**PHILOSOPHY ABSTRACTS**

**Bioethics**

A. Lindblad, N. Lynöe, and N. Juth, *End-of-Life Decisions and the Reinvented Rule of Double Effect: A Critical Analysis*, Bioethics 28.7 (September 2014): 368–377 • The Rule of Double Effect (RDE) holds that it may be permissible to harm an individual while acting for the sake of a proportionate good, given that the harm is not an intended means to the good but merely a foreseen side-effect. Although frequently used in medical ethical reasoning, the rule has been repeatedly questioned in the past few decades. However, Daniel Sulmasy, a proponent who has done a lot of work lately defending the RDE, has recently presented a reformulated and more detailed version of the rule. Thanks to its greater precision, this reinvented RDE avoids several problems thought to plague the traditional RDE. Although an improvement compared with the traditional version, we argue that Sulmasy’s reinvented RDE will not stand closer scrutiny. Not only has the range of proper applicability narrowed significantly, but, more importantly, Sulmasy fails to establish that there is a morally relevant distinction between intended and foreseen effects. In particular, he fails to establish that there is any distinction that can account for the alleged moral difference between sedation therapy and euthanasia.

**Ethical Theory and Moral Practice**

P. Formosa and C. Mackenzie, *Nussbaum, Kant, and the Capabilities Approach to Dignity*, Ethical Theory Moral Pract 17.5 (November 2014): 875–892 • The concept of dignity plays a foundational role in the more recent versions of Martha Nussbaum’s capabilities theory. However, despite its centrality to her theory, Nussbaum’s conception of dignity remains under-theorised. In this paper we critically examine the role that dignity plays in Nussbaum’s theory by, first, developing an account of the concept of dignity and introducing a distinction between two types of dignity, status dignity and achievement dignity. Next, drawing on this account, we analyse Nussbaum’s conception of dignity and contrast it with Kant’s conception of dignity. On the basis of this comparison between Nussbaum and Kant, we highlight tensions between Nussbaum’s Aristotelianism, which is central to her conception of dignity, and her commitment to political liberalism. This leads us to conclude that Nussbaum’s claim that her conception of dignity is only a partial political conception is implausible and that her conception of dignity seems to commit her to a satisficing form of perfectionist liberalism.

P. Schaber, *Human Rights and Human Dignity: A Reply to Doris Schroeder*, Ethical Theory Moral Pract 17.1 (February 2014): 155–161 • According to Doris Schroeder, the view that human rights derive from human dignity should be rejected. She thinks that this is the case for three different reasons: the first has to do with the fact that the dominant concept of dignity is based on religious beliefs which will do no justificatory work in a secular society; the second is that the dominant secular view of dignity, which is the Kantian view, does not provide us with a justification of human rights, i.e. rights all humans have; and the third reason has to do with the fact that dignity is understood in too many different ways to provide us with a justification of human rights. It is argued in this paper that none of these reasons for separating human rights from human dignity is convincing. It is true, it will be argued, that some accounts of dignity will not be successful in justifying human rights. But there is no reason to assume that no account of human dignity is capable of doing this. In the final part of the paper a concept of human dignity is presented that could indeed provide us with a justificatory basis for human rights.
theoretical perspectives on autonomy and dignity, and also, starting from a perspective on mass media as sites of meaning production and contestation, to study the contingency of autonomy and dignity in Belgian newspaper coverage of four prominent euthanasia cases. By means of a discourse-theoretical textual analysis, this study exposes a dominant—yet contested—articulation of rational-personal autonomy and of dignity in external terms as something that can be obtained, retained or lost, rather than in terms of intrinsic human integrity. These logics of representation reflect a more general late modern dominance of liberal autonomy and of dignity as being closely connected to self-identity, but at the same time result in limited visibility of alternative ways of experiencing an autonomous and dignified death.

International Journal of Law in Context

M. Neal, Respect for Human Dignity as “Substantive Basic Norm,” Int J Law Context 10.1 (March 2014): 26–46 • The idea of ‘human dignity’ is, notoriously, as ambiguous as it is compelling. Notwithstanding the absence of any clear or settled definition of human dignity, either in the abstract or in terms of what it means in practice, it is an idea which takes pride of place in international legal documents, in judicial reasoning, and in scholarship across a range of disciplines, where it seems, particularly in recent years, to have become the focus for an explosion of academic interest and an accompanying proliferation of literature. Much of the existing literature attempts to uncover the meaning, or multiple meanings, of ‘human dignity’, focusing on the uncertainty surrounding the substance or content of the idea and trying to compose a catalogue of use-types. In this paper, my primary aim will be to address another type of uncertainty, namely uncertainty about the role, function or status within legal frameworks of the ‘dignity norm’ – the norm requiring respect for human dignity. I want to explore several possibilities: first, that the dignity norm is simply a proxy for respect for autonomy; second, that it is a right in the

Health Care Analysis

L. Van Brussel, Autonomy and Dignity: A Discussion on Contingency and Domi-
nance, Health Care Anal 22.2 (June 2014): 174–191 • With dying increasingly becoming a medicalised experience in old age, we are witnessing a shift from concern over death itself to an interest in dying ‘well’. Fierce discussions about end-of-life decision making and the permissibility of medical intervention in dying, discursively structured around the notion of a ‘good’ death, are evidence of this shift. This article focuses on ‘autonomy’ and ‘dignity’ as key signifiers in these discussions. Rather than being fully fixed and stable, both signifiers are contingent and carry a variety of meanings within different discursive projects. The article aims to distinguish the varieties of these signifiers by elaborating existing
sense that we can speak of a specific ‘right to have dignity respected’; and third, that it is a legal principle. Having problematised each of these in turn, I will contend that the function of the dignity norm is best captured by describing it as the ‘substantive basic norm’ of the legal systems wherein it appears.

