An Account of Human Dignity Able to Entail Dignity for the Severely Mentally Disabled,

Inspired by sub-Saharan African Thought.

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DEDICATION

THIS WORK IS DEDICATED TO MY LATE PARENTS BECAUSE IN MY AFRICAN TRADITIONAL BELIEFS, THEY ARE THE LIVING DEAD. HENCE, THEY ARE BOTH HAPPY TO SEE THEIR ONLY SON GO THIS FAR.
Abstract

This research report evaluates different conceptions of human dignity with a view to articulate a more plausible and attractive account that allows for the recognition of the dignity of severely mentally disabled people. Many of the existing conceptions of human dignity inevitably exclude the severely mentally disabled. Attention is given to the dominant Kantian conception of dignity as well as to sub-Saharan African notions. In this research, I articulate and critically defend the most attractive and plausible aspects of sub-Saharan African thought that can contribute to the development of an attractive and plausible account of human dignity that will recognize the dignity of severely mentally disabled people. In order to fulfill this aim, I address the following question: What would a plausible and attractive account of human dignity that is able to recognize the dignity of severely mentally disabled people look like? This research report argues that the theoretical resources for a more inclusive and attractive conception of human dignity can be found in sub-Saharan thought, and that can also contribute to the growing realization that African philosophy has a valuable contribution to make to the enrichment of our ethical (and particularly, bioethical) reasoning and discourse. This study is purely normative. Data was not collected, and there was no involvement of research participants.
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Chapter 1: General Introduction

1.1. Introduction

The notion of human dignity has come to play a key role in ethics discourse. Many theorists ground our moral obligations to other persons in the conception that persons have an intrinsic dignity that is non-instrumental and inalienable, and is something they have simply by virtue of being persons (Sulmasy, 2008: 473). This view stands in opposition to the utilitarian claim that it is the state of human beings (their happiness, pleasure or well-being) that is of moral value and must be promoted. Dignity-based accounts of moral value are attractive precisely because they are able to entail an obligation to accord some level of respect to the life, interests and preferences of those who are said to possess dignity, irrespective of their social position, their talents, their contribution to society, or even their virtue – something utilitarianism cannot entail. This conception of dignity is the basis of our modern human rights culture, and has shown itself to be of great value in grounding and promoting rights and human well-being. Therefore, I argue that the notion of human dignity is a very valuable construct worthy of further theoretical support.

By ‘severely mentally disabled’ I mean those who quite clearly are not capable of rationality and autonomy, and for whom this is a permanent state. This would include individuals who are born disabled in this way, as well as those who become disabled as a result of injury, illness, dementia or other causes. Examples of such individuals would be anencephalic infants, severely mentally ill individuals (such as those with severe schizophrenia), those who have suffered significant brain damage, etc. My enquiry is limited to the status of the severely mentally disabled and is not focusing in any depth on related issues such as the status of neonates and very young infants or that of those who might be temporarily incapable
of reason and autonomy. Part of my research provide a more robust and clear definition of severe mental disability.

I evaluate different conceptions of human dignity with a view of articulating a more plausible and attractive account that allows for the recognition of the dignity of severely mentally disabled people. Many of the existing conceptions of human dignity inevitably exclude the severely mentally disabled. For many of us this is counterintuitive, as our moral inclinations tend to want to regard severely mentally disabled human beings as having at least some inherent dignity worthy of respect. Grounding an obligation to respect the dignity of the severely mentally disabled on a shared intuition alone is clearly not sufficient. Thus, for my project to get off the ground at all, I rationally defend two normative claims: (1) that the notion of human dignity is valuable and (2) that a sound, plausible and attractive conception of human dignity needs to provide grounds for including the severely mentally disabled as having dignity.

In my evaluation, I critically consider the dominant Kantian view as well as African views in developing my account of human dignity (for representative statements see Kant, 1996: 186; Menkiti, 1984: 171). The first view tends to focus on rationality and autonomy, whilst the latter relates dignity to participation in the community. I articulate a more inclusive view that will cover the human dignity of the severely mentally disabled. My reasons for considering the Kantian conception as well as African conceptions of dignity are firstly, that the Kantian notion is established as the dominant position, despite its inability to entail the dignity of the severely mentally disabled. It must be considered precisely because of its dominance, and also because, although it is inadequate, its influence cannot be ignored. Secondly, I give attention to some African conceptions of dignity, because, although these sometimes also fail to account for the dignity of the severely mentally disabled, there are some African theorists whose conceptions of
dignity appear to be able to entail that this group of persons should be accorded some degree of dignity. My starting hypothesis, then, is to formulate an attractive and plausible account of dignity, capable of including the severely mentally disabled, by drawing on the best aspects of Kantian and African notions.

1.2 Statement of the Research Problem

Very often the Western literature on human dignity (particularly in the modern period) has, following Kant, emphasized rationality and the ability to act autonomously. This emphasis on rationality and autonomy unfortunately excludes the severely mentally disabled, because they are clearly not capable of rationality or autonomy. On the other hand, in the sub-Saharan context it is argued that human dignity is the sort of thing, which has to be attained, and it is attained in direct proportion to the degree to which one participates in communal life. This conception could then equally be understood as excluding the severely mentally disabled, who are unable to actively participate in community.

The quandary regarding both of these perspectives is that they clearly exclude certain groups of people. For example, Kant’s and Menkiti’s views on human worth leave severely mentally disabled people below the line of human worth since, due to their debilitating mental retardation, they cannot exercise their autonomy and they cannot participate in communal rites, respectively (Kant, 1996: 186; Menkiti, 1984: 171). Thus, it is clear that on these lines of defending the dignity of human beings, severely mentally disabled people are deemed to be below the level of human worth.

That said, there are some African theorists whose conceptions of dignity – whilst still grounded in participating in the community, provide potentially better theoretical resources for ascribing
dignity to the severely mentally disabled. These theorists include Thaddeus Metz and Godfrey Tangwa. On Metz’s account (2012b: 234-235) the severely mentally disabled have some moral status deserving respect by virtue of the fact that they are capable of being the objects of caring and solidarity. For Tangwa (2000: 42), the dignity or personhood of moral agents is attained at least partially by virtue of the fact that they treat the most vulnerable with some degree of respect for their inherent dignity.

In drawing on the ideas of Metz and Tangwa (and other African theorists), I articulate and defend an account of human dignity that is more plausible and attractive than those (Kantian and African) accounts that seem to lack the resources to include the severely mentally disabled as having a degree of dignity.

1.3 Thesis Statement

In this report, I defend the thesis that the aspect of communality suggested by the African view to arrive at a notion of human dignity plausibly includes the worth of severely mentally disabled people. I also argue that this notion provides resources to develop a more plausible view of dignity that is not hierarchical and the one that is not based on attributes like rationality and autonomy. Thus, we see that it closes the gap of lack of full recognition found on Kantian views.

1.4 Rationale for the Study

The novelty of this study lies in the inclusion of African ethical notions to provide a wider and more inclusive account of the notion of human dignity. By critically considering the established Kantian view as well as African views in developing an attractive and plausible account of
human dignity, a more inclusive view that include the worth of severely mentally disabled people is articulated.

The value of the study is further enhanced by its reliance on sub-Saharan African moral notions. African thought and philosophy have generally not been given much attention in bioethics, and this study goes some way towards addressing this lack of attention (Mbugua, 2009). That it turns out that the theoretical resources for a more inclusive and attractive conception of human dignity is found in sub-Saharan thought also contributes to the growing realization that African philosophy has a valuable contribution to make in the enrichment of our ethical (and particularly, bioethical) reasoning and discourse. The final outcome of this study is indeed successful, attractive and plausible account of human dignity because it embraces the severely mentally disabled; and makes a very valuable new contribution to the field of bioethics.

1.5 Aim and Objectives

The aim of my research is: To articulate and defend a plausible account of human dignity, inspired by sub-Saharan thought, that will recognize the dignity of severely mentally disabled people.

1.6 Objectives

My main objective is:

1. To articulate and defend an attractive and plausible account of human dignity, inspired by African thought, that will recognize the dignity of severely mentally disabled people.

In order to achieve this objective the following sub-objectives will need to be achieved:

2. To normatively defend the claim that the notion of human dignity is valuable, ethically.
3. To normatively defend the claim that a plausible and attractive account of human dignity should entail that the severely mentally disabled are accorded some dignity.

4. To critically evaluate the dominant Kantian conception of dignity, especially with respect to its ability to ground an account of human dignity that entails that the severely mentally disabled are accorded some dignity.

5. To critically evaluate sub-Saharan conceptions of dignity, especially with respect to their ability to ground an account of human dignity that entails that the severely mentally disabled are accorded some dignity.

6. To identify, articulate and critically defend the most attractive and plausible aspects of sub-Saharan thought that can contribute to the development of an attractive and plausible account of human dignity that will recognize the dignity of severely mentally disabled people.

1.7 Methodology

This study is purely normative. Data was not collected, and there was no involvement of research participants. I examine the various texts on the issue of human dignity from both Western and sub-Saharan perspectives. I also critically evaluate and adjudicate these two notions of human dignity, and articulate a more inclusive view that includes the dignity of severely mentally disabled people.

I employ the typical research methods and standards applicable to philosophical research. This primarily involves the interpretation and critical analysis of salient texts.
1.8 Clarification of Terms

This section mainly focuses on the clarification of the used terms related to people who are severely mentally disabled. Firstly, under this section I discuss the intelligence Quotient (IQ) of all the different groups of mental disability. Secondly, I discuss the important concepts that reflect the nature of the severely mentally disabled people. Many theorists on human dignity emphasis more on the mental capacities such as autonomy, rationality, and the capacity for communal participation. All these mental capacities that are viewed to be the credo stones for human dignity discriminate other human beings who are severely mentally disabled because due to their debilitating mental disability, they are not capable to exercise these capacities. In this research report, I critically evaluate the account of human dignity able to include/recognize the dignity of the severely mentally disabled. Below is the table that depicts the IQs score of mental retardations with the aim of showing that those who are severely mentally disabled are completely incapable of proper mental activities.

1.8.1 Intelligence Quotient of Severely Mentally Disabled People

Table 1.0 Categories of Severity for Mental Retardation (Kneisl, Wilson and Trigoboff, 2004: 280).

