

## Bioethics and “Human Dignity”

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*The term “human dignity” is the source of considerable confusion in contemporary bioethics. It has been used by Kantians to refer to autonomy, by others to refer to the sanctity of life, and by still others (e.g., the President’s Council on Bioethics) to refer—albeit obliquely—to an important but infrequently discussed set of human goods. In the first part of this article, I seek to disambiguate the notion of human dignity. The second part is a defense of the philosophical utility of such a notion; I argue that there is nothing implausible about appealing to a deontological “principle of dignity” to solve bioethical problems, especially those concerning the development of new biotechnologies. There may, however, be problems associated with any attempt to use dignity as a basis for public policy. This sort of worry is explained and briefly addressed in the final section.*

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### I. INTRODUCTION<sup>1</sup>

Quite a lot of literature in bioethics—especially that which is aimed toward a popular, and not a professional, audience—makes use of the term “human dignity.” The term is also prevalent in discussions of international policy and in government documents drafted in the post–World War II era. Common examples include the Preamble of the Charter of the United Nations (which affirms “faith . . . in the dignity and worth of the human person”), Article 1 of the Universal Declaration of Human Rights (“All human beings are born free and equal in dignity and rights”), and Article 10 of the International Covenant on Civil and Political Rights (mandating respect for “the inherent dignity of the human person”).<sup>2</sup> In the United States, dignity has played an important role in recent work done by Leon Kass and the President’s Council on Bioethics. In 2002, the council issued its first report; it was titled *Human Cloning and Human Dignity*.<sup>3</sup>

Given how widespread appeals to dignity are, it is disappointing to note that the term is rarely defined by those who employ it. Authors evidently take it for granted that their readers understand phrases like “*x* is an affront to human dignity” and “respect for human dignity requires *y*.” Perhaps we speakers of English do have a vague intuitive grasp of what these phrases might mean, but it is evident that there is no real consensus concerning what dignity is, precisely who has it, or when and how it might be acquired. Philosophical analyses of the concept have not been forthcoming, even by those whose substantive moral conclusions depend upon it. Ruth Macklin describes the relevant literature well: “close inspection of leading examples shows that appeals to dignity are either vague restatements of other, more precise, notions or mere slogans that add nothing to an understanding of the topic” (Macklin, 2003, 1419).

Although I do not wish to dispute Macklin’s claim *qua* assessment of the current state of affairs, I do not share her pessimism about the utility of human dignity as a normative concept.<sup>4</sup> In the first part of this article, I will give the contours of such a concept, borrowing primarily from the work of Kass and the President’s Council on Bioethics. In the second part, I will take up the challenge of defending this conception of human dignity against a number of objections. I believe it offers us a useful tool for thinking morally about the development of new biotechnologies. In the last part of the article, I will argue that in spite of this moral utility, it is not at all clear that human dignity can help us in formulating public policy.

## II. THE DIGNITY OF BEING HUMAN

### What Dignity Is Not

There are multitudinous ways of conceiving of human dignity, so the first step toward clarification is simply to identify what people have meant by appealing to it. In some cases, Macklin is exactly right: “Dignity is a useless concept . . . and can be eliminated without any loss of content” (Macklin, 2003, 1420). This is especially true of much of the European discussion of human dignity, international law, and bioethics, which typically takes “dignity” to be synonymous with either “autonomy” or “sanctity of life.”<sup>5</sup>

If human dignity is understood merely in terms of autonomy, of course, then there is no reason to treat it as a unique moral value. Indeed, it seems desirable to follow Macklin’s suggestion and eliminate it from ethical discourse altogether, the principle of autonomy being quite well entrenched in applied ethics. To employ dignity merely for its rhetorical force is to invite needless confusion into debates that are complex enough in their own right.

In contrast, human dignity as sanctity of life is philosophically problematic. A defender of this position must show not only that there is something uniquely valuable about human life—those who speak favorably of the sanctity of life

invariably mean “sanctity of *human* life”—but also that mere membership in the species *homo sapiens* is sufficient for an organism to merit special moral status.<sup>6</sup> The latter is not an easy task, and I will not attempt it here.

### What Dignity Is

A more promising way to understand dignity begins with the assumption that there exist intangible, distinctively human goods that are necessary conditions for true human flourishing. These goods are taken to be nonempirical, non-quantifiable, and intrinsically valuable. In seeking paradigm cases of these distinctively human goods, there is no better place to look than the moral virtues. It is good, for example, to be courageous. It is good to be compassionate. It is good to be altruistic. It is good to be friendly, honest, trustworthy, and selfless. Importantly, these characteristics are all things that are good in themselves; their worth is not (merely) a function of the amount of pleasure or happiness they are likely to produce. This claim may strike some as implausible, but its denial is enormously difficult to reconcile with widely shared and deeply held intuitions. Consider, for example, the following two cases:

*Courageous firefighter:* At great risk to his own life, a firefighter rushes into a burning building to save the life of a small child. He succeeds, and returns the child safely to its mother’s arms. Due to a medical condition unrelated to his work as a firefighter, he immediately dies.