**Journal of Religious Ethics**

*B. Ranganathan, Should Inherent Human Dignity Be Considered Intrinsically Heuristic?, J Relig Ethics 42.4 (December 2014): 770–775* • What are “human rights” supposed to protect? According to most human rights doctrines, including most notably the Universal Declaration of Human Rights (UDHR), human rights aim to protect “human dignity.” But what this concept amounts to and what its source is remain unclear. According to Glenn Hughes (2011), human rights theorists ought to consider human dignity as an “intrinsically heuristic concept,” whose content is partially understood but is not fully determined. In this comment, I criticize Hughes’s account. On my view, understanding inherent human dignity as an intrinsically heuristic concept tethers it to an “indeterminateness of sense,” which leaves it open to exploitation from theorists unsympathetic to the moral salience of rights and what rights are supposed to protect.

**Law and Philosophy**

*J. Kleinig and N. Evans, Human Flourishing, Human Dignity, and Human Rights, Law Philos 32.5 (September 2013): 539–564* • Rather than treating them as discrete and incommensurable ideas, we sketch some connections between human flourishing and human dignity, and link them to human rights. We contend that the metaphor of flourishing provides an illuminating aspirational framework for thinking about human development and obligations, and that the idea of human dignity is a critical element within that discussion. We conclude with some suggestions as to how these conceptions of human dignity and human flourishing might underpin and inform appeals to human rights.

**Linacre Quarterly**

*M. Cavanagh, How Should a Catholic Hospice Respond to Patients Who Choose to Voluntarily Stop Eating and Drinking in Order to Hasten Death?, Linacre Q 81.3 (August 2014): 279–285* • The practice of voluntarily stopping eating and drinking (VSED) in order to hasten death poses a unique problem for the Catholic hospice. Hospice staff may be confronted with patients already on their service who decide to pursue this option for ending their lives. Patients not on hospice service who are contemplating VSED are often advised to contact hospice for symptom palliation associated with the process of VSED. Intentionally hastening death not only violates the sanctity of human life and the *Ethical and Religious Directives* the Catholic hospice is bound to uphold, but it also runs counter to the general philosophy that hospice neither hastens nor postpones death. At the same time, hospice programs have a strong philosophy of nonabandonment of patients. This article will analyze the ethical issues from the perspective of the Catholic tradition and suggest strategies for the Catholic hospice to respond to this group of patients.

**Medical Law Review**

*R. Huxtable and A. Mullock, Voices of Discontent: Conscience, Compromise, and Assisted Dying, Med Law Rev 23.2 (Spring 2015): 242–262* • If some form of assisted dying is to be legalised, we are likely to hear voices of discontent, not least from the medical profession and some of its members, who might be expected to provide the service. The profession generally favours a position of opposition, premised on an ethic of ‘caring not killing’, which might be said to convey its ‘professional conscience’. There will, of course, also be individual conscientious objectors. In this article, we initially explore the nature and sources of conscience and we argue that conscience does merit respect. We also recognise that professionals, qua professionals, are bound to serve their patients, some of whom will want (and may be entitled to) that which their doctors do not wish to provide. Reflecting on the different values
in issue, we suggest that there is a case for principled compromise which would afford professionals a limited right to conscientiously object, while also protecting patients. We then relate these reflections to assisted dying specifically. In the absence of any definitive steer from the purported integrity of medicine, we suspect that the profession could adopt a neutral stance on this divisive issue. We nevertheless anticipate individual objections if the law does move to embrace assisted dying, and we argue that such objections should be respected, according to the terms of the compromise model we defend.

**Medicine, Health Care and Philosophy**

*R. Andorno*, *The Dual Role of Human Dignity in Bioethics*, *Med Health Care Philos* 16.4 (November 2013): 967–973 • This paper argues that some of the misunderstandings surrounding the meaning and function of the concept of human dignity in bioethics arise from a lack of distinction between two different roles that this notion plays: one as an overarching policy principle, and the other as a moral standard of patient care. While the former is a very general concept which fulfils a foundational and a guiding role of the normative framework governing biomedical issues, the latter reflects a much more concrete and context-specific understanding of the patient as a “person.” The importance of dignity as a policy principle will be described by appealing to the distinction between principles and rules as developed by some legal philosophers. The value of dignity as a standard of patient care will be illustrated with the help of concrete examples and by drawing on the taxonomies of dignity proposed by Jonathan Mann and other scholars. The overall scope of the article is to highlight this double and complementary role of human dignity in bioethics.

**Social Philosophy and Policy**

*C. Bird*, *Dignity as a Moral Concept*, *Soc Philos Policy* 30.1–2 (January 2013): 150–176 • Although dignity figures prominently in modern ethical discourse, and in the writings of moral and political philosophers writing today, we still lack a clear account of how the concept of dignity might be implicated in various forms of moral reasoning. This essay tries to make progress on two fronts. First, it attempts to clarify the possible roles the concept of dignity might play in moral discourse, with particular reference to Hart’s distinction between positive and critical morality. Second, it offers a new typology of dignity concepts and mobilizes it to, on the one hand, criticize some familiar construals of “human dignity” and, on the other, advertise the possible virtues of an unfamiliar way of thinking about dignity as a moral concept.