

# Human Dignity and the Manipulation of the Sense of Happiness

From the Viewpoint of Bioethics and Philosophy of Life

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## Abstract

If our sense of happiness is closely connected to brain functions, it might become possible to manipulate our brain in a much more refined and effective way than current methods allow. In this paper I will make some remarks on the manipulation of the sense of happiness and illuminate the relationship between human dignity and happiness. The President's Council on Bioethics discusses this topic in the 2003 report *Beyond Therapy*, and concludes that the use of SSRIs might make us "feel happy for no good reason at all, or happy even when there remains much in one's life to be truly unhappy about." I will extend their line of thought through two thought experiments. In the first, a "perfect happiness" drug is given to a person, and in the second a happiness device with an on/off switch is placed inside a person. The first case leads us to conclude that a life with dignity means a life free from domination by the sense of happiness and the sense of unhappiness. The second case leads us to conclude that a life with dignity requires substantive freedom to choose unhappiness. At the end of this paper, I present a new interpretation of "human dignity," that is, "a life with dignity means a life in which we are able to explore our own life, equipped with both happiness and unhappiness, without regret, through relationships with others, without being exploited by the desires of anyone, and without being dominated by our own desires."

## 1. Introduction

Happiness has long been regarded as one of the highest goals in human life. If our sense of happiness is closely connected to brain functions, future methods may allow us to control happiness through refined, effective brain manipulation.<sup>1</sup> Can we regard such happiness as true happiness? In this paper I will make some remarks on the manipulation of the sense of happiness and illuminate the relationship between human dignity and happiness.

Philosophers have attributed two aspects to happiness: subjective happiness and objective happiness. Most of us tend to interpret happiness as a subjective

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<sup>1</sup> Recent developments in imaging technologies applied to human brains have discovered the correlation between the actions of drugs in the brain and their effects on inner mental states, for example, drug-induced euphoria. See Fowler et al. (2007).

mental state, or a sense of happiness. We can see a typical example of this line of thought in J. S. Mill's *Utilitarianism*:

By happiness is intended pleasure, and the absence of pain; by unhappiness, pain, and the privation of pleasure.<sup>2</sup>

Mill describes happiness as an inner mental state defined by pleasure or pain. What he means here is the sense of happiness. In contrast, Aristotle and other philosophers argue that happiness consists not only of inner states, but also of outer contexts which are shaped by our relationships with loved ones, our career, lucky events in our lives, etc. Aristotle writes in *Nicomachean Ethics* that "happiness . . . is something final and self-sufficient, and is the end of action."<sup>3</sup> And he concludes:

Why then should we not say that he is happy who is active in accordance with complete virtue and is sufficiently equipped with external goods, not for some chance period but throughout a complete life?<sup>4</sup>

According to Aristotle, happiness (*eudaimonia*) is "action itself" that is in accordance with complete virtue throughout a complete life, and the sense of happiness (pleasure) is an accompaniment to this action.<sup>5</sup>

In this paper I am going to shed light on subjective happiness, that is to say, the sense of happiness, because when we use the word "happiness" today we mean the sense of happiness, in most cases, and because it is considered to be the sense of happiness that could be influenced by brain manipulations.<sup>6</sup>

## **2. A Thought Experiment on a Happiness Drug**

The President's Council on Bioethics's 2003 report *Beyond Therapy* includes an extensive discussion of the morality of mood-improvement drugs such as SSRIs (Selective Serotonin Reuptake Inhibitors). The report argues that while

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<sup>2</sup> Mill (1972), p.7.

<sup>3</sup> Aristotle (1941), p.942 (1097b:20).

<sup>4</sup> Ibid., p.948 (1101a:15).

<sup>5</sup> Ibid., p.945 (1099a:10-20).

<sup>6</sup> At the end of this paper, readers may notice that the author's idea of happiness is rather close to that of Aristotle.