*Cowardly firefighter:* Perceiving great risk to his own life, a firefighter jumps into the nearest fire truck intending to drive himself to safety. He accidentally backs the truck into a fire-weakened wall of a burning building, causing much of the building to collapse. Fortuitously, the collapse leads to the escape of a small child, whose bed slides down a pile of rubble and deposits her at the firefighter’s feet. He returns the child safely to its mother’s arms. Due to a medical condition unrelated to his work as a firefighter, he immediately dies.<sup>7</sup>

The only significant difference between these cases, as far as I can tell, is that one firefighter behaved courageously, whereas the other behaved cowardly. The net balance of pleasure and pain, happiness and sadness, and so forth, appears to be exactly the same. (Perhaps we should stipulate, just to be safe, that the fire truck in the second case was not damaged in any serious way.) Yet, it seems absurd to claim that the two firefighters are equal in moral worth or that the two cases are morally equivalent. Clearly, there is a genuine value present in the first case, which is absent in the second.<sup>8</sup>

Similar stories could be told to highlight other moral virtues, but to do so would be to belabor the point. We should note, however, one particular subcategory of moral virtue: that is, virtues and goods that are made possible through suffering. Willingness to suffer for the sake of what one holds dear is an example, along with steadfastness in the face of actual suffering. We might reasonably denote this class of virtues the “heroic” virtues.<sup>9</sup> These, along with moral virtues in general, are intangible uniquely human goods.

As noted earlier, however, moral virtues are not the only such goods. Aesthetic values are also intangible, and the capacity for enjoying them is a uniquely human one.<sup>10</sup> It is good to enjoy (and to be able to enjoy) the beauty of a sunset or the work of Monet. It is good to experience great literature, the graceful movements of a ballet dancer, or the grace of a power forward in the low post. Handel's *Water Music* is a very good thing to enjoy, especially the second suite. It is good that people write poetry (at least some of the time). The Eiffel Tower is beautiful at night, and appreciation of that beauty is itself a good.

There are also goods that stem from our awareness of ourselves as finite, limited beings.<sup>11</sup> These are the most challenging to elucidate. Our finitude entails that we are individuals, but also that we cannot survive (let alone live well) without the aid of others. We are brought into the world by forces beyond our control, into circumstances we do not choose, and with a radical dependence on others to meet our most basic needs. This both requires and makes possible the unique intimate ties of family relationships. The circumstances of our generation also entail that each of us is genetically unique<sup>12</sup> and that all of us are born with aptitudes and abilities not of our own (or of anyone's) choosing. Developing one's capacities to the fullest is another intangible human good, as is succeeding in spite of one's limitations, against all reasonable hope of success. Being limited makes possible perseverance through adversity, aspirations of fulfilling a calling, and being part of (worthy) causes greater than oneself.<sup>13</sup>

According to many of those who wish to defend the dignity of being human, our limitations also make possible—or suggest, or even require—an attitude of “receptivity” toward the natural world, including human nature.<sup>14,15</sup> Simply and boldly put, this amounts to a rejection of the Enlightenment's exaltation of human will and reason and concomitant objectification of the natural world. It is an idea that appears in environmentalist thinking as well as in the literature on human dignity. Some have argued against nuclear power, for example, on the grounds that it involves generating energy

by forcibly “wringing it out of nature” regardless of whatever “resistance” nature may offer to this effort. This audacious posture, viewed by some opponents as evidence of technological hubris, is seen as antithetical to ideas implicit in following “soft energy paths” (e.g., solar, wind, geothermal, hydroelectric, and oceanothermic sources of energy). Preference for technologies associated with such (recurrent) sources often derives from a vision of harmonious interaction of man and nature, in which priority is placed on “cooperating with” rather than “taming” or “controlling” nature. (McGinn, 1979, 7)

Many will agree that there is an intuitive appeal to these ideas. It seems proper to think of ourselves as part of an organic system, a system whose overall well-being is jeopardized at our own expense. *Contra* Descartes, we

are not and ought not be “the masters and possessors of nature” (Descartes, 1969, 142). Neither the world nor our own nature is ours to “do with as we please.”<sup>16</sup>

