What does it mean to be human?

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 For centuries people have asked themselves, “What does it mean to be human?” Every discipline has its own definition of what they believe it means to be human. The idea of “what does it means to be human?” is an important and relevant topic of interest due to the simple fact that we are all human beings and yet this has been asked for so many years. The purpose of this review is to define what it means to be human. This will be done by analyzing the several works that we have looked at throughout the course thus far and the annotations that I have supplied for each corresponding reading work. Furthermore, I will be incorporating different disciplines to define what it means to be human.

 Let us begin by looking back to the work of Aristotle who is known for his philosophical work. Aristotle believed that the goals humans set in their lives, serve for the purpose of happiness. In his Nichomachean Ethics: Book One (350 B.C.E.), Aristotle talks about the actions that humans take. He believes that every action a human completes is aimed to accomplish some sense of good. Although the action that gets completed can be anything, the ultimate goals of our actions are to achieve happiness. He makes a point that everyone has their own sense of what makes them happy. When explaining what makes people happy, he gives an example saying, “With health when he is ill, with wealth when he is poor…” We can see with what Aristotle is arguing is that what humans seek is essentially to better themselves. In the example he provides, one would attempt to better themselves if they are sick so that they are no longer sick; in the example of being poor, one would better themselves by obtaining wealth.

 The second work that we can look at that we can see that what makes people happy varies from one individual to another is the article by Leland (2005) titled, “Did Descartes Doom Terri Schiavo?” In this article, Leland explains to us how one person’s school of thought, Descartes, could have possibly influenced how a person’s life ended. In the article, the scenario is explained that Ms. Schiavo had been declared brain dead but was on life-sustaining treatment in the form of mechanical feedings. The decision to continue the feedings was fought for by her parents but was against her husband’s decision and what he stated was against Ms. Schiavo’s self-proclaimed wishes before being in the situation. The purpose of mechanical life-sustaining treatment was an effort to prolong one’s life in the event the person’s life could no longer continue on its own. This also could be seen as a way to improve a human’s life by assisting their bodily functions past their limits. However, what Descartes argued that life, which can be seen as being human, is not just about the biological, but is more about the consciousness and our ability to make our own decisions. Nevertheless, what Descartes argument would mean is that Ms. Schiavo, who could no longer make her own decisions, was no longer a human. Ms. Schiavo had made a conscious decision that she would not want life-sustaining treatment if there was no guarantee of life. My argument here, in essence, is that Ms. Schiavo wanted to make sure she “lived” her life as best as possible, without the equipment if she would not regain consciousness.

 Next, let us look at the work by Skloot (2010) in The Immortal Life of Henrietta Lacks. During the class, we had to annotate part one and part two. Skloot tells the story of Henrietta Lacks and her family, by switching time periods. In one chapter she tells the story of what Henrietta lived, and in the next chapter, she switches to a different time period of her trying to get into contact with the family so that she could tell Henrietta’s story. Skloot begins the story by describing how she first became to know of Henrietta. She gives a back story of how she would wonder whom the woman was in the picture hanging on her wall. She mentioned that she first heard about Henrietta during a science course, in which the professor brought up HeLa and how her cells were used to make many advancements within the sciences. We learn that Henrietta was a woman who had a severe form of cervical cancer. Before diagnosis, Henrietta felt something was wrong. She had felt a knot in her lower abdomen and would show her close female family. Eventually, Henrietta performs her own cervical exam and realizes that something is definitely not right and decides to seek medical assistance. Henrietta was diagnosed and treated at John Hopkins Hospital, due to the fact that it was the only location that would treat people of color and provided services for those who were indigent; Henrietta was both. Initially, Henrietta had downplayed the whole situation as she, and her doctors were unaware just how aggressive her cancer was. She had decided to not notify her family believing she would end up all right in the end, and to keep her family from worrying and maintaining her family’s dynamics. Eventually, the treatments began to take a toll on Henrietta’s health. Within weeks Henrietta began to get the side effects of the internal radium treatments she was receiving. Although these treatments were beginning to feel as if it were diminishing her lifeline, Henrietta started to make the necessary adjustments so that she may continue to receive treatment. In this aspect of Henrietta’s willingness to fight cancer and come out on top, we can deduce that what she aimed for was an improved standard of living. She knew that what she had was cancer, and without treatment, it would lead to death. But Henrietta sought medical treatment so that she could improve her life. She sought a better outcome for her husband, her sons, and daughters, but most importantly, for herself. Unfortunately, towards the end of part one, we learn that after it seemed that Henrietta was in remission, her disease came back quickly and more aggressively. The doctors deemed it incurable and there was nothing left to do but provide hospice care. As the disease progressed and tumors began to arise all over her body and internal organs, she began to feel so much pain. The doctors would try to improve her status by providing pain management, but to no avail. On another note, we learn that her doctors had also harvested her cervical cells so that they can analyze it and would later become what is known as the HeLa factory. Gey was the name of the researcher who wanted to study the cells.