SSRIs can help patients live a better life by inducing calm, providing a background of well-being, and changing personality,<sup>7</sup> such drugs create some fundamental ethical problems. First, one might come to “feel happy for no good reason at all, or happy even when there remains much in one’s life to be truly unhappy about.”<sup>8</sup> Second, “SSRIs may generally dull our capacity to feel [psychic pain], rendering us less capable of experiencing and learning from misfortune or tragedy or empathizing with the miseries of others.”<sup>9</sup> And third, those drugs “might shrink our capacity for true human flourishing.”<sup>10</sup> To conclude, the report recommends those drugs be “sparingly” used so that we “are able to feel joy at joyous events and sadness at sad ones.”<sup>11</sup>

The Council’s argument was made from the perspective of conservative or communitarian ethics, and it has been harshly criticized by proponents of technological advances as being overly sentimental. I do not think such criticisms are completely off the mark; however, their report was stimulating for me because it contained an interesting and fundamental discussion about why the extreme pursuit of a sense of happiness should be restrained. This can be found particularly where the report talks about feeling happy for no good reason at all, and about feeling joy at joyous events and sadness at sad ones.

In order to further develop their argument, here I would like to make a thought experiment. Suppose we have a perfect happiness drug without any side effects, and, having taken that drug, the user is filled with a sense of happiness for a couple of days regardless of his or her experiences. Imagine a parent is walking on the street with his or her little child. Suddenly a runaway car crushes the child to death. The parent becomes severely shocked and panicked. The ambulance crew checks out the parent’s mental condition and lets the parent take a perfect happiness drug. The heart of the parent soon becomes filled with a sense of happiness. The parent says, “Today my child was killed, but how happy I am now!” and smiles back to the crew.

Although the parent claims he/she is happy, we would all agree that something strange is happening. This is a typical example of *Beyond Therapy*’s case in which a person feels “happy when there remains much in one’s life to be truly unhappy about.” I believe this case is problematic because the parent is

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<sup>7</sup> President’s Council on Bioethics (2003), p.250.

<sup>8</sup> Ibid., p.255.

<sup>9</sup> Ibid., p.259.

<sup>10</sup> Ibid., p.260.

<sup>11</sup> Ibid., p.265.

totally under the control of a perfect happiness drug and is deprived of his/her “freedom to feel unhappiness” at such a sad event. Even in this situation the parent may still have a rational capacity to judge that, for ordinary people, this situation would be a tragedy, but since the parent’s emotion is dominated by a feeling of happiness caused by the drug, there are no choices but to keep on enjoying happiness for a couple of days. The parent might hope to continue to take the drug every other day to experience everlasting, drug-induced happiness and avoid the harsh realities she would normally be faced with.

### **3. Human Dignity and the Sense of Happiness**

Don C. Des Jarlais, while talking about “externally induced pleasure,” writes that the Puritan tradition includes “the belief that the pleasure will be so intense that the individual will not be able to control the desire to repeat the sensation and will become enslaved to it.”<sup>12</sup> Can this kind of enslavement actually be found in the case of “externally induced happiness” described above? I argue “yes.”

Immanuel Kant clearly distinguishes “the principle of morality” from “the principle of happiness” and gives the former the first priority. Allen Wood interprets Kant’s idea of happiness as a combination of “pleasure, contentment with one’s state and desire-satisfaction.”<sup>13</sup> According to my interpretation of Kant, the state of drug-induced happiness should not be considered a primary end for humans because it lacks a fundamental moral duty, the duty to cultivate one’s own perfection.<sup>14</sup>

Let us take another example. Imagine that a woman who has been forcibly injected with a perfect happiness drug is raped, or a man who has been forcibly injected with a drug is tortured. The most brutal of human deeds are being forced on them, but during those periods they feel tremendous happiness caused by the drug. In these cases no one would say, “They are happy, so there is no

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<sup>12</sup> Don C. Des Jarlais (2000), p.336.

<sup>13</sup> Wood (2001), p.267. Kant defines happiness as “satisfaction with one’s state, so long as one is assured of its lasting.” (Kant (1996), p.151). Kant regards the pursuit of happiness as a typical example of human inclinations when it is pursued for oneself. On the contrary, he thinks that the pursuit of the happiness of others should be our duty and end as far as it does not override others’ autonomy.