<table>
<thead>
<tr>
<th>IQ Level</th>
<th>Disability description</th>
</tr>
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<tbody>
<tr>
<td>1 – 24</td>
<td>Profound mental disability</td>
</tr>
<tr>
<td>25 - 39</td>
<td>Severe mental disability</td>
</tr>
<tr>
<td>40 - 54</td>
<td>Moderate mental disability</td>
</tr>
<tr>
<td>55 – 69</td>
<td>Mild mental disability</td>
</tr>
</tbody>
</table>
Table 1.0 depicts the intelligent quotient levels of people with mental disabilities. The case of severely mentally disabled people raises many controversial issues, because some moral philosophers argue that “severely mentally disabled people lack human worth” (for representative statements, see Plomer, 2005: 70; Kant, 1996: xxv). This argument is very exclusive because it does not recognize the human worth of those who lack certain attributes\(^1\). These attributes are considered to be pivotal to an extent that without them an individual will lack the status of human worth. “Mental retardation means a disorder characterized by sub-average general intellectual function with deficits or impairments in the ability to learn, taking care of him/herself, and social skills” (Cantor, 2005: 3).

As the Table 1.0 has shown the severely mentally disabled people’s intelligent quotient (IQ) scores between 25-39. Severe mental retardation may be caused by many factors such as; “lack of oxygen during tetanus neonatorum; precipitate labour with rapid head moulding and haemorrhage; meningitis or encephalitis in childhood; and severe accidental injury to brain” (Byrne & Bennett, 1986: 228). “Vascular dementia is a decline in thinking skills caused by conditions that block or reduce blood flow to the brain, depriving brain cells of vital oxygen and nutrients” (Kneisl, Wilson and Trigoboff, 2004: 242). Due to the mental abnormality that is caused by the above factors, it is clear then that severely mentally disabled people need our care, love, and support; because their mental incapacitation renders them to be unable to recognize their interests and needs.

This group of people cannot develop into moral agents because they lack proper self-reflection upon their actions. They cannot even understand the moral laws as well as its implications. It is

\(^1\) Severely mentally disabled people lack the capacity for autonomy, rationality, and communal participation. Since these capacities are considered to give human beings dignity, it means that those who lack them will be viewed to lack dignity as well.
even worse for them to participate in the communal practices or to take part in traditional rituals because they lack mental capacities that can enable them to take part in such traditional practices. Thus, the emphasis on the attributes (autonomy & rationality) as the source of dignity of human beings may cause the negative attitudes of the public towards people with severe mental disability because they will be viewed as objects that are sub-human. For me, this kind of attitude will violate the notion of respect for humanity which ought to be accorded to all human beings without any discrimination.

1.8.2 The Concept of Mental Competence

The notion of human dignity that grounded in attributes such as autonomy and rationality or self-consciousness is very exclusive because people who are severely mentally disabled are incapable of rationalizing things. Glannon (2005: 24) defines a competent patient as “one who understands the nature of his or her condition and the consequences of accepting or refusing an intervention for it. Ideally, informed consent serves as an ethical basis for patient-doctor relationship characterized by mutual respect and shared decision making.” If a mentally competent patient possesses these abilities, it means that a mentally incompetent patient will lack these abilities. Thus, since severely mentally disabled people do not possess these abilities, this implies that on the Kantian notion of human dignity the severely mentally disabled will not be treated with respect which means that they will be treated as mere objects in medical field because they lack intrinsic human dignity.

The notion of dignity that is based on mental abilities is grounded on accidental attributes that may sometimes be lost while the individual himself/herself still exists. This kind of dignity is not plausible and attractive at all because it disregards the human worth of other human beings.
because their mental competence does not allow them to rationalize things in the world. “Mental competence is always competence for some task or competence to do something. Hence, competence is to be understood as decision-making capacity, but the notion of decision-making capacity is itself incomplete until the nature of the choice as well as the conditions under which it is to be made are specified” (Buchanan & Brock, 1990: 18).

If I may relate the Kantian notion of human dignity to the above point of Buchanan & Brock, we will see that people who are mentally incompetent fall below the line of human worth because they lack mental capacity for decision-making. The application of this Kantian concept of human dignity will be very detrimental to the welfare of the severely mentally disabled people because other people may use them as the research objects during clinical trials because they lack the required attributes for the possession of human dignity. Fortunately, the South African Mental Health Care Act, 2002 (Act 17 of 2002) “provides that health care professionals ought to provide care and treatment to all mentally incompetent patients” (McQuoid-Mason & Dada, 2011: 99). One can say this Act at least accords the right to health care to all human beings equally, meaning that it respects all human beings.

It is difficult to see dignity on those who may happen to lack the mental attributes like rationality and autonomy as the bearers of dignity because Kant viewed these attributes as the source of dignity. Severely mentally disabled people are incapacitated to express their medical preferences, to exercise their autonomy, and informed consent. Autonomy and rational decision making in the kingdom of ends of Kant are considered as sacrosanct source of dignity for human beings. Thus, this kind of human dignity when critically articulated may give a green light for abusive approaches in doctor-patient relationship because health care professionals will not be provided with reasons to refrain from disrespecting severely mentally disabled patients who may lack the
mentioned attributes because they do not possess any dignity according to Kant. Health care professionals who may follow this Kantian notion of human dignity will also not see the reason to respect the severely mentally disabled patients because they are not bearers of human dignity.

The attributed notion of human dignity raises very complex ethical issues in bioethics because it subjects those who lack the required mental abilities to mere objects. In doctor-patient relationship, mental competence is regarded as a pivotal element that allows patients to illustrate their medical preferences autonomously without any paternalistic manners. It is through this approach that respect for persons can be shown in doctor-patient relation. “Reasoning and deliberation require capacities to draw inference about the consequences of making a certain choice and to compare alternative outcomes based on how they further one’s good or promote one’s ends” (Buchanan & Brock, 1990: 25). In contrast, if the Kantian notion of dignity is embedded in human beings by virtue of being autonomous and rational beings, it is obvious that the severely mentally disabled people lack human dignity because they are incapacitated to reasoning and deliberation with the purpose to further one’s good or promote one’s ends. This exclusive concept of dignity may lead to unjustifiable medical decision making on behalf of the severely mentally incapacitated people to be used as objects in medical trials because they lack human dignity which may be regarded as the force of attraction to respect human beings.
Chapter 2: The Notion of Human Dignity and Its Value to Ethical Discourse

2.1 Introduction

In this chapter, I generally discuss the notion of human dignity and its value to ethical discourse. Many have found this notion to be valuable in bioethics while others have categorically dismissed its value. Among those who dismiss the value of dignity in bioethics, I discuss Ruth Macklin who finds dignity to be a useless concept in bioethics. I then counter attack such arguments and argue for its relevance and importance in bioethics. My focus is specifically on the notion of human dignity that is inherently embedded within human beings (intrinsic dignity), and then dismiss any conception of dignity that is acquired/earned.

2.2 The Value of Dignity to Ethical Discourse

The concept of dignity has widely been used in ethics, law, and religion. The “word dignity (dignitas) represents the honour and respectful treatment attributed to someone” (Michael, 2014: 13). Dignity can be defined as inherent or non-inherent. For example, Michael argues that:

Inherent dignity refers to a quality of value or worth belonging equally to every human being; it is permanent, unconditional, indivisible and inviolable. Inherent dignity is related to, and often used interchangeably with, the similar concept of ‘intrinsic value’ i.e. inviolable worth arising from within each person. Non-inherent dignity is an acquired and variable condition; it is contingent upon a person’s circumstances and behavior (2014: 13).

The above definition clarifies that the inherent form of dignity is possessed by all human beings while the other concept of dignity is contingently found in human beings depending on their behavior. The latter concept of dignity can cease to be. However, criticism of a dignity-based morality in bioethics has been led by Macklin’s core claim is that dignity is a useless concept in
medical ethics. In her view, “dignity seems to have no meaning beyond what is implied by medical ethics principles of respect for persons, respect for autonomy” (Macklin, 2003: 1419-1420). Schuklenk’s and Pacholczyk’s considered view seems to be along the lines of Macklin. According to Schuklenk’s and Pacholczyk, the concept of human dignity is “essentially a myth, at best a false rationalization of other more specific and genuine values” (Schuklenk & Pacholczyk 2009). Pinker (2009) argues for the rejection of the concept of dignity in bioethics because of its religious connotations, especially but not exclusively, in Roman Catholic writings. Generally, the notion of dignity is too important to dismiss as useless but we have to judge which positions are more substantial and plausible. If this concept of dignity could be suitably clarified, and precision of its meaning could be achieved such that it is shorn of vagueness, then this concept would no longer be used as mere slogan and thus its usefulness will be prevailed. The claim of Pinker is not valid because philosophers have sought ways of defending human dignity without reference to religion.

There are so many concepts that are used in bioethics that do not have precise clarifications. For instance, autonomy refers to many different clarifications, and it is being used without any problem. The same concept of autonomy has been criticized by Onora O’Neill who argues that “autonomy is just a mask of saying yes or no/go ing without a treatment” (O’Neill, 2002: 84). Thus, it is not only the concept of dignity that has gone through much criticism for lack of clarification. It is also not true that the concept of dignity lacks the explanation of its source. The Judeo-Christians have clarified the source of dignity to be God because human beings are made in his image. On the same issue of dignity, philosophers have provided many different sources, such as; autonomy and rationality to be the source of human dignity, while others see the
capacity to communing with others as the source of dignity. Consequently, in contrast to Macklin’s claim that dignity lack proper meaning, Michael argues that:

Dignity cannot be reduced to a single definition; rather the concept’s core meaning is established by a network of ideas related to worth and value, providing a ‘sense of dignity’. This ‘sense of dignity’ represents a universal understanding that all people have value which places obligations on each of us to treat others well. Fundamentally, dignity matters because it forms the foundation of civilized society; without it serious abuse of people is more likely to occur and civilized society would not flourish so freely (2014: 33).

The concept of dignity in ethical discourse plays a fundamental role because without it people can be abused particularly in the field of bioethics which deals with medical research on human subjects. Besides the criticism of principlism approach on its limitations, the four principles of medical ethics formulated by Beauchamp and Childress (2001) were also meant to protect the wellbeing and dignity of human beings against any form of injustice. The value of dignity within these principles has spread globally in the field of bioethics.

In an African-inspired principlism, Behrens (2013: 34) argues that there is a dire need for “African Bioethicists to develop their own version of principlism that incorporates the salient features of African ethics.” This view emanates from the fact that the principle of autonomy is particularly is too individualistic hence; it does not reflect the so-called common morality it represents only the Western view. Thus, the proposed African bioethics principles according to Behrens (2013: 34) “are respect for persons, beneficence, non-maleficence, and harmony”. This African-inspired principlism is also meant to promote and protect the inherent human dignity of all human beings without attaching contingent attributes to them like being rational or autonomous beings.
I think Behrens’ proposed principle of harmony is very fundamental because it includes all human beings especially the severely mentally disabled who have always been left below the line of human worth due to lack of autonomy which was perceived as the credo stone for human dignity by Kant. The inclusive principle of Behrens can be seen clearly where he argues that “harmony could reflect a truly African perspective on ethics that acknowledges the importance of relationality and taking cognizance of the individual’s being embedded in community and family”. In African worldview, all individuals are not considered as loners but as the members of the community who possess dignity. Thus, the severely mentally disabled people are also members of the community who also possess dignity.