 Within part two of the book, which entails after Henrietta’s untimely death, we are informed about the autopsy that was performed on Henrietta. Gey, the researcher, had insisted on performing the autopsy, to which Day, Henrietta’s husband had initially declined but later accepted. The true purpose of Gey’s intention for performing the autopsy was so that he could harvest cells from different body parts and organs from Henrietta. Although this is considered unethical today, for the time period, there were no actual laws and standards to stop this from happening, just recommendations. However, Gey did this with the intention of making immortal cells, and he succeeded. He formed the HeLa factory and was mass producing Henrietta Lacks’ cells, named HeLa after her. And though his method is seen as unethical, the outcome of having harvested the cells led to the creation of the polio vaccine during the polio crisis, her cells were also sent to space to see how they are affected and led to many positive outcomes with other diseases such as leukemia and helped develop several medical treatments. The unethical harvesting of HeLa cells led to many scientific improvements in such a short time period since everyone wanted to get a hold of the immortal cells that Gey would talk about.

 In another instance, we learn about another doctor who performed unethical experiments. He wondered if working with HeLa cells could be contagious and infect the people in close proximity to it with cancer. He figured it could easily happen since people breathed the air around HeLa, ate their lunches next to HeLa, but did not consider whether or not it could just as well give them cancer. He set out to study the effects of HeLa on people and set out to find volunteers. He quickly got volunteers from within the Ohio State Penitentiary. The inmates who had volunteered were well aware of what the process would be. One inmate stated he felt remorseful for his past actions and hoped that by volunteering, he would balance the scale and make up for what he had done. The study was done by injecting the cancer cells into the arm to observe what would happen. The researchers noted that, after injecting the subjects with the cancer cells, tumors would eventually grow on the arms of the inmates, but it would eventually go away on its own. After several injections, researchers noticed that the length of time it took for the tumors to diminish would decrease with each injection. Furthermore, this study also studied the effects of injecting the cancer cells into patients who already had cancer but did not inform them of the procedure. He withheld informing them it was cancer cells because he believed that people have ignorance of the term cancer and he would not be able to properly conduct his experiment if he informed them of the research. When it became clear what he was doing, many other doctors and researchers did not want to support what he was doing and refused to take part. Soon, it became a requirement to obtain informed consent and to have human test subjects it would require ethical board approval. Within this context of the book, we see that both the inmates who voluntarily signed up to take part in the study, as well as the experimental researcher, were looking for ways to improve human life. The inmates had hoped that some good can come out of being experimented on with cancer cells. They hoped some new innovative information was discovered because they were remorseful of their past criminal actions and hoped to balance their Karma. In respect to the experimental researcher, Chester Southam had intentionally conducted the experiments in the hopes to uncover new information. He had also expected to find some link that would cause some people to be more susceptible to cancer. Although the inmates can be seen as brave for volunteering for the experiments, and yet the researchers as unethical and illegal for conducting it, it is no doubt that they all set out to come out with innovative information that would improve the standard of human living.