<sup>14</sup> Kant (1996), p.154. This is a very important point because from ancient times many philosophers have thought that true happiness ought to contain some morality. Wood says that “classical theories typically identify either happiness itself or its dominant component with either the possession or exercise of moral virtue.” (Wood (2011), p.262).

problem.” Most people would feel that an extraordinary humiliation is being committed against them. In these cases they are deprived of their “freedom to feel unhappiness,” and they are deprived of something that cannot be described except by the term “human dignity” in exchange for drug-induced happiness.<sup>15</sup>

Leon R. Kass suggests that when we are in a state of drug-induced euphoria we are deprived of “human dignity,” but he does not clarify the relationship between human dignity and happiness.<sup>16</sup> If my intuition is correct, the central problem of drug-induced happiness lies in the deprivation of human dignity in exchange for happiness. Then, what is human dignity?<sup>17</sup>

It is Kant who examined human dignity most deeply in terms of philosophy. Kant defines dignity as “an absolute inner worth” that exists inside every rational person, and no one is allowed to destroy it. According to Kant, we have the duty to pay mutual respect to each other’s human dignity. We must not deprive others of the inner freedom that is the endowment of every rational person.<sup>18</sup>

[A human being’s duty] consists, therefore, in a prohibition against depriving himself of the *prerogative* of a moral being, that of acting in accordance with principles, that is, inner freedom, and so making himself a plaything of the mere inclinations and hence a thing.<sup>19</sup>

Kant says that one’s duty to oneself consists in a prohibition against making oneself a plaything of mere inclinations. This is a truly persuasive argument regarding human dignity, because the essence of human dignity must be considered to be never to deal with a person as a thing. Thus, it seems that the domination of a person by drug-induced happiness should be regarded as a clear violation of human dignity, because it is equal to debasing a person to a

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<sup>15</sup> We will have to explore why this should be considered something that cannot be described except the term “human dignity.” Although I present my idea of “human dignity” at the end of this paper, this problem remains yet to be solved. This is a subject of my future research.

<sup>16</sup> Kass (2006). Kass (2008).

<sup>17</sup> Adam Schulman writes that the concept of human dignity has at least four historical sources: classical antiquity, Biblical religion, Kantian moral philosophy, and 20<sup>th</sup>-century constitutions and international declarations. Schulman (2008), pp.6-15.

<sup>18</sup> Kant (1996), p.186. “... for as a person (*homo noumenon*) he is not to be valued merely as a means to the ends of others or even to his own ends, but as an end in himself, that is, he possesses a dignity (an absolute inner worth) by which he exacts respect for himself from all other rational beings in the world.”

<sup>19</sup> Kant (1996), p.175. *Italic in the original text.*

plaything of inclinations. Hence, in the above case, human dignity in Kant's sense is considered to have been taken from them in exchange for a sense of happiness induced by a drug.

Let us go on further. In the above case, those people are deprived of the "freedom to feel unhappiness" and are degraded to a plaything of mere inclinations; hence, they are considered to be devoid of "human dignity." This means that a life with dignity necessarily requires that one's "freedom to feel unhappiness" be totally guaranteed in one's actual life. "A life with dignity" means a life that is not dominated by the sense of happiness.

A life with dignity has two characteristics:

First, as has already been discussed above, a life with dignity is free from domination by a sense of happiness, regardless of whether or not it is acquired by means of drugs. Moreover, a life with dignity should also be free from domination by our own strong desire to experience that kind of happiness. The former domination comes from the outside and the latter originates from inside oneself. Although mentioning the latter desires might sound too ascetic in the case of tobacco or alcohol, I believe one important essence of a life with dignity should exist here.

Second, a life with dignity is free from domination by the sense of unhappiness.<sup>20</sup> This idea is more familiar to us than the first. A life with dignity should be free from the domination of negative thoughts about one's existence or one's own value. People sometimes fall victim to this kind of self-negation when experiencing such hardships as severe and repeated abuse, the death of loved ones, or devastating disasters. In these cases, human dignity means the belief that whatever their suffering and hardships, all human beings have a possibility to escape from domination by the sense of unhappiness and to regain the sense of self-affirmation at some point in their future life. Hence it might be allowed to use SSRIs to medically support this recovery process for a limited period of time, paying special attention to the danger of domination by a sense of happiness. We share the same conclusion with the President's Council Report on this point.

I would like to make a close examination of this issue. In the thought experiment discussed before, the heart of a person who was in the depths of

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<sup>20</sup> The relationship between the sense of unhappiness and the sense of self-negation has yet to be discussed. The same is true of the relationship between the sense of happiness and the sense of self-affirmation.

despair is filled with a sense of happiness caused by a perfect happiness drug. As a result, a drug-induced happiness dominates the person, and he/she is deprived of a life with dignity. Then what should we think about giving that person another drug that is not as strong as a perfect happiness drug, removing despair and the sense of unhappiness from the person, and creating a mental state that is kept away from both unhappiness and happiness?