Receptivity is thus related to the idea that there is something significant about doing things the “natural way” in human life, another common theme in the literature on dignity. It is often suggested by such authors that some ends ought to be attained via their “proper” (read: natural) means. Other ways of reaching such ends are, if not necessarily wrong, of much less moral worth. In many cases, they are tantamount to cheating. Indeed, the President’s Council argues against steroid use in athletic contests on precisely these grounds.<sup>17</sup> This is not to reject artificial enhancements and medical interventions *tout court*; it is rather to claim that something of great consequence is lost when we take shortcuts to goals, which, in themselves, may be quite worthwhile. What is “cut out” in such shortcuts is the role normally played by human agency:

the “naturalness” of means matters. [The problem] lies . . . in the danger of violating or deforming the nature of human agency and the . . . naturally human way of activity. In most of our ordinary efforts at self-improvement, whether by practice, training, or study, we sense the relation between our doings and the resulting improvement, between the means used and the end sought. There is an experiential and intelligible connection between means and ends; we can see how confronting fearful things might eventually enable us to cope with our fears. We can see how curbing our appetites produces self-command. Human education ordinarily proceeds by speech or symbolic deeds, whose meanings are at least in principle directly accessible to those upon whom they work. In contrast, biotechnical interventions act directly on the human body and mind to bring about their effects on a passive subject, who plays little or no role at all. (President’s Council on Bioethics, 2003, 292)

Admirers of Aristotle will recognize many themes common to virtue theory in the above passage, as well as in much of the preceding material. In a way, this brings us full circle; our discussion of what dignity is began with the claim that moral virtue is an important human good. We are now in a position to say somewhat more precisely what dignity actually consists in.

“Human dignity” refers to a collection of intangible, distinctively human goods. To affirm that there is such a thing is to affirm that genuine human flourishing requires at least the following: moral virtue, appreciation of beauty, awareness of oneself as a unique individual, participation in human community, receptivity, and personal agency. Dignity is a degreed property. Some human beings have it to a very high degree; others do not have it at all. Its primary locus of application, however, is not individual persons but broad cultural trends and social practices. Human dignity is typically promoted or hindered at the macrolevel, not in interactions between persons or groups of persons. This is an extremely important point and will be discussed further in the next section.

## III. PROBLEMS OF APPLICATION

Even if one is willing to grant that dignity, understood as I have suggested here, is a meaningful and valuable notion, it is still reasonable to wonder whether it can pull any weight in moral deliberation. One great strength of traditional principle-based approaches to ethics is that they provide us with reasonably clear guidelines for thinking about moral problems. Principles of respect for autonomy, beneficence, and justice offer a grid through which we can examine particular cases and evaluate possible courses of action. Is there an analogous “principle of dignity” that is similarly useful? It is not clear that there is.

Formally, we can construct a principle of dignity quite easily. I propose the following: For any practice *X*, it is immoral to engage in or permit *X* to the degree that *X* jeopardizes some aspect of human dignity. But whether this principle can do any real work for us remains to be seen. It seems importantly dissimilar to the principles of respect for autonomy, beneficence, and justice, in two main ways.

First, the principle of dignity is applicable primarily in the abstract. It is of little utility in resolving particular moral problems. Dignity deals with technologies, for example, at the conceptual level, as kinds. It is not especially concerned with their applications. Typically in moral reflection, technologies as such are taken to be morally neutral; they are instruments that can be made to serve good or bad ends, and the goal of ethical reflection is to identify which ends are to be pursued and which are to be avoided (or forbidden); hence, the “case method” in applied ethics. To elucidate the moral issues in question, we tell a detailed story about particular individuals who are forced to make particular choices and take particular actions. Dignity is not especially useful in such analyses. Indeed, as we will see, attempts to apply dignity to particular cases nearly always suggest that we should follow some other principle.

Second, as has already been discussed, the goods it is supposed to protect are intangible. Those who use human dignity as a category of moral evaluation are concerned with general cultural attitudes toward moral virtue and the “meaning” of human life and various human activities. The following statement from the President’s Council on Bioethics, from their report on the moral status of human cloning, is representative of this position:

We locate human cloning within its larger human and technological context, rather than consider it in isolation. We focus first on the broad human goods that it may serve or threaten, rather than on the immediate impact of the technique itself . . . we hope to contribute to a richer and deeper understanding of what human cloning entails. (*President’s Council on Bioethics, 2002, 2–3*)

Along with “richness” and “depth,” defenders of dignity often use terms like “dehumanization,” “destiny,” and “transcendence” in explicating their position.<sup>18</sup> Like dignity itself, none of these is easily definable.

These differences between dignity, on the one hand, and autonomy, beneficence, and justice, on the other, generate three specific (but closely related) worries about the usefulness of dignity in applied ethics. Given the abstract character of appeals to dignity, it is reasonable to wonder if such appeals can shed any useful light on real moral problems. There is rhetorical power in insisting upon a bioethics that accounts for the “rich texture of the human experience,” but it is not obvious that this claim is sufficiently clear to generate any real philosophical traction. This is the first worry. The second is that, even if we can make sense out of how dignity might in practice be relevant to biomedical ethics, it is hard to see how it can possibly function as an action-guiding principle. This becomes especially clear when we try to apply the principle of dignity in particular cases. The third worry is that ethical arguments based on human dignity are mere slippery slopes, of the fallacious variety. When we consider pursuing some new course of action, it is often difficult to predict what the tangible consequences thereof will be, even when we have reliable empirical data about similar actions. By its very nature, the application of a principle of dignity takes this kind of challenge to another level; it requires speculation about how best to preserve non-quantifiable goods. Thus, in the eyes of their critics, advocates of dignity often bear a striking resemblance to Chicken Little, insisting that the sky is falling on the basis of grossly insufficient evidence.