Some scholars have argued for the notion of human dignity in relation to human rights. This application can be seen in doctor-patient relationship where patients have a right to informed consent as a way of expressing their medical preferences after they have been given frank information regarding their sufferings. Gone are the days where the doctor was acting as a master mind making decisions on behalf of the patients without their consent, or the situation whereby human beings were used in the clinical trials without their consent. Hence, “respect for individual human dignity entails recognition that all persons are able to make individual choices” (Currie & Waal, 2005: 273).

The value of dignity in ethical discourse can also be seen where it is used “as a placeholder in international human rights law, where it is used as a linguistic symbol representing different worldviews regarding the way people ought to treat and consider each other. As such the language of dignity is used to enable dialogue within and between different cultures” (Michael, 2014: 29). For Currie & Waal (2005: 272), “human dignity is the source of a person’s innate
rights to freedom and to physical integrity, from which a number of other rights flow. The value accordingly also provides the basis for the right to equality inasmuch as every person possesses human dignity in equal measure everyone must be treated as equally worthy of respect”.

Immanuel Kant is perhaps the most famous philosopher who has engaged in this project, seeking to defend a notion of human dignity on the basis of reason alone. His two rules of categorical imperative were meant to protect and uplift the human worth. For Kant, we should “act so that you treat humanity both in your own person and in that of another, always as an end and never merely as a means” (Rachels, 2005: 131). Moreover, “in deciding for ourselves, we develop our potential as autonomous beings that gain respect from others and do not feel thwarted” (Beauchamp & Childress, 2001: 176).

Aristotle rarely talks of dignity and he does not recognize equal dignity. For instance, Aristotle (1253b14) argues that magnanimous man is regarded as worthy of honor, since he occupies a superior position, and whatever is superior in goodness is held in greater honor. He also argues that, “the slave is an animate instrument, intended (like all the instruments of the household) for action, and not for production (Pol 1253b14). In this case we can see that worth in Aristotelian approach is hierarchical and not equal because he sees the statesman as being more honored than other people. In the ethical discourse, the notion of dignity according to Aristotle raises complex issues because it accords the status of human dignity only to those who occupy high social positions, while at the same time disadvantages other human beings. Through the lens of ethics, all human beings have equal dignity. That is, to classify other human beings as slaves is ethically unacceptable because it violates and denies them dignity. The Aristotelian notion of human
dignity relies on contingent social construction of the position that one occupies in the society he did not see dignity as inalienable.

In this chapter, I have discussed the arguments that illustrate the relevance and value of the concept of dignity in bioethics and in the ethical discourse. In relation to this discussion, it is also very pertinent to identify and critically argue for the notion of human dignity that is very inclusive and recognizes the dignity of all human beings equally without seeing other groups of human beings to be below the borderline of human dignity. Hence, the next chapter discusses and answers the question which says; why a sound and attractive conception of human dignity needs to include the severely mentally disabled.
Chapter 3: Why a Sound and Attractive Conception of Human Dignity Needs to Include the Severely Mentally Disabled.

3.1 Introduction

In this chapter I critically discuss why a sound and attractive conception of human dignity needs to include the severely mentally disabled. Many of the existing conceptions of human dignity inevitably exclude the severely mentally disabled. Then there is a dire need for a sound and attractive conception of human dignity that will include the severely mentally disabled because they are also human beings who deserve respect. A sound and attractive conception of human dignity should be inclusive so that vulnerable people like the severely mentally disabled people should not be exploited by being used as research subjects in harmful clinical trials.

3.2 The Need for the Inclusive Concept of Human Dignity for the Severely Mentally Disabled

Any conception of dignity that is based on contingent attributes like rationality and autonomy certainly exclude those who lack the capacity to think properly and act autonomously due to their debilitating severe mental disability that renders them unable to perform such acts. Hence, a sound conception of dignity should be able to illustrate that all human beings are the bearers of intrinsic dignity regardless of their mental differences. In this way, all human being’s welfare will be protected. Different conceptions of dignity that are based on acquired attributes like the Kantian notion of human dignity that emanates from rationality and autonomy discriminates those who lack such attributes to be treated as though they are not full human beings. However, the Kantian notion of human dignity has some limitations because it entails that those who lack
autonomy and rationality are not the bearers of human dignity. Hence, it fails to include those who are severely mentally disabled.

Our general moral intuition is that we do not think that the mentally disabled can be treated as having the moral status we would normally accord to animals. We charge people with murder if they kill the disabled, whereas we don’t call killing animals murder. Another strong intuition relates to the fact that the mentally disabled are in relationships with others, who value them as persons – even if they don’t have the usual characteristics of persons. In a sense, we cause great harm to their family and friends if we do not treat the disabled as worthy of respect. According to Thaddeus Metz, this harmonious relationship towards severely mentally disabled can be expressed as solidarity. Metz (2012a: 26) argues that “to exhibit solidarity with one another is for people to care about each other’s quality of life, in two senses. First, it means that they engage in mutual aid, acting in ways that are expected to benefit each other. Second, caring is a matter of people’s attitudes such as emotions and motives being positively oriented towards others, say by sympathizing with them and helping them for their sake”.

In addition, “in the International Bill of Rights: human dignity signifies that each human has inherent value; each human is worthy of respect; and each human has inalienable rights to the protection of his or her value” (Beyleveld & Brownsword, 2001: 15). This suggests that the inherent human worth that human beings possess does not depend on any particular mental capabilities, but that it is rather grounded in the mere fact of being human.

An inclusive account of human dignity should be able to include severely mentally disabled people with the aim of protecting their welfare even in cases whereby they are incapable to give
informed consent which refers to. The exercise of the right that a patient has to make decisions, to understand the nature and implications of options presented to him, and making free choices” (Henrique, 2010: 385). Since severely mentally disabled people lack this capacity to consent, it does not imply that their humanity will be exploited. Rather, surrogate decision makers ought to be consulted and illustrate the medical preferences that will be on the best interest of these incapacitated patients.

Kant’s views on human worth leave severely mentally disabled people below the line of human worth, since due to their debilitating mental retardation; they cannot exercise their autonomy and rationality (Kant, 1996: 186). Thus, it is clear that on these lines of defending the dignity of human beings, severely mentally disabled people are deemed to be below the level of human worth.

The sound notion of human dignity ought to include the severely mentally disabled people because those with normal mental activities have harmonious relationship with them even if they cannot give back the same love they are given. Failure to respect their humanity will violate and decline their essence to a level of mere things which can be used as the means to an end. “This notion, since it is proper for human condition, is considered also as inalienable that cannot be taken away or suppressed. It is from this value that basic human rights derive” (Henrique, 2010: 382). Looking on the medical case study of Terry Schiavo “who was living at the mercy of a tube that supplied a nutrient solution to her body. Doctors ruled that she was in a persistent vegetative state (PVS), with no real consciousness or chance of recovery. Terry Schiavo had been sustained by artificial hydration and nutrition through a feeding tube for 15 years” (Quill, 2005: 1630-1633).
Kantian followers would argue that Terry Schiavo lacked human dignity because she was incapable for rationality and autonomy. Therefore, there is a need for an account of human dignity that will include the severely mentally disabled people in order to protect their lives. An inclusive account of human dignity will also justify the priceless value of a human life. For example, “Karen Quinlan was a 21-year-old college student in 1975 when she ingested a combination of drugs and alcohol at a party. Feeling unwell, she was put to bed by friends who later returned to find that she had stopped breathing. By the time help arrived, Quinlan's oxygen-deprived brain was severely damaged, and she was reduced to what doctors describe as a persistent vegetative state” (http://en.wikipedia.org/wiki/Karen_Ann_Quinlan).

After legal battle the respirator was removed but, she did not die. Instead, she continued breathing unaided and lived for another nine years before infection and pneumonia finally killed her”. Supposed Quinlan’s life was ended through euthanasia due to lack of autonomy and rationality, or due to lack of communal participation which deprived her to possess dignity, this would imply that her priceless life could have been ended artificially due to the reliance of the concept of human dignity that does not include the severely mentally disabled people. Thus, the believe of sanctity of life can be enlightened more by our moral intuition towards respect to human life which entails an intrinsic dignity that is not based on contingent attributes like rationality or communal participation during traditional rites.
Chapter 4: A Critical Evaluation of the Kantian Conception of Human Dignity

4.1 Introduction

This chapter specifically discusses the Kantian notion of human dignity. However, the dignity of the severely mentally disabled people has been an issue because other scholars argue that they do not have dignity because they lack consciousness. I discuss the Kantian notion of human dignity and see whether it covers the dignity of the severely mentally disabled people. The acknowledgement of the importance of dignity has become widespread whilst the universal recognition of the equal dignity of all human beings has not been stipulated clearly. Under this chapter, I investigate into accounts of human dignity according to both Kant and Neo-Kantians with a view of finding a more plausible account and an account that allows the recognition of the dignity of the severely mentally disabled people. Some of the ways of human worth, generally, and dignity in particular, that have been explained, inevitably, exclude the severely mentally disabled people.

4.2 Kantian Conception of Human Dignity

Kant’s formulation of human dignity is based on two attributes, namely autonomy and rationality. Kant (1996: 186) argues for the dignity of human beings and he analyzed dignity as inherently embedded within human beings because “of an endowment with reason, a reasoning power that enables them to exercise their freedom and to follow the moral imperative.” In Kant’s views, autonomy and rationality help human beings to understand the moral laws. For example “autonomy was considered as the ability to know what morality requires of us, and functions not
as freedom to pursue ends, but as the power of the agent to act on objective and universally valid rules of conduct” (O’Neill, 2002: 84).

The idea of autonomy was also discussed by Beauchamp & Childress (2001: 58) where they argue that “autonomy is a self-rule that is free from both controlling interference by others and from limitations, such as inadequate understanding, that prevent meaningful choices.” Autonomy in this regard can be seen on individuals who do their moral duties according to the demands of moral rules and principles. This point can be seen clearly whereby Kant argues that:

The laws of the kingdom of ends are the laws of freedom, both because it is the mark of free citizens to make their own laws, and because the content of those laws directs us to respect each citizen’s free use of his or her own reason. The conception of ourselves as legislative citizens is the source of the dignity we accord to human beings (Kant, 1997a: xxv).

On the above argument, Kant illustrates that autonomy in his view is not intended to allow individual to act in any other ways that are not in conformity to the moral laws. Their rational-will should be exercised in such a way that is going to follow the rules of categorical imperative. I think it is important to highlight that the kingdom of ends according to Kant belongs only to rational agents who have the capacity to understand the moral laws and who are also the legislative citizens. For Kant, “it is morally wrong however for other human beings to make false promises to others, because such actions use other human beings as the means to an end, as well as violating their human worth because the value of human beings is above all price; other things have value for them, in relation to their projects” (Rachels, 2007: 132).

