on

the one hand, and morality, a function of constraining or combining people's self-interest in certain ways, on the other (cf. Wolf 2010, pp. 1–5; 2016, pp. 253–255).

Bioethical discussion in the post-war era by and large followed suit. Most of the discussion appealed either to notions of what would be good or bad for a patient in terms of her well-being or to right and wrong ways to treat her. As is well known, the Four Principles, meant to be common ground amongst utilitarian and Kantian accounts of right action, dominated much reflection on how to arrive at sound bioethical conclusions for many years after Tom Beauchamp and James Childress' *Principles of Biomedical Ethics* was first published (1979).² The self-interest of a moral agent (whether a medical professional, her hospital, or the government) was meant to be circumscribed by moral considerations of autonomy, beneficence, non-maleficence, and justice, often deemed sufficient by the field to render a decision about which choice to make. The categories of moral status (what is owed duties for its own sake) and of virtue/vice (what a good or bad character is) also began to figure prominently, but those have of course been moral concepts as well.

Meaning in a person's life, however, intuitively appears reducible to neither self-regarding welfare nor other-regarding morality. On the one hand, meaning is something that characteristically makes a person's life more desirable. On the other hand, quintessentially for a person to acquire meaning in her life, she must focus not on herself, or at least not her subjective well-being, but instead orient her life 'outwardly' in some way, perhaps by rearing children with wisdom, being in a romantic relationship, volunteering for a charity, exhibiting a refined skill to others, advancing knowledge of (human) nature, or creating works of art. Often enough, by positively directing one's life towards something beyond oneself, one thereby confers meaning on one's life.

As noted below, the field of bioethics has recently begun to invoke the evaluative category of meaningfulness to describe dilemmas and to prescribe how to deal with them. Instead of asking merely how a medical professional should constrain his self-interest so as to do the right thing, or how he could promote a patient's welfare in a morally desirable way, bioethicists have started to enquire into which course of action would be meaningful or, conversely, would reduce meaning in life, or have at least noted that we cannot fully understand morality and welfare without appeal to meaning. In the following section, I work to clarify what is plausibly meant by 'meaningful' and related terms.

Conceptual clarification of meaning in life

In this section I offer a positive analysis of the concept of a meaningful life, by which the field essentially means something good for its own sake that can be exemplified by a human person to a variable degree. That sort of personal meaning is opposed to a purpose that has been or could be conferred on the human race by something external to it such as God as conceived in the Abrahamic faiths. These days many

² Consider that, according to GoogleScholar, this book has been cited about 30,000 times at the time of writing this article.

philosophers of life's meaning distinguish between meaning 'in' a life, by which they mean a non-instrumental value that an individual can exhibit making her life more desirable, and the meaning 'of' life in a narrow sense, a cosmic end that might be ascribed to humanity, if not the physical universe, as a whole (e.g., Wolf 2007, p. 63; Seachris 2013a, pp. 3–4). It is meaning in life that has begun to feature in bioethical works and that I contend merits more attention from bioethicists.

To start articulating the concept of meaning in life, consider some additional reasons for thinking that it is not reducible to either welfare or morality. First off, it appears coherent to think of certain activities or periods of life that are happy but not meaningful, at least when 'happiness' is construed in a characteristically modern way as something subjective. Where happiness is a matter of feeling pleasure, liking the state one is in, or getting what one wants, then it appears to be something that can be quite separate from meaningfulness. Consider a dentist while on the job getting high on laughing gas, eating ice cream, and enjoying sit-coms, while his patients experience pain that he could quickly and easily prevent.

Relatedly, note that it is not contradictory to suppose that aspects of a life could be meaningful but unhappy, again construed subjectively. A nurse who works to relieve patients of suffering, stench, and discharge of various kinds can be supposed to acquire meaning thereby, but might well neither enjoy it nor like it nor want it to continue. In general, caring medical work involves professionals making meaningful sacrifice of their well-being for the sake of their patients.

Similar kinds of thought experiments apply to the relationship between morality and meaning. Just because an action is morally right does not make it meaningful, or at least its degree of meaningfulness is not proportional to the degree of wrongness avoided. For example, it would constitute a serious wrong for a doctor to kidnap innocent people, forcibly remove their organs, and then sell them on the black market so that he can vacation in the south of France. However, not much meaning would accrue to his life for *not* engaging in such egregious wrongdoing.

