Good, better, best? ETHICS OF HUMAN ENHANCEMENT

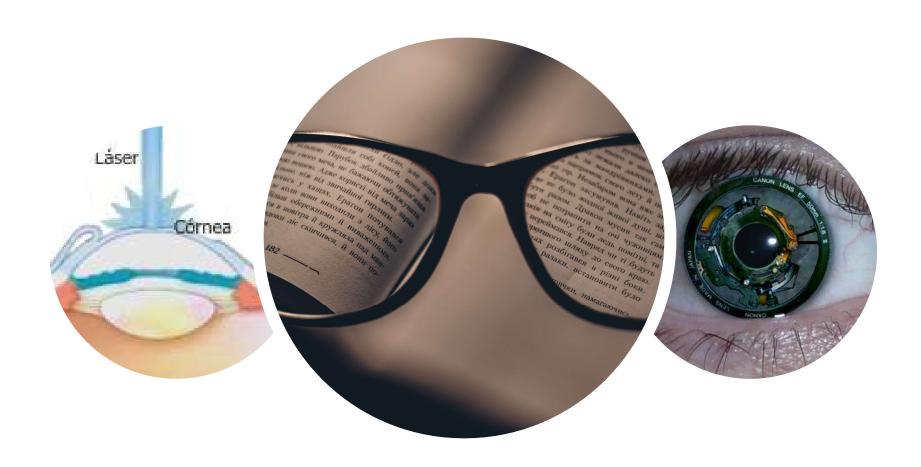
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OUTLINE

- What is human enhancement?
- What are enhancement drugs?
- Better living:
 - What does it mean to be human?
 - What are the scope and boundaries of health care?
- Unfair advantage? Fairness, cheating and access
- Regulation and policymaking a harm reduction approach?
- Conclusion

CONSIDER THIS....















WHAT IS HUMAN ENHANCEMENT?

WHAT IS HUMAN ENHANCEMENT?

Any activity by which we improve our bodies, minds, or abilities—things we do to enhance our well-being (Lin, 2008)

Boosting our capabilities beyond the species-typical level or statistically normal range of functioning for an individual (Daniels, 2000).

Developing humans towards ideal humans (Roduit, 2015)

HUMAN ENHANCEMENT

"biomedical interventions to improve human capacities, performances, dispositions, and wellbeing beyond the traditional scope of therapeutic medicine"

(Giubilini, 2015)

"biomedical interventions that are used to improve human form or functioning beyond what is necessary to restore or sustain health"

(Juengst, 2025)

TYPES OF HUMAN ENHANCEMENT

- Physical enhancements (appearance or function)
 - Cosmetic & dental surgery
 - Prosthetics & implants
 - Powered exoskeletons
 - Wearable tech
- Cognitive enhancements
 - pharmacological
 - neurotechnology
 - digital interfaces /smart tech
- Genetic and reproductive engineering

WHAT ARE ENHANCEMENT DRUGS?

PHARMACOLOGICAL ENHANCEMENT

Drugs used to enhance:

- Muscle structure and function
- Weight loss
- Appearance of skin and hair
- Sexual function and behaviour
- Cognitive function
- Mood and social behaviours

DRUGS USED FOR ENHANCEMENT

- No enhancement drugs per se
- Can have potent effects
- Some efficacious
- May be licensed or banned or untested
- Do not think of themselves as drug users

BETTER LIVING: WHAT DOES IT MEAN TO BE HUMAN?

BETTER LIVING?

- Human dignity and discontent / happiness
- What does a "Good life" look like?
- Over-medicalisation of normal life events like ageing

BETTER LIVING? THE SCOPE & BOUNDARIES OF HEALTHCARE

SCOPE & BOUNDARIES OF HEALTHCARE

Distinctions made for moral evaluation:

- Natural vs artificial interventions Eg. boosting cognitive ability through education, diet and exercise vs. nootropic drugs
- Internal vs external Eg. tools integrated into the body vs. using a tool externally
- Therapy vs enhancement Eg. Vaccination treatment for preventing disease or enhancement of immune system?

These distinctions not always morally significant or useful.

What is normal? How to account for differences/range of normality?

Glasses vs Lasik vs Lens implant?

(Allhoff, 2010)

SCOPE & BOUNDARIES OF HEALTHCARE

Defining the proper limits of healthcare has implications for HCP obligations, funding, research priorities.

Attempts to distinguish between therapy and enhancement through different approaches:

- Professional domain
- Normal function
- Disease-based

All problematic approaches!

(Juengst, 2025)

UNFAIR ADVANTAGE? FAIRNESS, CHEATING & ACCESS

JUSTICE IN ENHANCEMENT

- Fairness, equity, access
- "Enhancement divide"
- Is there a right to be enhanced?
- Could there be an obligation for enhancement?
- Will this disrupt society?
- Disability politics

REGULATION & POLICY MAKING A HARM REDUCTION APPROACH?

REGULATION & POLICYMAKING

Policy implications:

- When to restrict?
- What will be the limits of enhancement?
- Can children be enhanced?

Public health challenge and harm reduction:

- Dealing with the demand (motivations, advertising)
- Identifying the harms
- "How to harness the benefits while minimising harms?"

(Evans-Brown, 2012)

IN CONCLUSION

- The enhancement debate is not new...but as science advances, we need to think about practical solutions to emerging dilemmas.
- We are faced with the challenge of predicting future possibilities whilst figuring out responses to new realities.
- A harm reduction approach is preferable to banning enhancement drugs. Priorities include a transdisciplinary approach, stakeholder involvement, the development of frameworks and research dissemination to the public.

QUESTIONS?

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