

Biomedical Moral Enhancement, Individual Identity, and Valuable Mental Dispositions

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One objection to the idea of morally enhancing humans using biomedical means concerns its impact on the identity of the enhanced person (e.g. Specker et al., 2014; Focquaert and Schermer, 2015; Lavazza, 2017). A common response to that objection is that we only have reasons against modifying some aspects of our identity (e.g. core psychological characteristics) when these aspects have positive value (e.g. DeGrazia, 2005; Douglas, 2008), and that biomedical moral enhancement (BME) is unlikely to target features that meet that condition. While being an initial proponent of that response, Douglas (2013) has, following a critique by Harris (2011) in a related but different context (i.e. concerns about freedom), acknowledged that some core dispositions that might lead to immoral behavior when present in excess (or expressed in the wrong circumstances) could also, in more moderate form (or the right circumstances), actually be conducive to morality.

I argue that this line of argument still insufficiently distinguishes between general mental dispositions and their actual manifestations, e.g. through certain behavioral patterns. It thus seems conceivable that a disposition to experience certain emotions (e.g. anger) of a particular strength could yield both good and bad manifestations depending on how exactly it is channeled, even keeping circumstances similar. Furthermore, such manifestations could have moral, but also non-moral value. I propose to speak of “valuable dispositions” to refer to dispositions that can have at least some good manifestations, and suggest that the risk of eliminating such dispositions (and the associated potential value), even for a good purpose, might underlie a more promising construal of the identity concern. Nonetheless, I conclude that it still does not show BME to be always impermissible – although it does highlight the relevance of valuable dispositions to determining what form of BME might be preferable in any given case, and assessing which tradeoffs might be involved.

References

1. DEGRAZIA, D. 2005. *Human Identity and Bioethics*, Cambridge, Cambridge University Press.
2. DOUGLAS, T. 2008. Moral Enhancement. *Journal of Applied Philosophy*, 25, 228-245.
3. DOUGLAS, T. 2013. Moral Enhancement via Direct Emotion Modulation: a Reply to John Harris. *Bioethics*, 27, 160-8.
4. FOCQUAERT, F. & SCHERMER, M. 2015. Moral Enhancement: Do Means Matter Morally? *Neuroethics*, 8, 139-51.
5. HARRIS, J. 2011. Moral Enhancement and Freedom. *Bioethics*, 25, 102-11.
6. LAVAZZA, A. 2017. Moral Bioenhancement Through Memory-editing: A Risk for Identity and Authenticity? *Topoi*.
7. SPECKER, J., FOCQUAERT, F., RAUS, K., STERCKX, S. & SCHERMER, M. 2014. The Ethical Desirability of Moral Bioenhancement: a Review of Reasons. *BMC Med Ethics*, 15, 67.