One might suggest, in reply, that talk of 'meaning' is identical, not to action that is morally permissible, but instead action that is morally praiseworthy. That proposal would make sense of the above cases pertaining to an uncaring dentist, a caring nurse, and a wicked doctor. However, there are lots of intuitively meaningful actions that seem to have nothing to do with what is morally praiseworthy, such as, say, cultivating a garden, coming to understand oneself better, mastering chess, becoming an Olympic athlete, or discovering the fate of the universe.

In addition to cases of moral permissibility without (much) meaning and cases of meaning without (much) moral praiseworthiness, there appear to be cases of immorality with some meaning. Suppose, say, the only way to save the life of one's spouse were to steal a scarce medicine from a public hospital. Such behaviour would surely be wrong, at least in some obvious major respects, but might well make one's life more meaningful on balance.

If talk of 'meaningfulness' and of cognate terms such as 'significance', 'importance', and the like is not identical to what is connoted by 'happiness' and 'rightness', then what is it about? In the field of philosophy there are a number of ideas that have been suggested. Perhaps to ask about the meaningfulness of a person's life is to ask whether it serves some purpose beyond obtaining pleasure for herself. Maybe

mention of ‘meaning in life’ by definition conveys ideas of a positive relationship between the individual and something else that is good for its own sake such as another person, an artwork, or a theory. It might be that when thinking about meaning in a life, one is considering what about it might warrant certain emotional reactions such as great esteem or admiration. It could be that meaningfulness is a function of narrative, say, a matter of a person’s life making sense or of one authoring a compelling life-story. Finally, for some, thought about meaning in life is reflection on how to make a contribution to the world.

It would be philosophically interesting to determine whether just one of these ideas (or some other one) best captures meaning-talk. However, several philosophers hold the pluralist view that when we enquire into the meaning of a life, we are considering one or more of the above issues, not a single one of them alone (Thomson 2003; Metz 2013, pp. 24–35; Seachris 2013a, pp. 3–4; Mawson 2016).

Furthermore, for the sake of the present discussion it will suffice simply to keep this cluster of properties in mind. Thinking about meaning in a life may be taken to involve a non-instrumental value in a person’s life, i.e., something that makes her life more desirable apart from other goods it might bring about, that comes in degrees and involves things such as achieving a higher purpose, relating positively to value beyond oneself, meriting pride, making sense, making a contribution, and being the author of a life. These properties are plausibly missing in intuitively meaningless conditions, such as a person letting others suffer needlessly or treating them merely as a means to his own pleasure. They are also absent in conditions naturally described as ‘trivial’, such as cultivating one’s prowess at long-distance spitting or collecting a big ball of string (Wolf 2010, p. 104). This analysis is enough to differentiate the personal good of meaningfulness from those of happiness and rightness (as well as from ‘cosmic’ enquiries into the point of the human race).³

Some might suggest that the above analysis is misguided for not making central the idea that meaningfulness is simply a matter of what is ‘meaningful’ an individual or others who have a stake in her life. How can we understand discussion about what makes a life meaningful without appealing to what someone finds important about how to live?

In reply, I note that very few philosophers would accept this kind of purely subjective approach to how to think about issues of meaning in life. For most, it is at least in principle possible to be mistaken about what is important and what is not. Presumably, a medical professional who deemed herself to be doing something meaningful in euthanizing her patients so that their spirits could be released to hop a ride on a spaceship flying by Earth would be mistaken; if understanding talk of ‘meaning’ consisted merely of ascertaining what people believe to matter, we would be contradicting ourselves to judge this person to be incorrect about what is meaningful, but we would not be.

³ Some might accept that there is a category of meaning but deny that it is something that makes a life more desirable. For the purposes of this article, advancing that position is welcome—doing so is consistent with the basic point that bioethicists and the like need to engage in systematic debate about the nature and worth of meaning.

Note that the philosophical understanding of meaning suggested here coheres well with recent empirical enquiry into the topic. For example, according to a large review of the psychological literature, ‘relationships, particularly relationships with family, are cited as the most important source of meaning in people’s lives in all cultures and age groups’ (Glaw et al. 2017, p. 243), which fits with construing meaning as achieving a purpose higher than one’s own pleasure, relating positively to value beyond oneself, and living in a way that merits pride. In addition, over the past ten years or so, several psychologists of meaning in life have converged on a pluralist account of it, appealing to the three conditions of a life being comprehensible or coherent, achieving some purpose, and making a difference beyond a limited timeframe (Martela and Steger 2016; King and Hicks 2021), where these have of course been central to the philosophical reflection as sketched above.