The inherent human worth of human dignity cannot be compromised under any circumstance, because only mere things that can be used as the means to an end. Kantian point is that due to rationality and autonomy, human beings are above all the price because these attributes give
them an intrinsic dignity. For Kant, “respecting someone as a rational being also means respecting her right to make her own decisions about her own life and actions. Someone who makes you a false promise in order to get some money treats others’ reason and capacity for making decisions merely as an instrument for his own use” (Kant, 1997a: xxiii). This means that the worth of human beings will never be compromised to the level of mere things that can be used as the means to attain certain ends. In addition to this argument, Kant also argues that:

In the whole of creation everything one wants and over which one has any power can also be used merely as a means; a human being alone, and with him every rational creature, is an end in itself: by virtue of the autonomy of his freedom he is the subject of the moral law, which is holy. Rational beings should not be subjected to any purpose that is not possible in accordance with a law…….. Hence, this subject is to be used never merely as a means but as at the same time an end (1997b: 74).

The above argument still supports the previous Kantian point which says both rationality and autonomy give human beings an inherent dignity to an extent that they will never be used as the means because they are ends in themselves. The dignity of human beings elevates them to dominate other beings and exercise their power in the universe in such a way that they can use other beings merely as the means to an end. Thus, autonomy and rationality enable human beings to be self-determined beings that give laws to themselves.

The respect that we ought to show to other human beings in Kantian terms is categorical. That is, it is always binding because it does not depend on any hypothetical obligations at all. According to Kant, categorical imperative has two rules namely “Always act in such a way that you can also will that the maxim of your action should become a universal law. The other rule says; act so that you treat humanity, both in your own person and in that of another, always as an end and never as a means” (Kant, 1997a: xxii). The first rule illustrates the dire need for moral principles to be
universalizable. A typical example would be that it is morally wrong to make false promises. Nevertheless, the second rule of categorical imperative displays the distinction to be made between mere things and human beings by emphasizing the need to respect all human beings. For example, it would be immoral to deceive rational human beings about the risks and benefits during the clinical trials in order to persuade them to be the research participants. This type of action would not be showing any respect to human beings as the second rule of categorical demands especially because it uses human beings as the means to an end.

**4.3 Critical Review on Kantian Conception of Human Dignity**

However, the quandary issue about the above arguments is that in the medical arena, there are some people who may be brain damaged (persistent vegetative state), while some people may be severely cognitively impaired during their lives. If respect for persons depends on the rational will, must we conclude that this group of human beings falls beneath the status of dignity because they categorically lack the attributes that give an individual the status of dignity? The kingdom of ends in Kantian perspective belongs to rational beings who are self-legislators, because he argues that “the conception of ourselves as legislative citizens is the source of the dignity we accord to human beings” (Kant, 1997a: xxv). Following this Kantian argument, it is clear that the severely mentally disabled people are not included in this kingdom of ends simply because they cannot be the self-legislators which is perceived by Kant to be the source of the dignity we accord to human beings.

In addition, Kant (1997a: 37) categorically emphasized that “every rational being exist as an end in itself, not merely as a means to be used by this or that will at its discretion; instead he must in all his actions, whether directed to himself or also to other rational beings, always be regarded at
the same time as an end.” This notion of dignity that is based on self-consciousness and rationality does not see anything wrong on non-therapeutic medical research on individuals that lack these attributes. That is, the moral worth of the individuals will only be considered if they possess these mentioned attributes. This hierarchical formulation of the Kantian notion of dignity that is based on rationality and autonomy is also similar to Boethius’ point which says “a person is an individual substance of a rational nature (Iroegbu, 2005: 67).” In addition, Iroegbu analyzed further the argument of Boethius and said that;

In scholastic metaphysics, substance is that which exists in itself and not inhering in another. Substance is contrasted to accident, which is a reality that exists not independently, but rather depends on another reality. Rationality is the power to think, to reason, to reflect, to cogitate. It is to weigh ideas or issues in the mind, intellectually. Boethius’ definition of person as an individual substance that can reason clearly excludes non-rational beings like animals and plants (2005: 68).

The strong emphasis on rationality as an attribute that makes individuals to be recognized as substances makes it difficult for the severely mentally disabled people to be perceived as substances that possess the moral worth. The severely mentally disabled people cannot be classified as ‘substances’ that exist on themselves because they need a complete assistance from both health care professionals and the family members. Thus, the argument that is based on a person as an individual substance of a rational nature completely excludes the severely mentally disabled people and classified them below the line of human worth. This kind of an argument can be very detrimental to the welfare of human beings who are in the persistent vegetative state because under any circumstance they are incapable to rationalize things. Another total exclusion of the severely mentally disabled people can be seen where Kant argues that:

Being of absolute value, human beings should not sacrifice themselves or one another for merely relatively valuable ends. Since it is insofar as we are rational beings that we accord ourselves and each other as rational beings.
We should develop our rational capacities and promote one another’s chosen ends (1997a: xxii).

It is not possible for the severely mentally disabled people to be rational and to develop their rational capacities. The above argument reveals that it is through rationality that human beings can possess absolute value. Thus, this Kantian line of demarcation makes it difficult for the severely mentally disabled people to be perceived as beings that also possess an absolute value. If human substances are distinguished from animals and plants through the attributes of rationality and autonomy, it follows logically that even those who are severely mentally incapacitated due to mental disabilities will be classified together with the animals and plants. My intention is to look for an attractive and plausible account of human dignity that is inclusive enough to include the worth of severely mentally disabled people. So far the Kantian perspective seems not to incorporate them in the kingdom of ends because that kingdom is constituted only of the rational and autonomous beings that are capable to be the self-legislators.

4.4 Neo-Kantianism on the Notion of Human Dignity and Critique of Its Position

The neo-Kantians on the conception of human dignity did not change the attributes that Kant viewed as the source of human dignity. For instance, Dworkin (2005: 97) also argues that “the life of an individual who lacks autonomy is not worthy of respect and presumably lacks human dignity.” On the same view, Kateb (2011: 114) also shares the same view with Kant and Dworkin because he also argues that “human beings constitute a special sort of animals because they have a rational nature and autonomy which are generically the credo of the notion of dignity.” These arguments have no room for those who are severely mentally disabled because their formulation of human dignity revolves around the capacity to exercise one’s rationality and
autonomy. Thus, it is clear that according to Dworkin’s argument there would be nothing morally wrong to use severely mentally disabled people in the clinical trials as research objects because their lack of autonomy and rationality lead themselves to be used as the mere things that lack human dignity. This kind of argument that is based on certain attributes to be acquired unjustly segregates other groups of human beings because their human worth is not intrinsic but relative to our mental capacity differences.

The Kantian attributed concept of dignity was also supported by Lee & George where they argue that:

What distinguishes human beings from other animals, what makes human beings persons rather than things, is their rational nature. Human beings are rational creatures by virtue of possessing natural capacities for conceptual thought, deliberation, and free choice, that is, the natural capacity to shape their own lives (2008: 174).

This argument also falls under the same critique of Kantian notion of human dignity because if the basis of human dignity emanates from these attributes, this will also imply that the severely mentally disabled people are left behind because they lack the capacities for conceptual thought, deliberation and free choice. Thus, since these attributes distinguish human beings from other animals, it follows logically that those who do not possess them are in the same category with animals.

In addition, it is very amazing that Lee and George (2008: 173) argue that they want to defend the position that “all human beings, regardless of age, size, stage of development, or immediately exercisable capacities, have equal fundamental dignity.” The complex part of their argument is that the same position that they intended to reject is the one that they also followed. Thus, their notion of human dignity is also segregating the other group of human beings because they have
attached certain attributes as the source of human dignity. For instance, they argue that “what distinguishes human beings from other animals, what makes human beings persons rather than things, is their rational nature” (Lee and George, 2008: 174).

However, their position is not different from the attributed form of dignity that is not inclusive to recognize the dignity of the severely mentally disabled people. Lee & George’s argument of human dignity emanates from the accidental attributes that are perishable. This kind of dignity varies with different degrees of mental competence. They did try to substantiate their argument by arguing that “possession of full moral worth follows upon being a certain type of entity or substance, namely, a substance with a rational nature” (2008: 190).

Another scholar who shares a similar view with Lee & George is Michael Fox. According to Fox (1978: 112) “it follows that all (and only) those beings which are members of a species of which it is true in general (i.e., typically the case at maturity, assuming normal development) that members of the species in question can be considered autonomous agents are beings endowed with moral rights.” In addition, Fox argues that:

Autonomous creatures as ones having the capacity to be: critically self-aware, manipulate concepts, use a sophisticated language, reflect, plan, deliberate, choose, and accept responsibility for acting. Only autonomous beings, as just described, can and do belong to a moral community, which is the sort of social group within which (and only within which) such concepts as those of rights and duties have any meaning and application. It follows that (and only) those beings which are members of a species of which it is true in general (i.e., typically the case at maturity, assuming normal development) that members of the species in question can be considered autonomous agents are beings endowed with moral rights (Fox, 1978: 111-112).
Fox considers all members of the human species as the bearers of rights (which correlates with dignity), by virtue of belonging to a species where the normally developed, adult members generally are autonomous. However, his argument discriminates those who are severely mentally disabled because they are not autonomous and they lack the capacity to be: critically self-aware, manipulate concepts, use a sophisticated language, reflect, plan, deliberate, choose, and accept responsibility for acting. His argument also leaves the severely mentally disabled below the borderline of belonging to a moral community because he argues that “only autonomous beings, as just described, can and do belong to a moral community” (Fox, 1978: 112). This discrimination element can also be seen where Fox (112) argues that “members of the species are typically the case at maturity, assuming normal development that members in question can be considered autonomous.” Firstly, severely mentally disabled people do not have a normal development; secondly this abnormality renders them incapable of autonomy. So if this is the case, then it is clear that the capabilities that have been mentioned by Fox as the corner stone to identify and classify members under the species of Homo Sapiens, do not include the severely mentally disabled because they lack all these capacities to an extend that they are not even perceived to belong to a moral community because according to Fox, only autonomous beings can be described to belong to a moral community.

My position in regard to the above arguments of Lee & George, and Fox is that; if rationality and mental capacities were substantially embedded in our human nature they would not perish during severe mental disability or during cases of persistent vegetative state. I believe rationality to be the effect of the activeness of the brain, hence, that is why it varies in different mental severity degrees. For example, an infant’s rationality is different from the rationality of an adult due to mental developmental stages. This is why it does not follow that maturity predisposes one to be
rational because there are some elders who still behave irrationally. So, rationality is not the substantial form or essence of human beings, but an accidental tool that people can use to understand things better. I am calling it an accidental tool because it can cease to be during severe mental disability.