My answer is that such medication has both an affirmative aspect and a negative aspect that need further examination. With regard to the former, a person who was dominated by despair and the sense of unhappiness becomes able to escape from that mental state and to begin an effort to regain the sense of self-affirmation. If such medication can provide the person with an opportunity to explore his/her life with a sense of affirmation, it should be considered good news. This is not deprivation of human dignity, because it enables that person to escape from the domination of the sense of unhappiness. Hence, I do not claim that the use of existing psychoactive drugs such as SSRIs immediately deprives us of human dignity, or that its use ought to be prohibited. What I raise an alarm over is the use of a hypothetical perfect happiness drug that could fill our heart with complete happiness, and what I have done so far has been a philosophical investigation of the relationship between human dignity and the manipulation of the sense of happiness, using a perfect happiness drug as an example.

The negative aspect that needs further examination concerns the dependency of drug users on that imperfect happiness drug. Once refraining from using that drug, that person would fall into the depths of despair and unhappiness again. This shows that the person cannot stand on his/her own legs without depending upon the medication. This leads us to the question whether this should really be considered a life with dignity. I am going to think about this at the end of the paper.

From our discussion so far, I conclude that one important aspect of human dignity can be explained in relation to the sense of happiness and unhappiness. A life with dignity means a life free from the domination of both the sense of happiness and the sense of unhappiness.

We could even go on to argue that a life with dignity means a life in which the author of one's own life is never dominated by the desires of outside people or by desires inside one's own body and mind. And a life with dignity as interpreted above can serve as a firm ground on which one can survive one's whole life with self-affirmation and without regret, whatever else may be

brutally destroyed. (I once called it “the central axis.”<sup>21</sup>) To summarize, a life with dignity means a life free from domination by the sense of happiness or unhappiness and free from domination by any kinds of desire inside and outside oneself; in other words, a life through which we can keep away from domination by the sense of happiness, the sense of unhappiness, or desires. Here, Kantian ideas seem to meet Asian Buddhist traditions.<sup>22</sup>

I agree with Kant that humans have an inevitable inclination to promote our own happiness. We must remember that we live in a pleasure-seeking civilization, urged on by advanced scientific technologies that did not exist in Kant’s time. In such a civilization what we really have to accomplish is not to pursue the promotion of happiness by increasing the amount of pleasure, but to pursue a life with dignity that is not controlled by our desire to seek pleasure and a sense of happiness.<sup>23</sup>

Some might argue that people ought to have the freedom to choose a life dominated by a sense of happiness, even if it is achieved through happiness drugs. This is an argument in favor of the freedom to choose a life deprived of human dignity.<sup>24</sup> Some might further ask, “What is ‘wrong’ with drug-induced happiness if that state of mind can last indefinitely without any side effects and without any harm to others? You may say it is a life deprived of human dignity, but I prefer a life filled with continuous happiness.”

I am inclined to say yes to this argument because I believe we have a right to do foolish things insofar as it does not harm others. At the same time, ironically, this reminds me of J.S. Mill: “It is better to be a human being dissatisfied than a pig satisfied; better to be Socrates dissatisfied than a fool satisfied.”<sup>25</sup> Mill would probably comment that the above choice has to be guaranteed as freedom but it does not lead to a superior life.

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<sup>21</sup> Morioka (2003, 2005).

<sup>22</sup> These desires I have just mentioned include desires for a variety of enhancements, so the ultimate freedom in the age of enhancement is the freedom of being liberated from the obsessive desire for enhancement. This is again where contemporary bioethics meets Buddhist thoughts.

<sup>23</sup> This sentiment is also discussed from a different angle in my book *Painless Civilization*. In this book I called our pleasure-seeking civilization “painless civilization.” The problem of desire discussed above is very important for our discussion, however, it goes beyond the scope of this paper; hence I would like to leave it to our future research.

<sup>24</sup> However, although “the freedom to choose a life dominated by a sense of happiness” seems similar to “the freedom to feel unhappiness,” there is a significant difference between them in that, while the former is exercised to escape from a life with dignity, the latter is exercised to acquire it against the domination of the sense of happiness.