### Ambiguity

Concerning the first worry, it is hoped that the previous section has made some headway in resolving it. If we are wondering about the moral status of a new biotechnology, dignity-based considerations will motivate us to consider how that technology is likely to affect our prospects for genuine flourishing. For example, Kass argues against human reproductive cloning (in part) on the grounds that it is very likely to interfere with the sense of individuality experienced by clones. To have “a genotype that has already lived” is to be denied an authentically human existence (Kass, 2004, 557).<sup>19</sup> The burdens that would be placed on such a clone—to emulate the successes or rectify the failures of the donor, for example—would make it enormously difficult for clones to be properly aware of themselves as individuals. The principle of dignity therefore gives us some reason to believe that human reproductive cloning is immoral.

So perhaps it is too strong to say that dignity sheds no light at all on moral problems. Nonetheless, other problems arise related to the concept itself. Since there are a number of specific values that fall under the concept of dignity, it might be alleged that there is no principled way to resolve a conflict between them. If a proposed technology would enhance one aspect of dignity but hinder another, it is not clear what respect for dignity requires us to do. There are at least three ways past this difficulty. First, one might maintain

that there is a “unity of dignity,” *à la* Aristotle’s unity of the virtues. The latter is, of course, a highly contentious doctrine, but it is difficult to conceive of a realistic scenario that would genuinely pit one sort of dignity against any other, such that one would be forced to choose between them. It is possible that there can be no such tension in principle.

If this response is untenable, however, another reply exists. The principle of dignity, as stated previously, is negative in character, setting boundaries concerning what we ought not do but not establishing positive duties we are obliged to fulfill. In other words, we might reasonably hold that a practice’s tendency to thwart human dignity provides us with a *prima facie* obligation to avoid that action, but the fact that a practice tends to enhance human dignity does not provide us with a *prima facie* obligation to perform it. So if *X* is something that tends to enhance persons’ sense of identity but also clearly runs counter to receptivity, dignity dictates that we not do *X*.

This might seem odd since dignity-based considerations—though not sufficient to generate positive obligations to act—can certainly provide us with *pro tanto* reasons for pursuing some course of action. And this fact, combined with the point made in the previous paragraph, leaves us with a rather counterintuitive result. Suppose that some practice will enable us to enhance every aspect of human dignity to a very high degree, with the exception of receptivity, which will be marginally reduced. Then, we find ourselves with an extremely strong moral reason to permit (or even engage in) that practice, but also with an apparent obligation not to permit (or engage in) it.<sup>20</sup> What is the defender of dignity to do?

The answer is that the defender of dignity is to do more or less exactly what other moral philosophers do when faced with situations in which multiple moral values are in play: compare the relative strengths of the *prima facie* obligations, on the one hand, and the *pro tanto* reasons for acting, on the other, and act accordingly. There is no algorithm that can be applied to determine in advance what must be done, but in this respect, the defender of human dignity is no worse off *vis-à-vis* difficult practical questions than any other normative pluralist is. It is no secret that considerations of beneficence may sometimes conflict with the demands of justice; when this happens, we proceed carefully and do our best to balance the competing considerations in a satisfactory way.

Finally, the defender of human dignity might sometimes find it appropriate to punt. In cases where it is possible to enhance some aspect of dignity by reducing another, and in which the strength of the obligation to refrain from thwarting dignity is roughly comparable to the strength of the reason to enhance it, one might claim that the principle of dignity simply does not apply. Since scenarios of this sort seem likely to be few and far between (if they exist at all), this is not an unattractive possibility; the principle of dignity will still apply to a significant range of moral questions. Perhaps some cases that touch on dignity-based concerns are nevertheless such that considerations of



human dignity are not the considerations to which we must attend in evaluating them.

### Directing Action

The second sort of worry plays off the first. Although there may be few situations in which dignity-based considerations conflict with each other, there seem to be many in which dignity is at odds with other moral considerations. Dignity and beneficence, for example, will often come into direct conflict with each other. Consider the following case:

*Age retardation:* Smith is a sixty year-old woman who has no biological offspring, but would like to adopt a child. New gene therapy techniques are available which would (along with physical exercise) restore her body to approximately the same condition it was in when she was thirty-five. If she pursues the treatment, she will be permitted to adopt a child. If she does not, she will not be permitted to do so.