Having sought to clarify what the concept of life’s meaning essentially involves, in the rest of this article I indicate how it has featured in, or could be relevant to, discussions of six major topics in bioethics. Recall that my aim is not to advance any particular conclusions about what is meaningful or not, let alone which decisions in bioethical contexts are ultimately justified. Instead, the goal is to show that ascertaining what is ultimately justified cannot be done without some appeal to the value of meaning in life.

Creating life: Whether and how to procreate

I now begin to address several ‘life and death’ matters where invocation of the category of life’s meaning has begun to sprout and merits further growth. First off, consider whether to create a child at the interpersonal level between prospective parents, or which population level is appropriate to aim for at the institutional level of a government. In both cases, it is natural to consider whether those created would be sufficiently happy and, if not, to deem that to constitute some moral reason to avoid creating them. However, it is not merely the values of well-being and right action that are *prima facie* relevant.

In addition, notice that sometimes the phrasing is consideration of whether those created would have ‘lives worth living’, where that naturally invites ideas pertaining to meaningfulness. Although a life that is happy could well be worth living, some might reasonably deny that it is alone relevant when making such a judgement. For a hypothetical example, imagine that those born would live their entire lives in what Anglo-American philosophers call an ‘experience machine’ (following Nozick 1974, pp. 42–45), a virtual reality device that gives the occupant pleasant sensations and rewarding experiences but also the false impression that she is doing things that she is in fact not. Some will say that such a life would be worth living, that the good would outweigh the bad. However, others will disagree and, of particular interest, will point to aspects of a desirable life that one spent in an experience machine would miss out on but that could (also) make a life worth living. Two obvious examples, central to thought about meaning in life, are loving relationships and creative expression. Supposing that meaning in life is something good for its

own sake, its absence is on the face of it relevant to ascertaining whether a life has enough good in it to be worth creating despite the prospect of bad in it.

As mentioned above, I should not be read as making any claims about whether or not a life that lacks meaning (in the sense advanced in the previous section) would be worth creating or permissibly created. My point is that there is reasonable philosophical debate to be had about these matters. A variety of views are on offer: that a meaningless life is never worth creating; that a meaningless life would provide less reason to create it than a meaningful one but that it could be worth creating all things considered in the expectation of happiness; that meaning has nothing to do with whether a life is worth living and only happiness counts; or even that a life can be justifiably created if it is not worth living, say, because it would have an inherent dignity. Debates about these issues pertaining to when procreation is justified have not been settled, and the category of meaningfulness, as distinct from happiness and rightness, merits systematic consideration when undertaking them.

So far I have noted that, when considering whether to procreate, and hence also whether to help people do so, it is natural to ascertain whether that *one created* would likely have a meaningful life. There has also been some debate about whether we need new human lives to be made in the future in order to for *us* to have particularly meaningful lives in the present. At a large-scale level, there has been reflection on the respects in which, and extent to which, meaning in our lives depends on the presence of future generations. Just imagine that humanity would not continue beyond the year 2075; many readers will experience a reduced sense of meaning in their lives on that supposition. Although some have maintained that substantial meaning in life could be available even in the absence of the continuation of the human race (Trisel 2004), more often thinkers have debated with each other about precisely why future generations would either be necessary for, or contribute much towards, meaning in our lives (Scheffler 2013; Kauppinen 2014; Metz 2016).

Consider, too, small-scale decisions of whether prospective parents should procreate or adopt; would making a child be more meaningful than adopting one (on which see Ferracioli 2018; Yeung, article “Meaning to the rescue?” forthcoming in Think)? Is there something about blood ties and lineage that matters, or might bonds be tighter amongst biological relatives and hence more meaningful, or might the process of pregnancy be meaningful for women and their partners? Or might procreation instead reduce the meaning in one’s life by worsening the climate crisis (Campbell and Nyholm 2015)?