 Another work we can analyze, which is peer-reviewed, is the work by Hughes, Gudmundsdottir & Davies (2007) in their research, “Everyday struggling to survive: experiences of the urban poor living with advanced cancer.” They had initially set out to find out what the experience of dignity meant to the urban poor who had advanced cancer. However, they had to modify their research question due to the fact that the subjects could not comprehend what was being asked of them, and instead, the researchers modified their purpose to now explore and describe the lives of the urban poor with cancer. What they found throughout most instances was that, although the subjects all had a life of hardship- some losing family at an early age, some having been addicted to drugs and alcohol, and almost half having experienced homelessness- was that the subjects upon being diagnosed with advanced cancer had all fought to live on. Some did not even want to discuss or think about the possibility of death, and some of the subjects actually had died during the course of this research. All subjects were aware of the severity of their disease and despite their prognosis, fought to receive treatment. In one instance, a woman continued to work as a nanny where she received room and board and got her medical expenses covered, just so that she can have a place and her treatments. The results of the research were that most patients felt embarrassed and did not want to talk about the possibility of death, but rather how they can live and survive with cancer. In this instance, we see that even though the subjects did not have a favorable life before having been diagnosed, they aimed to revamp their lives after being informed of their advanced cancer disease.

 Another work we can look at is, “Insatiability and Crisis: Using interdisciplinarity to understand (and denaturalize) contemporary humans” by Macdonald and Panayotakis (n.d.). Their work focused on the disciplines of sociology and economics. Using an interdisciplinary approach, they wanted to see if they could get the students to critically think what does it mean to be human. They state in their paper that human behavior can be defined by the term neoclassical economics. Macdonald and Panayotakis (n.d.) define that as, “Insatiable wants and desires, and an attempt to attain efficient outcomes in the face of scarce resources.” Essentially, it means that humans attempt to enrich their way of living using what is available to them. They state that because of this behavior, humans tend to make rational decisions based on the available information. In essence, humans would rationalize and aim to make the maximum benefits with the lowest costs, which would be considered the best outcome. They argue that this is learned behavior due to the world we currently live in. What they describe is that humans want to improve their life while sacrificing less.

 The last work we can look at, also peer-reviewed, is by Davidson & McGrew (2005). This is an anthropological study on how “culture” within the first humans were different from those of other animals and how that enabled us to become evolutionarily different. What their studies found was that among apes and the early humans, we had a common ancestor. This enabled them to have similar tool-making techniques. They also found that the other animals, chimpanzees, bonobos, and orangutans also had some form of culture. They observed that these animals exhibit factors of social learning and teaching. They observed how these animals processed tools by analyzing and interpreting the archaeological sites where they would find the evidence that these apes had processed and made tools. They compared it to the archaeological sites of where they saw evidence of the first human’s tool-making sites and found that what made them different to the other animals, was that the early humans had a sense of self-awareness. The evidence suggested that the early humans would make tools at certain locations and leave, but when other humans would encounter that site, they were aware that tools were made there, and would notice remains of the tools lying around and would come up with ways to use these remains as new tools. In this regard, it is evident that since the time of early humans, humans strive for improvement. They would make tools to make their daily lives easier, whether it was for food or shelter. Furthermore, they would even make new tools out of the leftovers at their tool-making sites.

 In conclusion, by analyzing the texts we have covered throughout the course, along with the two peer-reviewed journals, we can draw a conclusion on what it means to be human. In all instances of the literary works, there was some indication of somebody striving for innovation or improvements to human life. This was in the form of self-improvement, or better yet, improvement as a species. Every day there are new innovations that aim to improve outcomes for humans such as a new device, a new medication, a new procedure. That is why there is no doubt that, as the evidence suggests, what it means to be human means to strive for life innovation and improvements. I do believe that continued work and research into this topic in the foreseeable future would support that this is what it means to be human.

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