Let us suppose that dignity-based considerations lead us to conclude that age retardation technologies are immoral;<sup>21</sup> Smith ought not have the treatment. At the same time, it seems certain that beneficence would lead us to permit her to have the treatment. (This is especially clear since Smith is not claiming a positive right to the treatment; she is not demanding, for example, that the government pay for it.) The problem for dignity is not that this sort of conflict is difficult to resolve but that it seems far too easy. I suspect that most people will share the intuition that *obviously* Smith should be allowed to do as she wishes here. What's more, it is extremely difficult to conceive of a scenario in which our intuitions push us in the other direction. Almost invariably, when dignity conflicts with autonomy, beneficence, or justice, it emerges as the loser.

The problem, however, is not with dignity. The problem is in the way it has been applied. Human dignity does not offer much guidance at the level of individual cases, but it is not intended to. It makes no pretense of respecting the primacy of the individual. Rather, dignity is supposed to guide our thinking about large-scale practices. Whether various biotechnologies should be developed or permitted, for example, is a matter to which human dignity can speak.

To apply the principle of dignity, we need to adopt the perspective of an impartial observer, or perhaps stand behind a Rawlsian veil of ignorance. All things considered, is a world where age retardation technologies are widely available one in which people are likely to be more virtuous, less virtuous, or neither? In which participation in human community is likely to be valued? Is such a world one in which the prospects for genuine human flourishing are enhanced or one in which they are jeopardized?

To put it another way, questions about the moral status of age retardation technologies are not best evaluated by considering Smith (and Jones and Brown and so on) in her (their) particular circumstances. Instead, we need to consider how widespread utilization of such technologies would affect

the character and quality of human life in general. In the words of Robert McGinn,

aggregating seemingly insignificant individual costs to intangibles over a large number of situations (in each of which concrete benefits derive from proceeding with some technology) may nevertheless reap a grim harvest for the human condition. (McGinn, 1979, 7)<sup>22</sup>

Obviously, these considerations alone do not help us reach a conclusion concerning age retardation technologies. They do, however, enable us to see how human dignity might shed useful light on such a debate. To determine the impact a practice is likely to have on the various goods involved in human dignity, we need to shift our focus from individual harms and benefits to widespread attitudes, values, and assumptions. Thinking seriously about human dignity alerts us to the fact that maximization of health and desire-satisfaction in every particular case may very well destroy our prospects for genuine happiness and human flourishing.

### Slippery Slopes

This, however, leads to the third worry about the principle of human dignity: Who's to say when a practice will, in fact, have such consequences? Even persons who are sympathetic to the notion of human dignity may be troubled by the fact that it essentially involves a slippery slope form of argumentation, and a highly speculative form at that. This is a serious concern, for the development of new medical technologies typically results in benefits that are both tangible and easily foreseen. Consider, for example, the availability of pharmacological treatments for depression (and other psychological ailments). Such treatments currently result in an increased level of happiness for many patients and significant financial dividends for those who have invested therein. We can be confident that continued research in this area will produce more effective treatments and continuing financial benefits. If we examine these same treatments through the lens of human dignity, however, we have reason to believe that they are immoral. Habitually taking drugs to improve one's own psychological states seems to compromise at least two aspects of dignity: receptivity and personal agency. If this is correct, my argument so far suggests<sup>23</sup> that we should not permit the distribution of antidepressants. But can we have the same level of confidence about these intangible harms as we can about the tangible benefits noted a moment ago? Can we *ever* be as confident about intangible harms as we are about tangible benefits? If not, it seems implausible to claim that our fears about such harms ought to be allowed to trump our interest in attaining the (nearly) certain benefits.

My reply to this worry can be illustrated by shifting our attention, for a moment, to concerns about technology in general, not just biotechnologies. Neil Postman has argued convincingly that when a technology (or family of technologies) is introduced into a culture, it brings with it more than a new set of

skills.<sup>24</sup> Technologies are almost never a matter of mere *techne*. Television, for example, has fundamentally altered the way public discourse is conducted in America. But as Postman makes clear, its chief impact has come not through its content but through its *form*; “how television stages the world becomes the model for how the world is properly to be staged” (Postman, 1985, 92). The way in which we, as a people, think about politics, religion, education, and everything else has been radically changed, and not for the better.<sup>25</sup>

Postman contrasts the “typographic mind” of the nineteenth century, which was characterized by “a sophisticated ability to think conceptually, deductively and sequentially; a high valuation of reason and order; an abhorrence of contradiction; a large capacity for detachment and objectivity; and a tolerance for delayed response” (Postman, 1985, 63) with the “show business mind” of the twentieth and twenty-first centuries, which is characterized by an obsession with the here and now; titillation and amusement are its primary concerns. From the early 1700s until the late 1800s, the United States was one of the most typographically oriented cultures in history. Things changed with the introduction of the telegraph, photography, and, even more so, television. These new technologies shifted America from a typographic mindset to a show business mindset. And the rest, as they say, is history. Elected officials, members of the clergy, and educators now succeed and fail—or rather, are now *identified* as successes or failures—based on how well they entertain the electorate, their congregants, and their students. Serious thought, rational debate, and precise argumentation have been jettisoned in favor of sound bites, slogans, and clever one-liners. The simple explanation for this is: the latter play well on TV but the former do not.