<sup>25</sup> Mill (1972), p.10.

My argument resembles that of conservative bioethics because both stress the importance of human dignity in the discussion of bioethics. However, with regard to freedom, conservative bioethicists would be reluctant to agree with me in terms of my discussions of the freedom to choose a life dominated by the sense of happiness and the freedom to become unhappy.

#### **4. A Thought Experiment on a Happiness Device**

So far I have presupposed that “having the freedom to feel unhappiness” and “being free from domination by a sense of happiness” mean the same thing in our context, but is this correct? Here I would like to make another thought experiment. Imagine that a small device that can achieve the same effect as a perfect happiness drug is placed inside the human brain. The person has a switch on his/her hand, and when this person turns on the switch he/she is forcibly filled with a sense of happiness, and when this person turns off the switch he/she comes back to a normal mental state. We can say this person has the freedom to turn the switch both on and off, that is to say, freedom to experience a sense of machine-made happiness and freedom to stop experiencing it.

What happens when this person turns on the switch when raped or tortured? After turning it on, this person is suddenly filled with tremendous happiness, and the happiness is so great that this person might never come to think of turning off the switch. The person might hope to keep enjoying machine-made happiness forever, and might never intend to come back to the original mental state. In this case, this person maintains a freedom to turn it off, but he/she never wishes to exercise that freedom.<sup>26</sup> We could say in this case that this person suffers from a kind of addiction to this device.

In the case of a perfect happiness drug, the person is forced to experience drug-induced happiness and has no alternative but to continue experiencing it for a couple of days. However, in the case of a happiness device, the person has the freedom to turn off the switch and escape from machine-made happiness anytime, so the situation looks completely different.

I am inclined to think that in the latter case, although the person has a “formal freedom” to turn off the switch, he/she is under the domination of overwhelming machine-made happiness, and therefore is deprived of a

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<sup>26</sup> In addition to this case we should imagine other cases in which the person simply turns on the switch in normal settings. I would like to discuss it in another paper.

“substantive freedom” to turn it off; hence, the person is considered to be deprived of human dignity. The former is the case in which both freedom and human dignity are taken away, and the latter is the case in which “formal freedom” exists but “substantive freedom” and “human dignity” are taken away.

This analysis suggests that in order to protect our human dignity it is necessary to be “free from domination by a sense of happiness,” and that in order to be free from its domination, not only “having a formal freedom to feel unhappiness” but also “having a substantive freedom to feel unhappiness” ought to be guaranteed. What would Kant think about this? Let us cite his argument again: “[A human being’s duty] consists, therefore, in a prohibition against depriving himself of the prerogative of a moral being, that of acting in accordance with principles, that is, inner freedom, and so making himself a plaything of the mere inclinations and hence a thing.” Reading his words, it seems to me that he regards the inner freedom to act in accordance with principles not just as formal freedom but also as substantive freedom. Therefore I suspect that Kant would also claim that in order to protect human dignity “substantive freedom to feel unhappiness” ought to be guaranteed.

Let us further examine the cases in which there exists formal freedom but not substantive freedom. In the second thought experiment, a freedom both to switch on and off was given to the person. However, once the person turns the switch on, he/she is forced to be in a situation in which he/she is never going to turn the switch off again. Here we have a strange system that works in such a way that only the ON button is always going to be chosen, although every time there remains the other alternative. In this system the switch and the human brain are directly connected. This is a system in which, before turning it on, the formal freedom to choose whether to switch on or off is being given to the person, but once it is turned on, the substantive freedom to switch off is lost to that person forever.

The most similar phenomenon to this system would be “addiction.” Taking the example of tobacco, a person who has never experienced it has a substantive freedom to choose whether or not to begin to smoke. However, once beginning to smoke and getting addicted to tobacco, that person loses the substantive freedom to quit smoking through his/her own efforts. Actually, tobacco has the function of producing pleasure substances in the brain; it looks similar to the happiness drug in the first thought experiment. A heavy smoker lights cigarettes one after another incessantly. This is just like continually turning on the switch

of a happiness device. The most perfectly working machine in this way would be a happiness device such as that presented in our second thought experiment. I would like to call a system in which the substantive freedom to turn off the switch is lost after turning it on an “addictive system.” The problem of the relationship between “domination by the sense of happiness caused by drugs or devices” and “human dignity” is closely connected with the question “What is an addictive system?”