Apart from debates about *whether* procreation should take place, meaning in life has been invoked when thinking about *how* it should. Some hold that certain ways of making babies, viz, with the use of reproductive technologies, would reduce meaning in their lives or in the lives of the broader society. There is substantial disagreement about whether ‘artificial’ or ‘unnatural’ techniques such as *in vitro* fertilization, surrogacy, and cloning are antithetical to meaningfulness. Some find meaning to depend crucially on characteristically human behaviours, including heterosexual adults bonding with each other and creating a family through sexual intercourse (Kass 2002), while others do not (David and Kirkhope 2005).

Recall that my aim in this article is not to determine who has the better position on controversial topics such as whether and how to make new human beings. It is

merely to show that issues of meaning in life need to be addressed thoroughly in order to arrive at a comprehensive judgements about them.

Saving life: Whom and when to rescue

In the way that a creating a new life might be meaningful either for the one created or the creator (and her medical facilitator), so there is discussion about respects in which saving another's life could be meaningful for the one rescued or the rescuer. First off, saving another's life has been viewed as meaningful for the one doing the saving (discussed in Diehl 2009). Probably most people become healthcare professionals, not primarily because they think that it will make them happy or that they have a moral obligation to do so, but rather because they judge that their lives would be more important for at least trying to meet the urgent needs of others (Taubman-Ben-Ari and Weintroub 2008), in addition to their work occasioning reflection about what makes life meaningful (Sinclair 2011; Moreno-Milan et al. 2019). It is surely a sense of meaning that particularly drives people to join and appreciate caring professions such as medicine. Similarly, often people report a great sense of meaning in their lives as a result of having donated a life-saving kidney (Quintin 2013).

However, note that saving another's life probably confers meaning on the one saving only if there is some realistic prospect of there being some meaning in the life of the one saved.⁴ Consider, first, a doctor who prevents a great many human beings from dying, but foresees that they will merely remain comatose for the rest of their lives. Second, think about a doctor who again prevents a great many human beings from dying, but does so in the knowledge that they will consequently suffer excruciating torture for the rest of their lives. My intuition is that there is no meaning here in these two cases, or at the very least no great meaning. These cases strongly suggest that it is not the bare fact of saving life that is meaning-conferring; for, if it were, then we would judge there to be great meaning in the above two cases, but we do not. Saving lives that one knows will suffer a fate worse than, or even no better than, death does not confer much (if any) meaning on one's life. Instead, a natural thing to say is that for meaning to accrue from saving a life, that life must be one that will not be meaningless (or that will otherwise be worth living). This perspective at least merits debate.

In short, bioethical discussions of whom to rescue in the light of prospective quality of life (for just two examples, Kluge 2009; Wilkinson 2011) need to incorporate considerations of meaning. That is arguably so, not merely to know how to spend scarce resources, where some would find it pointless to spend them on lives that we know will be meaningless (and of course others would not), but also how to make the lives of medical professionals themselves more meaningful.

One might query whether a medical institution should act so as to foster meaning in the lives of its employees. Should it not be exclusively focused on providing the best possible healthcare? However, there is reasonable debate to be had here. After all, it is *prima facie* attractive to think that a firm ought to provide meaningful work

⁴ The following point is cribbed from Metz (2015, pp. 120–121).

to its employees, and not utterly sacrifice their interests for the sake of benefits to consumers or shareholders (e.g., Bowie 1998; Keat 2009). Might the point also apply to doctors and nurses in relation to patients and hospital managers? Why or why not? Again, I do not seek to settle these issues, and instead merely point out how the value of meaning in life is relevant to settling important bioethical debates.

Living long: Whether to continue indefinitely

A third life and death matter that has occasionally been addressed through the lens of meaning is life-extension. One debate is about what is sometimes called ‘considerable’ or ‘substantial’ life-extension, which involves something more than just a handful of extra years beyond what humans have recently achieved but also much less than immortality. Think about the possibility of living 500 years, say; would meaning in our lives be enhanced or reduced? Intuitively an answer to that question is essential to arrive at an informed decision of whether to support considerable life-extension.

One finds arguments on both sides in the literature (which are usefully laid out in Häyry 2011). For some, with more time would come more meaningful opportunities to be and to do, perhaps when it comes to knowledge or the arts (Gems 2003). For others, in contrast, opting for considerable life-extension would bring a narrow, ego-centric focus on self-preservation in its wake (Pijnenburg and Leget 2007), which might prevent or even subtract from the meaning in a person’s life.