Postman’s insights about the impact of new technologies are relevant to our discussion in the following way. When we are considering the moral status of a new technology, we need to learn to ask (and answer) a new set of questions. We need more than a mere cost-benefit analysis of the tangible harms and benefits—the sort of consequences with which professional ethicists have typically concerned themselves—that it is expected to generate. Much of the skepticism about dignity as a philosophically useful concept is due to a failure to recognize this fact. In thinking about the moral status of new biotechnologies, we need to employ a framework different from the one to which bioethicists have become accustomed. The questions we need to ask are of the following sort: What attitudes and assumptions will this technology bring along with it? How will the way we think of ourselves be changed if its use becomes widespread? To what degree will our ability to live a distinctively human life be compromised?

Answering these questions is of the utmost importance. Postman describes our situation well:

Public consciousness has not yet assimilated the point that technology is ideology. This, in spite of the fact that before our very eyes technology has altered every

aspect of life in America during the past [one hundred] years. For example, it would have been excusable in 1905 for us to be unprepared for the cultural changes the automobile would bring. Who could have suspected then that the automobile would tell us how we were to conduct our social and sexual lives? Would reorient our ideas about what to do with our forests and cities? Would create new ways of expressing our personal identity and social standing?

But it is much later in the game now, and ignorance of the score is inexcusable. To be unaware that a technology comes equipped with a program for social change, to maintain that technology is neutral, to make the assumption that technology is always a friend to culture is, at this late hour, stupidity plain and simple. (Postman, 1985, 157)

It is not difficult to see how these considerations might be applied to the field of bioethics, especially if we begin by looking backward. It is evident, for example, that the widespread availability of effective birth control and various reproductive technologies have altered our cultural perspective on procreation, children, and family life over the past four decades. Whether those changes are desirable or not is a matter of considerable debate; it is not my intention to resolve that debate here. The point is simply that bioethical reflection must take note of the undeniable fact that attitudes have changed and no doubt will continue to change as new technologies are introduced into the culture. The pragmatism that runs deep in the American spirit inclines many of us to be excessively sanguine about the effects of technological innovation. Bioethicists need to be wary of this tendency in their own work.

Looking to the future, the concept of human dignity gives us a useful tool for thinking about what sort of changes we should be willing to introduce, and which we should avoid. When push comes to shove, it is true that arguments based on human dignity will involve appeals to slippery slopes. But, as I hope I have shown here, such arguments need not be wildly speculative, pessimistic, or unreasonable. Learning from the past, we can have considerable confidence about what the future will hold, should we choose to go forward with human reproductive cloning, genetic engineering, creation of chimeras, or any of myriad other biotechnologies. Our conclusions may not be absolutely certain, but they will be well grounded. I see no reason to think that they merit significantly less confidence than our conclusions about their more tangible counterparts. When disagreement about consequences does occur (which seems inevitable), we would do well to heed the counsel of Tom Beauchamp and James Childress, who note that slippery slope arguments require “a premise on the order of a precautionary principle, such as ‘better safe than sorry’” (Beauchamp & Childress, 2001, 146).

#### IV. DIGNITY AND PUBLIC POLICY

There is a serious problem lurking here, however. Discussions about the moral status of various biotechnologies, while interesting in their own right,

are of primary importance for their public policy implications. And it is not clear that the aforementioned considerations provide an acceptable foundation for legislation.

Granted that there is such a thing as human dignity, and that human dignity is worth preserving, it cannot be denied that dignity involves a very “thick” notion of good, grounded in substantive (and controversial) reflection about the nature of human flourishing. One principal advantage of more quantifiable goods—and one reason why they are so deeply entrenched in our ways of thinking about applied ethics in general and medical ethics in particular—is that they appeal to a very “thin” notion of good, a notion that is eminently compatible with a pluralistic society like our own. There is no serious disagreement about whether it is desirable to reduce suffering, promote autonomy (in some sense of the term), and seek justice. Certainly, there is much disagreement about the degree to which we are obliged to do such things, as well as about the proper methods to employ, but these three categories serve as shared moral ground.