An addictive system has an imperfect stage and a perfect stage. The imperfect stage is a stage in which a person sometimes wants to escape from the addiction but is unable to find a way to do that. It is just like the case in which a person wants to quit smoking but cannot. On the other hand, the perfect stage is one in which a person in addiction never thinks of escaping from his/her condition anymore. It is just like the case in which a person never thinks of quitting tobacco, whatever bad effects he/she might suffer from. A perfect happiness drug or a happiness device has the capacity to lead people to this stage immediately.

I have previously discussed the possibility of giving a person a drug that is not as strong as a perfect happiness drug, which removes despair and the sense of unhappiness from the person, and creates a mental state that is kept away from both unhappiness and happiness. In that discussion I have pointed out that there is a negative aspect that needs further examination, and this negative aspect is the problem of addiction. A person who has been keeping away from continuous unhappiness thanks to drugs might fall into the depths of despair again after using up the medication. Thinking of such devastation, that person would probably become unable to dispense with the medication, and as a result, would effectively become addicted to it. What should we think about this?

A life that is dominated by the sense of unhappiness or self-negation is never a life with dignity.<sup>27</sup> It is not wrong to escape from such a mental state by using drugs. Of course, we have to say that a person suffers from addiction to a drug if his/her mental state of being kept away from both unhappiness and happiness cannot be maintained without it. Nevertheless, in this case, thanks to the drug, that person is given the capability to proceed to live his/her whole life without regret; hence, this addiction is not considered to deprive him/her of human dignity. My conclusion is that this is nothing but an addiction, but human dignity

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<sup>27</sup> However, we should keep in mind that a life without dignity does not lose any of its value as a human life. I will discuss this topic in another paper.

is protected in this case.

Then what about replacing this drug with a perfect happiness drug and putting that person under the domination of the sense of happiness? I do not think it is a life with dignity, because that person is under the control of the sense of happiness, has no alternative but to affirm the status quo, and loses the motivation to explore his/her own life filled with ups and downs without regret. *A life with dignity means a life in which we are able to explore our own life, equipped with both happiness and unhappiness, without regret, through relationships with others, without being exploited by the desires of anyone, and without being dominated by our own desires.* This is the idea of “human dignity” I have found after examining Kant’s idea of dignity and the manipulation of the sense of happiness.

In this paper I started with Kant’s idea of human dignity, and through the examination of a happiness drug and a happiness device, I have discovered a new idea of human dignity just mentioned above. By this, I think, we have reached a solid ground on which we can think about “human dignity” in the age of biotechnology in a way a little different from Kant.

## **5. Conclusion**

As a conclusion, I would like to write the following things. First, “human dignity” can be defined as being free from the domination of the sense of happiness, the sense of unhappiness, or desires. Second, with regard to happiness caused by drugs or devices, 1) we do not have to reject it if it can save people from the depths of despair and help create the ground on which they can live their own life without regret, and 2) we have to reject it if the happiness caused by drugs or devices dominates our hearts. A human completely filled with happiness appears to be in the greatest fortune at first sight, but to be filled with the sense of happiness to the extent that the person cannot turn off the switch, overwhelmed by tremendous happiness, is nothing but the theft of human dignity from that person. I believe one of the reasons why we have a vague anxiety about the development of happiness drugs is that we intuitively anticipate that such a kind of disappearance of human dignity will be inevitably awaiting us in the future of advanced biotechnology.

I would like also to stress that the topic discussed in this paper is one of the central issues in the philosophy of life as a discipline that we have proposed

since the establishment of *Journal of Philosophy of Life* in 2011.<sup>28</sup> The relationship between happiness and human dignity in the age of advanced technology would not be able to be fully investigated without the comprehensive perspective that is given by the discipline of philosophy of life. It is time to create in contemporary philosophy a new research field, the philosophy of life.<sup>29</sup>

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<sup>28</sup> [www.philosophyoflife.org](http://www.philosophyoflife.org)

<sup>29</sup> With regard to the philosophy of life as a discipline, please visit the website of *Journal of Philosophy of Life* ([www.philosophyoflife.org](http://www.philosophyoflife.org)) or my website on the philosophy of life ([www.lifestudies.org](http://www.lifestudies.org)).

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