The Kantian notion of human dignity was admired passionately by Sulmasy, who believes that Kantian notion of human dignity is powerful, influential, and substantially different from the notions that preceded it. Sulmasy (2008: 490) defined intrinsic dignity “as the intrinsic value of natural kinds that have, as natural kinds, the capacity for language, rationality, love, free will, moral agency, creativity, aesthetic sensibility, and an ability to grasp the finite and the infinite. In addition to that point, he also argues that “extraordinarily impaired individuals still have intrinsic dignity by virtue of being the members of the human natural kind (2008: 490).”

I think it is very difficult to follow Sulmasy’s argument with reference to severely mentally disabled people, because his construction of human dignity which people acquired by virtue of being the human natural kind goes together with the above mentioned accidental attributes. For instance, severely mentally disabled people are incapable to rationalize things and love creativity is not even imaginable for such group of people. Thus, the attributed form of dignity is very inconsistent when applied to other groups of human beings due to their debilitating severe mental state. The above argument of Sulmasy cannot be applied generally to all human beings; a typical example will be the severely mentally disabled people who are incapable exhibiting the required characters of human dignity. His argument is still having the same slippery slopes that are entailed in Kantian notion of human dignity with special focus to severely mentally disabled people.
However, Sandman (2002: 180) rejected the Kantian autonomy based concept of human dignity. For him, “if we base human dignity in something like autonomy or potential for autonomy or ability to have mental experiences, which obviously differs between different people, it does not seem to follow that we have an equal value; because it omits small children, the severely demented and the mentally impaired.” In addition, he argues that “the best bet would be our ability to have mental experiences and hence to experience things like pleasure, suffering, etc” (2002: 179). My view is that, Sandman’s notion of human dignity is not different from the Kantian attributed notion of dignity which is also not inclusive to all other human beings. He has rejected the principle of autonomy with the view that it omits small children, the severely demented and the mentally impaired, but at the same time, his notion also suffers the same critique I used against Kant. Some people may have congenital brain defects at birth or be in the persistent vegetative state. These people will both lack the ability to have mental experiences and to experience things like pleasure and, suffering, especially those in the persistent vegetative state. Thus, Sandman formulation of human dignity is also not doing any justice to the severely mentally disabled people for the above reasons.

Nevertheless, Baumann acknowledges the Kantian conception of dignity that is associated with moral agents, dignity and rationality. On the other hand, Baumann does not seem to be convinced that the Kantian conception is capable to capture what we mean by dignity because it is based on special properties on certain species. Baumann further argues that:

To say that we have human dignity roughly means that we should get the basic kind of respect from others that we need so badly. Human beings have dignity because they are social animals in the sense that they need recognition by other people. It seems to me that the respect relevant for human dignity depends on reciprocity: What I get from others is not full respect if I do not reciprocate and respect others; only from those whom I
respect can I get full respect back (hence, those who cannot reciprocate are disadvantaged because they do not get full respect (2007: 12).

This conception of human dignity is also not different from the rest of the other conceptions of human dignity that I have discussed previously. In fact, this notion of dignity according to Baumann is even worse because it boldly says “those who cannot reciprocate are disadvantaged because they do not get full respect.” I also reject Baumann’s conception of human dignity because it segregates and undermines the severely mentally disabled people due to the fact that they cannot reciprocate and respect others in order to attain full recognition of human dignity. His formulation of human dignity also has some attributed specific characters that enable individuals to possess human dignity. Thus, these characters are not universally achievable by all other human beings, and it leaves other human beings (e.g. severely mentally disabled) below the line of human worth.

Nevertheless, it looks like most of the neo-Kantians who believe to add something different from Kant’s conception of dignity seem to develop the same attributed form of dignity that was developed by Kant. For instance, Christiano (2008: 18) argues that “the basic problem about Kant’s conception of human dignity is that it is not at all clear how persons can have dignity by virtue of their rational nature when there are no values independent of rational nature in terms of which it can rationally justify its choices of ends.” According to Christiano, Kantian conception of human dignity that is based on rationality does not provide a fully satisfactory ground of the dignity of persons. An alternative account of the dignity of persons for Christiano is that:

The humanity of a person is that person’s capacity to recognize, appreciate, engage with, harmonize with and produce intrinsic goods. It is in virtue of this feature of human beings, that they bring something unique and distinctive to the world and that they have a dignity worthy of respect. This status of persons is the dignity of persons. Persons have dignity because
they are capable of appreciating and enhancing the value in the world and this capacity involves the autonomous and self-conscious exercise of their capacities. There are two different aspects of this value that are worth repeating. One is that human beings have a special worth as existing things. Hence, their worth goes beyond the mere valuing of events and states of affairs that is characteristic of consequentialist reasoning (2008: 17-20).

This conception of human dignity is also not different from the previously discussed conceptions of human dignity that emanate from the attributes. Thus, such attributes like, self-conscious of capacities, appreciation, and production of intrinsic good and others do not cover the human worth of the severely mentally disabled people. I found this notion of dignity as implausible for the same reason of segregating the other group of human beings, and it also falls short with the same reasons I rejected the Kantian notion of dignity. So far, both Kant and neo-Kantians do not provide an inclusive account that is plausible and attractive enough to recognize the human dignity of the severely mentally disabled people. Hence, on the next chapter, I will look into whether the African conceptions of human dignity recognize the human dignity of the severely mentally disabled people.
Chapter 5: A Critical Evaluation of sub-Saharan African Conceptions of Human Dignity

5.1 Introduction

This chapter analyzes the Sub-Saharan perspectives of human dignity with the aim of attaining a plausible and attractive notion of human dignity that will include the severely mentally disabled people. There are two different views that express human worth in the sub-Saharan Africa, namely strong and moderate communitarianism. I critically discuss the views of the extreme communitarians and then discuss the moderate views afterwards. I also present some of the main views in detail and explain how ‘participation in community’ is central. In addition, a good theory should explain why we feel so strongly about the denial of our dignity – the denial goes to the core of our being, as well as that the dignity of one person is somehow related to the dignity of another. By critically examining these views and by comparing and contrasting them with the Kantian notion of human dignity, I hope to articulate a more inclusive and plausible account of human dignity.

I argue that many perspectives that have been made in sub-Saharan Africa about the community tend to turn a blind eye over the human worth of the individuals. The example of these can be found on Menkiti, Mbiti, Musopole and Tempels, among others. There is a dire need for the integrated notion of human dignity that will include all human kind. It is my view that both Tangwa and Metz’s formulations of human dignity are promising and if their notions can be well understood, they can be used to protect the welfare of the severely mentally disabled people.
5.2 Strong Communitarianism on Human Worth

Strong communitarianism is whereby the individual is wholly molded by his/her immediate community. “This implies that just as a parent natures a child the individual’s worldview is defined by the community that natures him/her right from birth” (Gyekye, 1997: 36-37). This form of communitarian is basically grounded on the maxim that an individual alone cannot attain the status of human worth, but one attains that status through the communal participation. Indeed, this thought of interaction between the individuals and the community is accepted by many scholars in sub-Saharan African.

In sub-Saharan African societies, emphasis is put on the communitarian relationships that bind all the members of the society. Mbiti argues that “I am because we are; and since we are, therefore I am,” while Menkiti argues that “as far as Africans are concerned, the reality of the communal world takes precedence over the reality of the individual life histories, whatever these may be.” (See Mbiti, 1969: 108; Menkiti, 1984: 171). From this conjecture, Menkiti added three inferences: firstly that in the African view “it is the community which defines the person as person, not some isolated static quality of rationality, will, or memory; secondly, that the African view supports the notion of dignity/seriti as acquired not merely granted as a consequence of birth; thirdly, that as far as African societies are concerned, dignity is something at which individuals could fail” (Menkiti, 1984: 173).

The above arguments of Menkiti and Mbiti analyze human beings as individuals that can only attain the status of dignity through the incorporation into this or that community, failing which, the individual will never attain that status alone. It should also be noted that the type of dignity that is proposed by the extreme communitarian is not equal to all human beings because as it can
be seen from Menkiti, “full dignity is attained after one is well along in society and this indicates straightway that the older an individual gets the more of a person he becomes” (Menkiti, 1984: 173). These claims made by Menkiti demonstrate that dignity in sub-Saharan African thought is acquired in the communal participation and a person becomes a full person in the eyes of the community after the incorporation.

That notwithstanding, if Menkiti’s notion of dignity is defined by the community not as some isolated static quality of rationality and will; I do not see how he managed to exclude the intrinsic attributes of human beings because we are not only communal beings. For instance, human beings are morally praiseworthy or blameworthy because they are capable to choose right from wrong, but not because the community dictates what they should do or not do. Secondly, if the notion of dignity is acquired, how can the severely mentally disabled people acquire it? I do not see where Menkiti will classify the dignity of the severely mentally disabled people due to the fact that their mental incapacitations disallow them to reflect on their actions and to take part in any communal activities. Thirdly, if dignity is something at which individuals could fail, it implies that the severely mentally disabled people have already failed to attain it because they cannot properly incorporate themselves in their communities.

Menkiti’s notions of ‘human worth and incorporation’ are very vague in a sense that they do not explain as to when and how one may know when the person has attained the status of human worth. The quandary issue on Menkiti’s claim is that he sees elderly people to be more capable of attaining the status of human worth than others. The point is, there are elderly people who are known within their societies to have access to the mysterious powers, make life full of uncertainties with unpredictable wickedness and evil and are dangerous to other human beings.
For this reason, it is common to find people wearing or hanging all sorts of objects believed to contain the vital power around their wrists, waists, necks or arms in traditional African communities. For the same reason others engage in ritual murders in order to enhance their dignity and respect within their societies. Thus, I do not think that such elders also qualify for the status of human worth regardless of being the elders. In this sense, Menkiti’s claim on the human worth of the elders does not help us to have a more integrated notion of human dignity that will also include the severely mentally disable people.

On the other hand, Mbiti (1969: 108) illustrated many claims such as “the individual can only say I am, because we are, and since we are, therefore I am the individual owes his existence to other people, including those of past generations and his contemporaries; and that the community must therefore make, create or produce the individual.” I think these claims do not address the nature of human beings adequately. For instance, besides being communal beings human beings are also rational and autonomous beings. This means that human beings may exercise their autonomy in such a way that they may choose not to follow and practice some of the communal practices not with the intention of harming other human beings, but mainly because they have different preferences from the ones of the community. Hence, Mbiti’s application of “we” seems to thwart the intrinsic autonomy of human beings.