Human dignity, understood in the way suggested by Kass and the President’s Council, does not have the same pluralistic appeal. Perhaps a majority of Americans, when asked, would agree with Kass that a life characterized by “engagement, seriousness, the love of beauty, the practice of moral virtue, the aspiration to something transcendent, [and] the love of understanding” is the best sort of life (Kass, 2002, 24). But how many of those same persons would agree with Kass that the opportunity to “live with dignity” is, in principle, worth more than a cure for Alzheimer’s?<sup>26</sup> Far fewer, I suspect, especially considering that we cannot be certain that the two are in fact mutually exclusive. What if we had to choose between either living dignified lives for 70 years or living “enhanced” lives—one’s body being maintained at its level of peak performance until (or almost until) the moment of death—for 120 years? It is hard to take seriously the suggestion that many people would choose the former.

Indeed, considering how small is the number of Americans who show any interest in pursuing human flourishing (in the sense outlined here) *now*, there is no reason to suppose that a significant number might be willing to forgo an extra 80 years of healthy living merely for the sake of a more “dignified” existence. Even if Kass and his ilk are correct in their assessment of what makes human life genuinely worthwhile, it is not obvious that a relatively small number of moral elitists can justifiably impose their conception of the good life on the rest of the population, effectively forbidding those who disagree with them from being able to pursue their own vision of a life that is truly worth living.

As a moral elitist myself—and as one who is very sympathetic to Kass’s position—this conclusion is to me an unwelcome one. The next logical step for the advocate of human dignity is to consider questions in political philosophy and the philosophy of law, in pursuit of ways in which robust moral claims might justifiably be embedded in the legal code of a democratic and

pluralistic society. This is not part of my project here; presumably the successful completion of this project would go hand in hand with a successful defense of the much maligned natural law tradition or something very much like it.<sup>27</sup> Unless and until this larger task is completed, however, the preceding considerations might lead us to worry that human dignity's triumph as a moral principle will turn out to be a rather hollow victory.

## NOTES

1. It should be noted that this article was written prior to the publication of President's Council on Bioethics (2008) and [Pinker \(2008\)](#). It may nevertheless be read as a complement to the former and a (partial) response to the latter.

2. All of these, along with other representative samples, are cited in [Schachter \(1983, 848–54\)](#).

3. Also in 2002, Kass himself published a book called *Life, Liberty, and the Defense of Dignity*.

4. This is not to say that “human dignity” is the best *name* for the concept. Since “dignity” is at least somewhat entrenched as a Kantian term associated with autonomy, it might have been wiser of Kass to choose some other name for the collection of goods he has in mind. It is, however, too late for that now. Suffice it to note that my project here involves a defense of the (Kassian) concept of dignity, not a defense of the vocabulary used to discuss it. To the question “Why should I use ‘dignity’ to mean *this* rather than *that*?” I have no answer.

5. Part of the confusion (at least on the continent) stems from the fact that the German word *menschenwürde* can be rendered in English as either “human dignity” or “sanctity of life.” On this point and related issues, see [Hailer and Ritschl \(1996\)](#). On the European debate more broadly, see [Jochemsen \(2004\)](#).

6. This point is developed in chapter 6 of [Kuhse and Singer \(1985\)](#).

7. The death of the firefighter is not a needless morbid detail in either case. The point is that neither firefighter will receive any future benefit or burden because of his actions.

8. This brief illustration hardly counts as a conclusive argument, of course. Julia Driver's *Uneasy Virtue* (New York: Cambridge, 2001) is an example of a sophisticated recent attempt to defend the view that moral virtues are extrinsically valuable; see also *Utilitas* Vol. 16, No. 1 (March 2004): 1–41 for an exchange on this issue between Driver, Onora O'Neill, John Skorupski, and Michael Slote.

9. Such virtues are especially relevant to our concerns here in that bioethics and biotechnologies are intimately tied to matters of human pain and suffering. Regarding their worth, we do well to consider the following reflection from Richard John Neuhaus: “The blogosphere is filled with letters and reports from soldiers in Iraq. Most of them speak about their satisfaction in doing something good and difficult, even noble. It doesn't prove anything one way or another about the justice or wisdom of the war, but I question the humanity of anyone who is not more than a little moved by their testimony. Here is Sam Ross, a paratrooper wounded in Baghdad: ‘I lost my left leg, just below the knee. Lost my eyesight . . . . I have shrapnel in pretty much every part of my body. Got my finger blown off . . . . I had a hole blown through my right leg . . . . It hurts a lot, that's about it. You know, not really anything major. Just little things . . . . It was the best experience of my life’. William James wrote about the search for a moral equivalent of war, and Jimmy Carter, by an impressive stretch of moral imagination, suggested we find that equivalent in cutting back on gas consumption. The phrase ‘band of brothers’ was cheapened in the last presidential campaign, and King Henry perhaps exaggerated when he declared,

And gentlemen in England now a-bed  
Shall think themselves accurs'd they were not here,  
And hold their manhoods cheap whiles any speaks  
That fought with us upon Saint Crispin's day.