Another aspect of the debate about life-extension concerns an eternal life or related conditions far beyond considerable life-extension. Traditionally Western philosophers have considered whether having a soul, an immortal spiritual essence, would be necessary for meaning or, conversely, would be sufficient for a meaningless one. However, some of those debates are beginning to be recast in terms of the technological possibility of sustaining a person’s identity indefinitely in a physical world, perhaps by successive uploads of a stream of consciousness into a string of computerized bodies. Despite the shift to a focus on an extremely long life in our sub-atomic, spatio-temporal universe, most of the arguments for and against an indefinite life-span are similar (for overviews, see Metz 2013, pp. 124–133; 2019, pp. 14–17, 25–31, 36–39).

To sum up the issues tersely, on the one hand, some have the sense that nothing is really worth doing unless it will make some kind of permanent difference to the world, that life is nonsensical if it is too short for the wicked and upright to get their respective due, and that, so long as one had one’s wits and powers, more life would be better in terms of degree of meaning available. On the other hand, some believe that an immortal or even very long life would be get boring, become repetitive, lose a sense of preciousness and urgency (and perhaps the absence of will to undertake creative, beneficent, or intellectual projects), or fail to develop in a narratively suitable way akin to something like a novel. The philosophical literature on these topics is large, and it now has a bearing on bioethics, insofar as life-extension could become a realistic possibility.

Enhancing life: Whether to modify human nature

The ability to live considerably longer than humans ever have is one distinct and salient instance of a more general debate pertaining to biological enhancements or transhumanism. It looks likely that human beings will be able to modify our genes so as not merely to prevent or cure diseases, but also to enhance our physical, emotional, and intellectual capacities. There is disagreement about whether to alter our genetic makeup to such a degree that we are no longer strictly speaking a member of the species *Homo sapiens*. Would doing so produce or reduce the meaning in our lives?

Some contend that radically enhancing our physical and mental abilities by manipulating our DNA would promise to give us a greater capacity for meaningful projects. We could, say, rescue more people or learn more about the natural world than we can as human beings (Harris 2007; Danaher 2014; Sandberg 2014). Or we could make our nature more perfect, something closer to angels and farther away from animals (Sandberg 2014).

However, others maintain that our most important values, including that of meaning in life, are grounded on the fact that we are human beings. For example, one suggestion is that human nature has a dignity and is something to be honoured, where becoming non-human would undercut meaning by degrading our humanity (President's Council on Bioethics 2003). There is also the suggestion that, just as our notions of health and virtue are tied to human limits, so are our notions of meaning in life (Nussbaum 1989). Still more, some have argued that radical enhancements would reduce meaning in our lives by virtue of alienating us from our own, irreducibly human identities or from our children (Agar 2013).⁵

Somewhat related to radical biotechnological enhancements, there is speculation that someday we could upload our minds into computers, either becoming robots or not residing in a body at all and instead living in (something like) the internet. Would doing so make more meaning available, say, because 'we' would be much less vulnerable to illness and injury than we could be in a biological body (apart from whether we could live considerably longer)? Or, in contrast, would it reduce the meaning available, because of the sensation and emotion that would presumably be lacking (for an overview of these debates, see Messerly 2013, pp. 243–280)?

Killing: When to terminate a life

One of the more common areas of bioethics in which to find discussion of meaning in life, at least implicitly, concerns voluntary euthanasia, physician-assisted suicide, and other forms of killing such as terminating pregnancy and withdrawing life support from severely disabled neonates. One finds the ideas that having no prospect of meaningful engagement can make suicide, euthanasia, and the like morally permissible (Kohl 1978; Heyd 1984; Little 1999) and that meaning in a person's life

⁵ See related debate about whether genetically modifying non-human organisms would also undercut meaning in, eg, van den Belt (2009).

depends on one's being the author of it, including its end (Richards 1981; Harris 2003).