The same criticism of Mbiti and Menkiti can also be extended to Senghor (1964: 49) because he also argues that “Negro-African society puts more stress on the group than on the individual, more on solidarity than on the activity and needs of the individual, more on the communion of persons than on their autonomy.” I think the Akan proverb can also be used in response to the above claim. This proverb states:
The clan is like a cluster of trees which, when seen from afar, appear huddled together, but which would be seen to stand individually when closely approached (1964: 49)

The equivalence that one can draw between the clan and the community is that even if individuals are communal beings by nature, this does not, however, indicate that their individuality is completely absorbed by the community. The vexing problem regarding the extreme communalism is its radical emphasis on the community interests this emphasis makes it hard to think about the dignity of the individual because persons become persons only after a process of communal incorporation. The same perspective of the extreme communitarian can also be seen in the argument of Musopole who argues that:

In order to recapture our human dignity, integrity, and wisdom, we do not need an education; rather we need reconciliation to our essential humanity. To be human in Africa is to be a reconciled person-in-community-and-communion responsibly living out the integrity of one’s humanness in all spheres of life and thus contributing to the development and realization of what we have called the good village or community and harmony in the cosmos (1994: 178-179).

The above argument of Musopole illustrates clearly that people need to reconcile with the community in order to recapture their dignity. This argument also shows that the notion of human dignity is acquired in an African context, and it is acquired through the communal integration. Generally, the extreme communitarians perceive communal integration as a sacrosanct practice because without it the status of human worth is a null and void. That is the projected way of showing integration in the community is grounded within the practice of solidarity among the members of the community.

According to Setiloane (1986: 14) “seriti has often been translated to mean dignity, and dignity/seriti is the energy/vital force that both makes ourselves and unites us in personal interaction with others.” Setiloane sees dignity/seriti as the vital force that permeates communal
life and it is through that communal life that people can realize and respect other people’s *dirití* (dignities). Further, Setiloane illustrated that the point that emerges from the above descriptions is the same as the one we encountered when considering the idea of persons and personal community embodied in the expression *umuntu ngumuntu ngabantu, which is translated to mean* (a person is a person through other persons). Persons appear to have no existence apart from their relations with other persons.

On the same point, Kasenene sees vital force in a hierarchical manner, descending from God through the ancestors and elders to the individual. He also argues that “human society is organized on the basis of vital force: life growth, life influence and life rank whereby rites and rituals are performed in order to ensure that vitality is promoted, maintained and strengthened” (Kasenene, 1994: 141).

If *seriti*/dignity in this context is seen as the aura/energy that can only be attained in the communal life, it connotes, therefore, that people cannot acquire the notion of dignity equally because those who participate in communal activities will be more dignified than those who do not live in a communal life. The emphasis that is based on the vital force that can be strengthened makes it difficult for all other human beings to acquire it equally. However, it is not clear whether this communal relations look upon the autonomy of the individuals or not; and whether those who may fail to participate in communal life due to mental disableness do possess human dignity.

According to Turaki (2006:36) the concept of community is not restricted to the community of human beings alone, but embraces a communal attitude to the world of the spirits and ancestors as well as to the world of nature. In addition, Turaki (2006: 109) argues that community life is
not just for humans: spirit beings and the ancestors are also intimately and actively involved in the affairs of the community. He sees life as unthinkable and incomplete without the presence of spirit beings, especially the ancestors. It is amazing as to how he puts more emphasis on how people can obtain power. For Turaki, power can be obtained in a variety of ways:

Vital force/power or energy can be manipulated in the form of sacrifices, offerings, taboos, charms, fetishes, ceremonies, even witchcraft and sorcery. The power may be transmitted through contact with persons of superior religious status or by using clothing or something previously associated with such a person. It must be acquired whatever the cost (2006: 35).

The predicament that I have about this claim of acquiring vital force is grounded on the means of attaining it. If people can also attain power from witchcraft and sorcery, I see the situation whereby people will end up killing each other because they want to use their body organs in order to enhance their seriti/dignity, which is the case that is taking place in many countries. Sorcery actions always involve anti-social strategies which involve mystical power. For instance, they employ all sorts of ways to harm other people; they spit and direct the spittle with secret incarnations to go and harm other people. They dig up graves to remove human bones which they use in their practice of enhancement of vital force. Generally, it is believed that misfortunes, illnesses, tragedies, and sorrows are caused by the use of mystical power of the sorcery. So if this is the case, how, on earth, can we advocate for this type of strengthening one’s vital force to be universally applicable? It is unfathomable because this practice involves many inhumane and anti-ubuntu manners. Therefore, I thrust aside the idea of enhancing one’s vital force in whatsoever means.

On the same issue of the relationship between human beings and spirit beings, Nyirongo (1997:101) argues that “merely being born into a community is not enough to establish full dignity because certain rites of passage are required if one is to become a full personhood and
one who has not gone through these rites remains a child, an outsider, a ‘half’ person or nobody.”

On the same perspective, Nyirongo argues that the traditional concepts of destiny and hierarchy assign every human being his or her place in life and within this hierarchy; one’s social worth is further defined by one’s age, birth order, social role, ritual status and material possession.

Nyirongo’s form of dignity is based on the accidental attributes which are not substantially embedded within the nature of human beings. These cannot be found in all human beings, and if that is the case it means that dignity in that formulation is leaving other human beings (severely mentally disabled) below the line. It looks like those who may choose not to take part in the practice of the rituals are seen as ‘half’ persons and, as it is the case that severely mentally disabled people cannot take part in the communal practice and traditional rituals, it is clear that this group of people will be regarded as that of ‘half’ persons.

The view of attaining dignity through incorporation into the community seems to paternalise human beings in such a way that they are forced to do rituals that they may not prefer. “Paternalism is frowned upon for reasons such as its transgression to the patients’ rights of self-determination, and it is generally considered as an unwarranted interference with the liberties of people who can act autonomously because it undercuts what they want for themselves and their liberty to live out their lives as they wish as long as they do not interfere with others” (Doyal & Tobias, 2001: 240). Therefore, it is imperative to develop the notion of dignity that does not come together with the various degrees of recognition that are based on extrinsic judgments, and to develop a form of dignity that is intrinsically embedded in all human beings regardless of their differences in age or characters.
Moderate communitarianism is in contrast to extreme communitarian form of human dignity. The moderate one “refers to the reconciliation of rights and social responsibilities, which is the balancing of social forces and individual autonomy” (Gyekye, 1997: 52). The moderate communitarian thought is very important because it has a room for the recognition of individual’s human worth, while at the same time emphasizing on the importance of the community.

According to Gyekye (1997: 63-66), “the dignity or worth of the individual cannot be diminished by his natural membership in the community but both the individual and community ought to be equally morally acknowledged.” Thus, the community life itself constitutes the foundation for moral responsibilities and obligations. In addition, it should be considered that these responsibilities and obligations are made possible by the nature of human beings because they are endowed with rationality and free will; these attributes enable them to reflect critically upon their duties in the communal life. “Unlike trees that can grow independently from others and which can grow lonely, human beings cannot grow in that mode because they need other human beings to help them to develop socially etc” (Gyekye, 1997: 65).

Now, since human beings are endowed with rationality and autonomy, it is clear, then, that the “individual can set and reflect upon his own goals or even reevaluate existing communitarian values in such a way that he can bring some changes because there is no human community that is totally superior to external forces” (Gyekye, 1997: 66). Hence, individuals can partly, never fully be defined by the community. I agree with Gyekye’s formulation of moderate or restricted communitarian because he has modeled it in such a way that it recognizes the adequate account
of the self and its relation to the community. Under this form of community, the self is seen both as a communal being and as an autonomous being with a capacity for evaluation and choice while the radical or extreme account of communitarians see an individual as nothing but the product of the community. Masolo has also contributed a lot into the discussion of individual’s worth in the community even though he doesn’t discuss the status of human worth directly. He argues that:

> Individuals and community regulate and depend on each other for whom and what they become. Human worth is constituted by interplay between the culturally objectified perceptions of persons and the subjectively apprehended aspects of social life through which individuals express their subjective subjectivity in opposition to or conformity to the conventionally defined roles, rules, and regulations (2010: 218).

Masolo recognizes the place and roles of the individuals in the community, unlike Menkiti who sees the individuals as the products of the community. In addition, Masolo (2010: 219) argues that “we become persons through acquiring and participating in the socially generated knowledge of norms and actions that we learn to live by in order to impose humaneness upon our humanness.” My view is that the relational part that Masolo has mentioned so far does not include the human worth of the severely mentally disabled people, because due to their mental incapacitation they cannot participate in the socially generated knowledge of norms and actions that we learn to live by in order to impose humaneness. Hence, his argument on human worth does not cover all human beings.

However, even though the modern communitarianism does not specifically include the human dignity of the severely mentally disabled people, at least the moderate communitarians recognize the point that without the individuals there is no community; hence this two groups need each other in a relational world. The individual needs the community for its social development and
social recognition. In this way, it is easy to see individuals as performers not as spectators waiting for the prescriptions from the community. In fact, if I may ask who constitute the community? The answer will be that the community is constituted by the individuals who identify and solidify themselves as sharing the common good, respecting and protecting each other’s welfare.

A more promising view of moderate communitarian “makes it clear that the individual’s dignity does not shrink or disappear in the haze of community because ontologically a person is not created by the community but the individual needs the community for his social recognition” (Iroegbu, 2005:442). Iroegbu’s argument is completely different from Menkiti’s perspective of human worth; rather Iroegbu has similar arguments with Gyekye because he recognizes the importance of the worth of individuals in the community. Iroegbu (2005: 443) also argues that “communal belongingness authenticates one’s dignity and realizes personal autonomy.”

However, another way of showing respect to the worth of human beings is by respecting their autonomy as long as they do not exercise it in such a way that is going to harm other human beings.

The relationality point that is emphasized by the moderate communitarian shows the relationship that is not only between human beings, but also the relationship with God because human beings imitate God in many ways such as love and dominion over their actions. The community gives an orientation to individuals to be able to respect other’s dignity and to live harmoniously with them, and the community does not give the ontological status but the social status. However, this perspective of human dignity hasn’t touched deeply the metaphysical ground of that which gives human beings an intrinsical dignity.
The conception of dignity that I am seeking is the one that every person will never lose under any circumstance. So far, the sub-Saharan account of human worth is based on accidental attributes that individuals could fail to acquire, or even lose. This point can be seen also in Battle who argues that:

To grow in personhood is to become more of a person and hence to become more worthy of reverence and respect; seriti/dignity also becomes indistinguishable from Ubuntu in that the unity of the life-force depends on the individual’s unity with the community. Thus, seriti must be understood alongside Ubuntu, otherwise it is difficult to see how a person’s life –force has any enduring reality apart from an individual’s definition of community (2009: 116-119).