And yet, even while they may prefer to lie a-bed, there are those who cannot help but wonder, however self-indulgently, at what the Sam Rosses have come to know” ([Neuhaus, 2005, 70](#)). Like Neuhaus, and in spite of the general lack of suffering in my own life, I share the conviction that suffering brings with it enormous opportunities for good. I suspect that Sam Ross has intimate knowledge of goods most of us can only guess at.

10. As far as we know, at any rate. I know of no compelling reason to think otherwise, but even if other animals do have aesthetic experiences, this does not pose a problem for the present account of human dignity.

11. It is possible that aesthetic values should be subsumed under this category, but that strikes me as unlikely. Glenn Tinder suggests such a view in [Tinder \(2003\)](#). See especially pages 33–6 and 39–41; his argument seems to be as follows: (1) appreciation of beauty requires a sense of awe, (2) a sense of awe requires awareness of one's own finitude, and (3) therefore, appreciation of beauty requires awareness of one's own finitude.

12. Twins, triplets, and so forth, are the obvious exception here. But even they are unique in the sense that their genetic codes are "original," they are not planned by anyone, nor have they ever "been lived" before. This latter point is important to Kass's discussion of human reproductive cloning, but it is not something I will be concerned with here.

13. Similar themes are developed in chapter 2 of [Adams \(1999\)](#) and chapter 15 of [Nussbaum \(1990\)](#).

14. Tinder is the most explicit about this, although Kass speaks of it as well (usually under the rubric of "respect for the given").

15. The reference to human nature here need not be construed teleologically.

16. This point, we should note, marks the fundamental divide between defenders of human dignity, on one side, and "transhumanists" and advocates of a "posthuman future," on the other. Neither side denies that the natural human condition is one that can—and should—be improved, but they are at odds concerning what exactly the problem is and how best to solve it. Kass stands in a tradition that holds that "the cardinal problem [is] how to conform the soul to reality, and the solution [is] knowledge, self-discipline, and virtue." The transhumanists believe that "the problem is how to subdue reality to the wishes of men: the solution is a technique" ([Lewis, 1996, 84–5](#)). It should be clear how receptivity fits in here. To adopt a stance of receptivity is to agree with Kass *et alia* that the "soul should be conformed to reality," whereas those who deny this posture desire to conform reality "to the wishes of men." I hasten to note that one need not accept substance dualism to share Kass's sentiment. It is also worth noting, along these lines, that the notion of receptivity is especially at home in a theistic worldview, wherein each thing (or kind of thing) has its proper place. C. S. Lewis, in personal correspondence with a young interlocutor, put it this way: ". . . Your definition of gaiety is [very] much to the point. Perhaps one can carry it further. A creature can never be a perfect *being*, but it may be a perfect *creature*—e.g. a good angel or a good apple-tree. Gaiety at its highest may be an (intellectual) creature's delighted recognition that its imperfection as a being may constitute part of its perfection as an element in the whole hierarchical order of creation. I mean, while it is a pity there [should] be bad men or bad dogs, part of the excellence of a good man is that he is *not* an angel, and of a good dog that it is *not* a man" ([Lewis, 1985, 100](#)).

17. See chapter 3 of [President's Council on Bioethics \(2003\)](#).

18. Compare, for example, [Childress \(2003\)](#).

19. I should make clear that I am not attempting to defend this argument here. It is included merely for illustrative purposes.

20. Thanks to Don Hubin for pointing this out to me.

21. And they very well might; compare chapter 4 of [President's Council on Bioethics \(2003\)](#).

22. The President's Council on Bioethics makes a very similar point, although somewhat more poetically: "the aggregated social effects of such choices, widely made, could lead to a Tragedy of the Commons, where benefits gained by individuals are outweighed by the harms that return to them from the social costs of allowing everyone to share the goodies. And, as Huxley strongly suggests in *Brave New World*, when biotechnical powers are readily available to satisfy short-term desires or to produce easy contentment, the character of human striving changes profoundly and the desire for human excellence fades" (2003, 285).

23. Or at least "*may suggest . . .*" Actually, applying the principle of dignity to the issue of pharmacological treatments for depression would require far more attention than I can give it here. I do not claim to know how that particular issue would, in fact, turn out.

24. See [Postman \(1985\)](#), especially chapters 1, 2, 5, 6, and 11.

25. Justifying this claim requires more space than I have here. I suspect that the reader will be inclined to agree with this assessment, but for a much more careful and detailed treatment of this topic, see [Postman \(1985\)](#), especially chapters 3 and 4.

26. Kass nowhere explicitly says that it is (so far as I am aware), but his view appears to entail it.

27. Such defenses have been offered in recent years by a number of thinkers, although it would be something of an understatement to say that these thinkers have not quite penetrated the mainstream of political philosophy. See especially Budziszewski (2004), George (2001), and Forte (1998).

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