Here, a moral conclusion is drawn from prior considerations of meaning; the judgement that a life would be meaningless entails that it can be permissible to end it. However, sometimes the inference goes in the other direction. That is, sometimes thinkers conclude that an action would be meaningful or lack meaning based on independent premises about morality.⁶

For example, if a doctor held a prior judgement that killing an innocent human being is invariably immoral, would such killing then reduce meaning in her life and would refusing to kill enhance it to some extent (Varelius 2013)? Suppose that two infants are joined as 'Siamese twins', and that both will die unless one is killed. In that case, a concern to promote health, at least conceived in one straightforward way, would recommend killing one to save the life of the other. However, if a doctor believes she is morally forbidden from killing in this case, then her doing so might reduce the meaning in her life. Note that this could be true even if her views about morality were incorrect; for many, some meaning is lost when one gives up integrity or does not act in accord with one's deepest values. Such considerations, after all, provide some of the reason why medical professionals should generally avoid paternalism, instead respecting the religiously grounded views of their patients for less than the best treatment, even when they are misguided (Orr and Genesen 1997).

Dying well: How to face death

For a final life and death matter where considerations of meaning are relevant, consider what is sometimes called a 'meaningful death'. In this context, the word 'death' does not mean the permanent cessation of a person's existence so much as the process of transitioning from being alive into that state. 'Meaningful dying' would be a more accurate and careful expression in English, and indeed one sometimes encounters that phrase (in, eg, Bourgeois and Johnson 2004; Miller and Berger 2019).

The issue concerns the nature of palliative care to give a terminally ill patient, where some believe that care-givers should strive to enhance meaning in a patient's life just prior to death. Key questions include: the precise kinds of loneliness that people tend to experience and how to address them (Bourgeois and Johnson 2004; Ettema et al. 2010; Miller and Berger 2019); which emotional states might be meaning-conferring, say, a sense of closure, and how to prompt them (Bowman et al. 2000); whether accepting hard truths about oneself at the end of life is meaningful or not (Kamm 2013, pp. 3–32); and which sorts of control over one's body and mind are particularly crucial for a sense of meaning (Hester 1998; Dwyer et al. 2008).

Suppose there is indeed a difference between dying meaningfully and not. Is that something for which the government should pay? Many readers will agree that redistributive taxation can be justified in order to save lives or more generally to

⁶ For discussion of some of the complex relationships between meaning and morality, see Kipke and Rütter (2019).

promote health and relieve pain. However, is it also just to tax people who have acquired wealth without force or fraud to redistribute their money so that others can die in a way that is meaningful? This question of public policy is a live one.

Conclusion

My aims have been to point out several respects in which the recent bioethical literature has sporadically appealed to the category of meaning in life in order to address practical dilemmas and to suggest that a much more rigorous bioethical engagement with meaning is warranted. I first indicated that the categories of welfare and morality have received the lion's share of attention from bioethicists, and then sketched why it is reasonable to think of meaningfulness as distinct from those two values. Next, I discussed several major areas where meaning in life has entered into bioethical debate and deserves even more thorough consideration, all having to do with 'life and death' matters. Specifically, I have argued that systematic reflection on life's meaning is essential to address questions pertaining to: intending to create new human lives; mending injuries so that lives are saved; extending life indefinitely into the future; upending life so that we are no longer human; ending life in the forms of euthanasia and physician-assisted suicide; and tending to those about to die.

If it is indeed the case that one cannot plausibly arrive at well-founded philosophical positions on these controversies without considering meaningfulness, then bioethicists must not read the 'ethics' part of their name narrowly in terms of right and wrong or even virtue and vice. Instead, they should construe that term broadly, as picking out values in general or the ultimate question of how an agent in a medical context ought to choose, where considerations of meaning in life must not be sidelined in the way they largely have been up to now.

In this article, I have cited work principally published by bioethicists or appearing in bioethical forums, and have not thoroughly taken up the large amount of research that has been published by contemporary western philosophers who seek to answer the question of what, if anything, would make a life meaningful.⁷ It would be ideal if future research in a given field were undertaken in the light of a greater awareness of the other one. On the one hand, bioethicists could benefit from more abstract, theoretical reflection about meaning in general. However, on the other, there is probably another essay to write, on how philosophers of life's meaning would benefit from considering the concrete implications of their views for bioethical matters.

⁷ For overviews of recent English-speaking philosophical literature on life's meaning, see Metz (2021); Seachris (2021). For the most comprehensive anthologies of such literature, see Seachris (2013b); Klemke and Cahn (2018).

Declarations

Conflict of interest T. Metz declares that he has no competing interests.