If seriti is indistinguishable from Ubuntu, does it connote that without the status of personhood a person cannot acquire the status of dignity/seriti? I think the extrinsic notion of human worth that is identified with the status of personhood promotes the hierarchical ranks between human beings. For example, if in order to attain and enjoy the status of personhood, one must share and care for one another, it means then that those who will share and care for others in a greater way will attain the status of personhood more than others; and if I may reconsider his argument on dignity/seriti which is viewed as being indistinguishable from personhood, this point will also denote that those who share and care for others than other individuals will attain the status of human dignity more than anyone else.

In contrast to the views of Battle for identifying seriti/dignity with personhood, I think personhood is the status that one can enhance or diminish through his or her actions. That is, virtuous actions enhance one’s personhood while immoral actions diminish the status of personhood. Dignity/Seriti is the status that one acquires innately by virtue of being a human being regardless of meritorious characters. This type of dignity is applicable to every human being.
5.4 A Promising Account of Metz’s Concept of Human Dignity

Metz’s formulation of sub-Saharan notion of human dignity is grounded on the capacity for communal relationship. For instance, he argues that according to his African-based theory of dignity, “human beings have dignity roughly in virtue of a substantial capacity for communal relationship, a view that contrasts with the characteristically Western view that internal or non-internal properties of rationality or autonomy constitute our dignity” (see Metz, 2012b: 234; Metz, 2011a: 544). Metz has taken heed of the fact that some people will have used their capacity for communal relationship to a greater degree than others. However, Metz argues that “it is not the exercise of the capacity that matters for dignity, but rather the capacity itself” (Metz, 2011a: 544).

Metz decided to set aside more variable and hierarchical senses of dignity, “according to which those who have accomplished much in life, such as elders may be said to have a more dignified existence than others” (Metz, 2012b: 236). For instance, the general sub-Saharan views concerning human worth is about participation in the world of vital forces. Tempels (1959:30-32) puts this participation in the community in terms of life force, where Life force in this perspective is hierarchical; with animate beings having a greater life force than inanimate ones, human beings having the greater life force than the plants and the animals, while ancestors are considered to have more life force than human beings, and God being the source of all life force. Tempels (1959:30-32) further argues that “Bantu people should acquire life, strength or vital force, each being has been endowed by God with a certain force, capable of strengthening the vital energy of the strongest being of all creation.”
Kasenene (1994: 141) also argues that human society is organized on the basis of vital force: life growth, life influence and life rank. This structure must be protected, and individuals are good in so far as they fulfill their duties to promote and protect the vital force within the community, according to their particular rank. This argument illustrate clearly that Kasenene does not recognize equal dignity to all human beings because people have it according to their particular ranks.

On the other hand, Menkiti (1984: 173-174) argues that “a man has to acquire the status of person given by community and has to reach by his behavior for social status that gives personhood.” Menkiti’s argument on the worth of human beings is more extrinsic rather than intrinsic because his notion of dignity is given to human beings by the community. I do not see where Menkiti will classify the dignity of the profoundly mentally disabled people due to the fact that their mental incapacitations disallow them to reflect on their actions. Thirdly, if dignity is something at which individuals could fail, it implies that the profoundly mentally disabled people have already failed to attain it because they cannot properly incorporate themselves in their communities.

Menkiti’s notions of ‘human worth and incorporation’ are very vague in a sense that they do not explain as to when and how one may know when the person has attained the status of human worth. The quandary issue on Menkiti’s claim is that he sees elderly people to be more capable of attaining the status of human worth than others. The point is that there are elderly people who are known within their societies to have access to the mysterious powers, make life full of uncertainties with unpredictable wickedness and evil and are dangerous to other human beings.
Nevertheless, Metz did not identify the notion of dignity with the notion of *ubuntu* or with the vital force. For him, meritorious actions play a major part in the notion of *ubuntu* because they help a person to enhance his/her status of personhood. Gaie (2007: 33) also argues that “to say that a person is a person through other persons is to endorse the aim of becoming a complete person or of having exhibited *ubuntu* to a superlative degree. Unethical actions diminish one’s status of personhood while moral actions enhance one’s personhood.” For Metz (2010a: 84) *ubuntu* implies that an action is wrong insofar as it fails to honor relationships in which people share a way of life and care for one another’s quality of life, and especially to the extent that it esteems division and ill will. On this issue of personhood, Tutu also argues that:

> When we want to give high praise to someone in sub-Saharan morality we say; Hey: so-and-so has ubuntu. Then you are generous, you are hospitable, you are friendly and caring and compassionate. Anger, resentment, lust for revenge, even success through aggressive competitiveness, are corrosive of this good (1999: 31-35).

The above mentioned attributes give an individual the status on personhood which is acquired in the communal life which is different from the way people possess dignity. However, for Metz (2012b: 234-235) human beings have dignity by virtue of their capacity for community, understood as the combination of identifying with others and exhibiting solidarity with them. Just like in Kantian perspectives, human beings possess dignity by virtue of having the capacity for autonomy and rationality. It should be noted that people do not have more of a dignity by exercising their autonomy than others, but what matters is the autonomous capacity that they have. “To identify with each other is largely for people to think of themselves as members of the same group, that is, to conceive of themselves as a ‘we’, as for them to engage in joint projects, coordinating their behavior to realize shared ends” (Metz, 2012a: 26).
Metz (2012a: 26) on the other hand argues that it is not a person’s actual relationships with a spiritual realm that constitute his dignity, but rather his essential ability to form them with other human beings that does so. He also argues that “a person could have the ability to engage in loving or friendly relationships if she were a purely physical creature and so this view is independent of any a spiritual notion that a person’s dignity is a function of God” (2010a: 94). His form of human dignity does not emanate from the spiritual beings like God, and his approach is different from the arguments of other sub-Saharan scholars on the notion of human dignity. For instance, according to Iroegbu (2005: 448) “the dignity of life resides first in the irrepeatability of life. But above all the foundation and basis of human dignity is found on the great value that the author of life has reposed on it. God created man on his image and likeness.”

On the other hand, it should be noted that his conception of dignity is hierarchical, because Metz has analyzed the notion of human dignity in terms of superlative communal capacity to be part of loving relationship (see Metz, 2012b: 236; Metz, 2012a: 26; Metz, 2010b: 53; Metz, 2010a: 82). If it was not this hierarchy, I think Metz could have advanced the discussion on the issue of human dignity in sub-Saharan Africa, but the problem emanates from his notion of human dignity which varies incrementally in accordance with a person’s gradient behaviors or traits, such as meritorious deeds, excellent achievements or virtuous dispositions.

However, there are some similarities between Metz and Kant because the former argues that human beings possess human dignity in virtue of their capacity for loving communal relationships; while the latter argues that they do because they have the capacity for autonomy and rationality. Thus, these arguments so far do not say anything about the human dignity of the severely mentally disabled people and anencephalic children because they both lack the capacity
for loving communal relationships as well as the capacity for autonomy and rationality. The hierarchical problem of Metz’s notion of human dignity can also be seen clearly where he profoundly argues that:

The African theory does appear to entail that severely mentally incapacitated human beings and extreme psychopaths lack a dignity comparable to ours, for they are incapable of being subjects of a communal relationship. The Kantian, of course, is also committed to the view that severely mentally incapacitated human beings lack a dignity and indeed a moral status altogether (2011b: 397).

Metz’s and Kant’s dignity do not cover the dignity of the severely mentally disabled people and anencephalic children because they lack the required attributes. This means that those who are unable to exercise their autonomy and the capacity for communal relationship such as anencephalic children and the severely mentally disabled people fall below the line of dignity. The conception of dignity that has been developed by Metz is not acquired equally by all human beings because normal people possess full human dignity while the severely mentally disabled people possess a middle conception of dignity. Metz argues that:

What makes a human being worth more than other beings on the planet is roughly that they have the essential ability to love others in ways these beings cannot. While the Kantian theory is the view that persons have a superlative worth because they have the capacity for autonomy, the present ubuntu-inspired account is that they do because they have the capacity to relate to others in communal way (2011a: 544).

The above argument on the ubuntu-inspired account of human dignity is not different from the account of dignity that was formulated by Kant. For instance, Metz’s account emanates from the capacity for communal relationships and the essential ability to love others. Thus, his notion of human dignity categorically segregates the severely mentally disabled people who are incapable to exercise these capacities. In addition, Metz argues that “there is a very small percentage of human beings who utterly lack this capacity, and hence lack a dignity by the present account.
Furthermore, from the bare fact that there are probably some human beings that lack a dignity, it does not follow that one may treat them however one pleases” (2011a: 545).

This argument makes things to be clearer that Metz (2011b: 397) account of human dignity is not intrinsically embedded in human beings equally because there are some people who lack it. Metz considered those who lack dignity as the “objects for others to love them because they cannot exhibit love themselves.” It is really very challenging to draw a line of demarcation that classifies some as dignified human beings while others are considered as objects for others to love. In this research report, I am looking for a plausible and cogent account of human dignity that is able to recognize the dignity of all human beings equally (including the severely mentally disabled people). So far, even though Metz’s account is promising, it is not helping me to reach an inclusive account of human dignity for the severely mentally disabled people.
Chapter 6: An Account of Human Dignity Able to Entail Dignity for the Severely Mentally Disabled Inspired by sub-Saharan African Thought.

6.1 Introduction

In this chapter I propose an account of human dignity able to entail dignity for the severely mentally disabled people, inspired by sub-Saharan African thought. Among the sub-Saharan theorists, I found the account of dignity that was articulated by Tangwa very inclusive at all developmental stages of human beings without attaching some characters and certain attributes that ought to be possessed by human beings in order to be the bearers of dignity. This chapter specifically illustrates that the sub-Saharan account of human dignity raised by Tangwa has something to offer in the field of bioethics if it can be recognized because his account on dignity admires all human beings as the bearer of human dignity without reference to accidental attributes such as autonomy, rationality, or communal participation.

6.2 An Inclusive Account of Human Dignity by sub-Saharan African Thought

Tangwa’s formulation of personhood entails an account of human dignity that can be applied to all human beings without any segregation. Tangwa (2000: 40) suggests that in “Western thought personhood is concerned with the status of moral patients, whereas the African approach focuses on the character of a person as a moral agent.” Moral agents in this regard are responsible for morally praiseworthy or blameworthy actions. Tangwa has also discussed the distinction of personhood in relation to the concept of human dignity that has been articulated by both sub-Saharan thought and Western thought. According to Englehardt (1996:136-139) quoted in Tangwa (2000: 40) “persons are entities who are self-conscious, rational, free to choose, and in
possession of a sense of moral concern. Fetuses, infants, the profoundly mentally retarded, and the hopelessly comatose are nonpersons, having no standing in the secular moral community and falling outside of the inner sanctum of secular morality.” In addition, Englehardt also argues that:

Persons, not humans, are special……Morally competent humans have a central moral standing not possessed by human fetuses or even young children. Only persons write or read books on philosophy. It is persons who are the constituents of the secular moral community. Only persons are concerned about moral arguments and can be convinced by them. Only persons can make agreements and can be convinced by them. To choose, to make an agreement, is to be conscious of what one is doing. It requires the self-reflectivity of self-consciousness. Otherwise, there is a happening, not a doing (1996:136-139).