Ethical standards For this article no studies with human participants or animals were performed by any of the authors. All studies performed were in accordance with the ethical standards indicated in each case.

References

- Agar N (2013) *Humanity's end: why we should reject radical enhancement*. MIT Press, Cambridge
- Beauchamp T, Childress J (1979) *Principles of biomedical ethics*, 1st edn. Oxford University Press, New York
- van den Belt H (2009) Playing God in Frankenstein's footsteps: synthetic biology and the meaning of life. *Nanoethics* 3:257–268
- Bourgeois S, Johnson A (2004) Preparing for dying: meaningful practices in palliative care. *Omega* 49:99–107
- Bowie NE (1998) A Kantian theory of meaningful work. *J Bus Ethics* 17:1083–1092
- Bowman KW, Martin DK, Singer PA (2000) Quality end-of-life care. *J Eval Clin Pract* 6:51–56
- Brink D (1989) *Moral realism and the foundations of ethics*. Cambridge University Press, Cambridge
- Campbell S, Nyholm S (2015) Anti-meaning and why it matters. *J Am Philos Assoc* 1:694–711
- Danaher J (2014) Hyperagency and the good life—Does extreme enhancement threaten meaning? *Neuroethics* 7:227–242
- David M, Kirkhope J (2005) Cloning/stem cells and the meaning of life. *Curr Sociol* 53:367–381
- Diehl U (2009) Human suffering as a challenge for the meaning of life. *Existenz* 4:36–44
- Dwyer L-L, Nordenfelt L, Ternstedt B-M (2008) Three nursing home residents speak about meaning at the end of life. *Nurs Ethics* 15:97–109
- Ettema E, Derksen L, van Leeuwen E (2010) Existential loneliness and end-of-life care: a systematic review. *Theor Med Bioeth* 31:141–169
- Ferracioli L (2018) Procreative-parenting, love's reasons, and the demands of morality. *Philos Q* 68:77–97
- Gems D (2003) Is more life always better? The new biology of aging and the meaning of life. *Hastings Cent Rep* 33:31–39
- Glaw X, Kable A, Hazelton M, Inder K (2017) Meaning in life and meaning of life in mental health care: an integrative literature review. *Issues Ment Health Nurs* 38:243–252
- Harris J (2003) Consent and end of life decisions. *J Med Ethics* 29:10–15
- Harris J (2007) *Enhancing evolution: the ethical case for making better people*. Princeton University Press, Princeton
- Häyry M (2011) Considerable life extension and three views on the meaning of life. *Camb Q Healthc Ethics* 20:21–29
- Hester DM (1998) Progressive dying: meaningful acts of euthanasia and assisted suicide. *J Med Humanit* 19:279–298
- Heyd D (1984) The meaning of life and the right to voluntary euthanasia. In: Carmi A (ed) *Euthanasia*. Springer, Berlin, pp 169–174
- Kamm FM (2013) *Bioethical prescriptions: to create, end, choose, and improve lives*. Oxford University Press, New York
- Kass L (2002) The meaning of life—in the laboratory. *Public Interest* 146:38–73
- Kauppinen A (2014) Flourishing and finitude. *J Ethics Soc Philos* <http://www.jesp.org/articles/download/flourishing-and-finitude.pdf>. Accessed: 7 Aug 2021
- Keat R (2009) Anti-perfectionism, market economies and the right to meaningful work. *Anal Krit* 31:121–138
- King L, Hicks J (2021) The science of meaning in life. *Annu Rev Psychol* 72:561–584
- Kipke R, Rütger M (2019) Meaning and morality: some considerations on a difficult relation. *Soc Theory Pract* 45:225–247
- Klenke ED, Cahn SM (eds) (2018) *The meaning of life: a reader*, 4th edn. Oxford University Press, New York
- Kluge E-H (2009) Quality-of-life considerations in substitute decision-making for severely disabled neonates. *Theor Med Bioeth* 30:351–366
- Kohl M (1978) Voluntary death and meaningless existence. In: Kohl M (ed) *Infanticide and the value of life*. Prometheus, Buffalo, pp 206–218