The above arguments of Englehardt on the notion of personhood are very hierarchical because they do not recognize the human worth of other beings such as infants, the profoundly mentally, and the fetuses. These groups of human beings are rejected by Englehardt mainly because they lack the capacity for self-consciousness, rationality, and autonomy to choose. Self-consciousness in this manner is regarded as a qualifying factor for the notion of human worth. Tangwa (2000:42) argues that “the Western conception of a person is appropriate only for the ascription of moral responsibility, rather than for the ascription of moral worth”. Thus, the Western notion of a person makes it very difficult to be applied objectively in the different developmental stages of human beings. For example, the notion of personhood that emanates from the attributes such as rationality, autonomy, and moral responsibility raises vexing issues because it disregards the human worth of other human beings. A typical example can be the severely mentally retarded people and the infants who seem to fall below the line of human worth mainly because they lack the above mentioned attributes, and hence, they can be treated with less moral consideration.
In contrast, the African notion of personhood necessitates a moral consideration for the severely disabled newborns because “the difference between a mentally retarded individual, infant or a fully self-conscious individual does not entail that such a being falls outside the inner sanctum of secular morality and should be treated with less moral consideration” (Tangwa, 2000: 42). In addition, “a human being is a human being is a human being, simply by being a human being” (Tangwa, 2000: 39). This means that in an African context the notion of human worth will always be accorded to all human entities regardless of their mental conditions or developmental stages. Tangwa also argues that “a baby/child is a baby/child, a handiwork of God” (2000: 39). This saying signifies the “unconditional acceptance of a neonate, irrespective of how it comes about, no matter how it is, no matter what it’s particularizing and individuating physical and mental attributes” (Ibid).

The defended notion of dignity in this research argues that anencephalic babies and brain damaged people have dignity that is equal to all other human beings because they are all the handiwork of God. However, there are some cases whereby extra measures ought to be taken in order to preserve a life of an anencephalic baby. In such cases, what count more are the prospects of the medication in terms of qualitative futility and quantitative futility. According to Dhai & McQuoid-Mason (2011: 127) quantitative futility is whereby the treatment is unlikely to work because it will have no or very minimal effect, i.e. it is unlikely that the treatment will produce the desired effect on the patient; while qualitative refers to when a treatment that has an effect on the patient will not necessarily benefit the patient.
The intrinsic dignity articulated by Tangwa does not vanish when an individual is in the persistent vegetative state or when the life support machines are withdrawn. The withdrawal of life support machine in this way is done mainly because the situation of the patient is irreversible and because of medical futility the patient is going through, not because the patient has lost his dignity. Both severely mentally disabled and other normal human beings possess the right to life equally. Clearly there are many other rights that the severely mentally disabled simply could not claim (rights to freedom of expression, opinion), but the right to life and respect for one’s dignity are all the same. The resuscitation of a brain damaged person is determined by the availability of medical resources and the preferences of the patient that are written in the advanced directive standard.

Tangwa’s account of human worth is not grounded in specific attributes possessed by individual humans, but rather in the mere fact of being human and being the handiwork of God. It is impossible not to acknowledge that his account relies on a basic faith claim, namely that the dignity we have is derived from being created by God. From a purely philosophical perspective, such a faith-based notion may be unacceptable to some. However, there are some theological arguments that provide plausible grounds for the idea of an intrinsic human dignity that is possessed by all humans. I turn to some of these arguments now.

Thomas Aquinas followed the definition of Boethius on the nature of person, where a person is understood as an individual substance of a rational nature. Aquinas argues that “only human beings are like God because they hold dominion over their actions and their rational nature includes relationality and personhood as well as self-dominion or freedom. This likeliness
becomes vivid inasmuch as man possesses a natural aptitude for understanding and loving other human beings” (Aquinas, 1975: 115). Building on what Aquinas writes, it is reasonable to think that human beings are just as capable of loving and having a relationship with the mentally disabled as they are with any other human beings. The parents of a mentally disabled child do not typically love such a child any less than their other children, simply because the child is not rational. Our ‘natural aptitude for understanding and loving other human beings clearly extends to those humans who do not ‘hold dominion over their actions’. The inherent dignity of all humans may have more to do with our capacity to relate to other human beings (whatever their capabilities) than with mental capacity. The historical roots of the element of dominion raised by Aquinas can also be found in (Genesis. 1:26-27) where God said “let us make man in our image and let them have dominion over other creatures.” It is not only having dominion over our actions that grants us dignity, it is also being made in God’s image. This surely entails being like God and therefore capable of loving, and relating to, even those humans who are unable to have dominion over their own actions.

For St. Augustine, a person is a substance that, in addition to having an intellect and will, possesses in its deepest reality, the capacity to relate to other persons. “The human person’s soul is nearest to God and is the most godlike by its capacity to seek and know truth, and immortality” (1996:108). The immortality of the human soul in this regard is considered to be one of the elements that give human beings human dignity because it has the capacity to know the truth and relate to other human beings. Once again, it is our capacity to relate to other persons that is significant. The dignity of humans who do not possess rationality is a function of the
ability of those who are rational to be in relationship with them just as much as with other rational beings.

Another plausible theological argument for how human beings possess human dignity is expressed by Robert Kraynak, who argues that:

Christianity goes beyond the other monotheistic religions in holding as its central article of faith the Incarnation: the belief that God became man in the person of Jesus Christ. As both the Son of God and the Son of Man, Christ lowered the divine nature to assume a human form but in so doing raised human beings. In this spirit, Christianity reaches charity or love for all mankind, from the highest to the lowest individuals in worldly terms; even the humblest may be exalted. Through these fundamental teachings, Christianity makes a powerful statement about the dignity of man (Kraynak, 2003: 81).

In becoming a human being, God affirmed the inherent dignity of all humans, demonstrating His love for even the least capable. According to Kraynak, in the same spirit, Christianity requires ‘charity and love for all mankind, from the highest to the lowest’ (Kraynak, 2003: 82). Whilst it is true that many do not believe in the Christian doctrine of the incarnation, it once again highlights the capacity of human beings to love and relate to other human beings, without regard to their capabilities.
The account of human dignity that is based on rationality and autonomy or communal participation makes it difficult for people who are severely mentally disabled to be perceived as full persons with intrinsic dignity because they lack such capacities. In addition, the argument that has been raised by Englehardt is discriminative and hierarchical. For example, he argues that “persons are entities who are self-conscious, rational, free to choose, and in possession of a sense of moral concern. Fetuses, infants, the profoundly mentally retarded, and the hopelessly comatose are nonpersons” (Englehardt, 1996:136-139 quoted in Tangwa). If all these groups are considered as nonpersons, it is obvious that for Englehardt, there would be nothing wrong in withholding treatment for the profoundly mentally retarded human beings and for using them in medical research as research objects because they do not have human worth.

The argument that is based on rationality as a source of human dignity will not perceive withholding of treatment for severely mentally disabled newborns as morally wrong. However, the African notion of personhood formulated by Tangwa is in contrast with the practice of both non-therapeutic termination of pregnancy and the withholding of treatment for severely disabled newborns because human life is sacrosanct in every stage and under any mental or physical conditions.

Consequently, Tangwa’s formulation of human dignity is more plausible than the account of both Metz and Kant. For Tangwa (2007: 453), “if any moral status or worth can be assigned to any human being, it is by virtue of the simple fact of being a human being and not by virtue of possessing any particular individual attributes or characteristics, attributes and characteristics that we gain or attain and lose at different points of our lives as humans.” In this regard, Tangwa
does not see dignity as something that emanates from certain attributes or capacity to do this or that. This difference can be seen clearly where Metz argues that human beings possess human dignity by virtue of their capacity for loving communal relationships while Kant argues that they do because they have the capacity for autonomy and rationality. Thus, these arguments so far do not say anything about the human dignity of the severely mentally disabled people and the anencephalic children because they both lack the capacity for loving communal relationships as well as the capacity for autonomy and rationality.

Therefore, if Tangwa’s account of human dignity can be incorporated in bioethics together with the arguments on incarnation process, his argument has the potential to show the priceless value of a human life through all its different developmental stages. In addition, this notion will eliminate the attributes such as rationality and autonomy, and communal participation as the cardinal foundations of the notion of human dignity. At this level Tangwa provides an account of human dignity that is plausible and attractive because his account perceives all human beings as the bearers of equal dignity.
Conclusion

This research report normatively discusses different notions of human dignity articulated by sub-Saharan African thought and Western thought with the aim of articulating and defending an attractive and plausible account of human dignity, inspired by sub-Saharan thought, that will recognize the dignity of severely mentally disabled people.

Metz articulates a very promising sub-Saharan African notion of dignity but his account does not cover the dignity of the severely mentally disabled people and anencephalic children because they lack the capacity for identity and solidarity, and so failed the Kantian perspective of human dignity which also focuses only on the exercisability of autonomy and rationality. This means that those who are unable to exercise their autonomy and the capacity for communal relationship such as anencephalic children and the severely mentally disabled people fall below the line of dignity.

In contrast, I find the account of dignity articulated by Tangwa to be very attractive and plausible because he argues that “the difference between a mentally retarded individual, infant or a fully self-conscious individual do not entail that such a being falls outside the inner sanctum of secular morality and should be treated with less moral consideration” (Tangwa, 2000: 42). In addition, “a human being is a human being is a human being, simply by being a human being who is the handiwork of God” (Tangwa, 2000: 39). This theological argument by Tangwa plays a major role in this research report because it highlights the point that God is an ultimate source of a human life which makes it sacrosanct at every stage. Hence, philosophy alone fails to articulate an account of human dignity equal to all human beings. For instance, the emphasis on rationality alone as the source of dignity discriminates those who are severely mentally disabled. As a matter of fact, there is a need to synchronize both philosophical and theological arguments for an
account of human dignity that will be inclusive. In this manner, the notion of human worth will always be accorded to all human entities regardless of their mental conditions or developmental stages. In addition, this notion will eliminate the attributes such as rationality and autonomy, and communal participation as the cardinal foundation of the notion of human dignity. At this level, Tangwa provides an account of human dignity that is plausible and attractive because his account perceives all human beings as the bearers of equal dignity. Hence, the theoretical resources for a more inclusive and attractive conception of human dignity can be found in sub-Saharan thought and this account contributes to the growing realization that African philosophy has a valuable contribution to make to the enrichment of our ethical (and particularly, bioethical) reasoning and discourse.
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