- Little M (1999) Assisted suicide, suffering and the meaning of a life. *Theor Med Bioeth* 20:287–298
- Martela F, Steger M (2016) The three meanings of meaning in life: distinguishing coherence, purpose, and significance. *J Posit Psychol* 11:531–545
- Mawson TJ (2016) *God and the meanings of life*. Bloomsbury, London
- Messlerly J (2013) *The meaning of life: religious, philosophical, transhumanist, and scientific perspectives*. Darwin & Hume, Seattle
- Metz T (2013) *Meaning in life: an analytic study*. Oxford University Press, Oxford
- Metz T (2015) Fundamental conditions of human existence as the ground of life's meaning. *Relig Stud* 51:111–123
- Metz T (2016) Reasons of meaning to abhor the end of the human race. *Faith Philos* 33:358–369
- Metz T (2019) *God, soul and the meaning of life*. Cambridge University Press, Cambridge
- Metz T (2021) The meaning of life. In: Zalta E (ed) *Stanford encyclopedia of philosophy* <https://plato.stanford.edu/entries/life-meaning/>. Accessed: 7 Aug 2021
- Miller BJ, Berger S (2019) *A beginner's guide to the end: practical advice for living life and facing death*. Simon & Schuster, New York
- Moreno-Milan B, Cano-Vindel A, Lopez-Dóriga P, Medrano L, Breitbart W (2019) Meaning of work and personal protective factors among palliative care professionals. *Palliat Support Care* 17:381–387
- Nozick R (1974) *Anarchy, state, and utopia*. Blackwell, Oxford (Repr. 1999)
- Nussbaum M (1989) Mortal immortals. *Philos Phenomenol Res* 50:303–351
- Orr R, Genesen L (1997) Requests for 'inappropriate' treatment based on religious beliefs. *J Med Ethics* 23:143–147
- Pijnenburg M, Leget C (2007) Who wants to live forever? Three arguments against extending the human lifespan. *J Med Ethics* 33:585–587
- President's Council on Bioethics (2003) *Beyond therapy: biotechnology and the pursuit of happiness*. The President's Council on Bioethics, Washington DC
- Quintin J (2013) Organ transplantation and meaning of life. *Med Health Care Philos* 16:565–574
- Richards D (1981) Constitutional privacy, the right to die and the meaning of life. *William Mary Law Rev* 22:327–419
- Sandberg A (2014) Transhumanism and the meaning of life. In: Mercer C, Trothen T (eds) *Religion and transhumanism: the unknown future of human enhancement*. Praeger, Westport, pp 3–22
- Scheffler S (2013) Death and the afterlife. In: Kolodny N (ed) *Death and the afterlife*. Oxford University Press, Oxford, pp 15–110
- Scher S, Kozłowska K (2018) *Rethinking health care ethics*. Palgrave Macmillan, Singapore
- Seachris J (2013a) General introduction. In: Seachris J (ed) *Exploring the meaning of life: an anthology and guide*. Wiley-Blackwell, Malden, pp 1–20
- Seachris J (ed) (2013b) *Exploring the meaning of life: an anthology and guide*. Wiley-Blackwell, Malden
- Seachris J (2021) Meaning of life: the analytic perspective. In: Fieser J, Dowden B (eds) *Internet encyclopedia of philosophy* <https://iep.utm.edu/mean-ana/>. Accessed: 17 September 2021
- Sinclair S (2011) Impact of death and dying on the personal lives and practices of palliative and hospice care professionals. *Can Med Assoc J* 183:180–187
- Taubman-Ben-Ari O, Weintraub A (2008) Meaning in life and personal growth among pediatric physicians and nurses. *Death Stud* 32:621–645
- Thomson G (2003) *On the meaning of life*. Wadsworth, South Melbourne
- Trisel BA (2004) Human extinction and the value of our efforts. *Philos Forum* 35:371–391
- Varelius J (2013) Ending life, morality, and meaning. *Ethical Theory Moral Pract* 16:559–574
- Wilkinson D (2011) A life worth giving? The threshold for permissible withdrawal of life support from disabled newborn infants. *Am J Bioeth* 11:20–32
- Wolf S (2007) The meanings of lives. In: Perry J et al (ed) *Introduction to philosophy*, 4th edn. Oxford University Press, New York, pp 62–73
- Wolf S (2010) *Meaning in life and why it matters*. Princeton University Press, Princeton
- Wolf S (2016) Meaningfulness: a third dimension of the good life. *Found Sci* 21:253–269