Seeking the Everyday Meaning of Autonomy in Neurologic Disorders

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The Socratic aphorism that the unexamined life is not worth living and dictums like “Know thyself” remind us of the centrality of self-understanding in the history of philosophical reflections on autonomy. These traditional concerns with autonomy may seem far removed from the neurologic impairments to which Joel Anderson and Warren Lux draw our attention. Nonetheless, Anderson and Lux have provided an important discussion that links the traditional philosophical commitment to self-knowledge with an account that parses these concepts in the context of neurologic disorders. Theirs is a potentially productive approach for improving our understanding of autonomy, one that Emilio Mordini and I advocated in a paper entitled, “Autonomy and the Ethics of Neurosurgery” (Agich and Mordini 1998, 54). We argued that the focus of bioethics on issues such as informed consent misses the more challenging and potentially fruitful collaboration that neurosurgery and neurology affords for advancing the philosophical understanding of the conditions of autonomy. The challenge is in the integration of concepts used in one context of meaning with other domains of discourse. A good example of the challenges embedded in pursuing this kind of project can be found in Anderson and Lux’s discussion of the concept of accurate self-assessment.

Anderson and Lux argue that accurate self-assessment is a requirement for one to act autonomously. On first hearing, this phrase sounds unsurprising and consistent with standard approaches that assume a higher degree of awareness of one’s capacities. Their characterization, however, derives from their observations of cases involving severe neurologic impairments, which point to more basic processes than the reflective awareness or knowledge that is often assumed. Paradoxically, the language of accurate self-assessment sounds remarkably like an intellectual function. It appears to fall squarely within the traditional philosophical tendency to define autonomy in terms of ego-centered, intellectual functions involving relatively high-level reflective capacities. Despite their terminology, Anderson and Lux stress that their account requires a type of reflexivity that is not the same as self-conscious reflection understood in the highest degree. They stress this in a number of places. For example, they see the neurologic concept of executive function as involving basic feedback mechanisms that are “broadly isomorphic with capacities associ-
ated with autonomy;” these include anticipation, goal seeking, planning, initiation, sequencing, monitoring, error detection, self-correction, as well as initiation of novel responses, a clearly heterogeneous set of capacities (Anderson and Lux 2004, 285). These capacities are not capacities of the “mind,” but basic neurologic functions of the intact embodied agent who is actively engaged in the world. Thus, these concepts capture or express a practical (or clinical) as opposed to a theoretical understanding of the basic conditions or capacities defining autonomy. Similarly, their talk of “self-assessment” does not need to be understood as explicit or conscious; rather, it typically operates in the background (Anderson and Lux 2004). They term this character of self-assessment “mundane” (Anderson and Lux 2004, 289), which strikes me as exactly the right way to characterize this key feature of autonomy (Agich 1995). Their phenomenological and clinically based insights are quite sound, but the reader struggles with a terminology that seems to run in a different direction. To be sure, they stress that they intend their language of “autonomy” and “accurate self-assessment” to involve ordinary, background, and everyday functions that do not require high levels or significant capacities for reflective self-assessment, but their very insistence underscores the problem inherent in this terminology.

Anderson and Lux argue that the capacity for self-assessment has a task-relative dimension that requires a degree of “accuracy.” They characterize accuracy in a way that may promote rather than forestall misunderstanding. They state that “an adequate degree of precision” (281) is required in such assessment. For example, in assessing whether one is able to jump a hurdle, they say “one must accurately estimate not only the strength of one’s legs but also the height of the hurdle” (Anderson and Lux 2004, 281). They further characterize their account of “accuracy” as involving an epistemological externalism, which might lead some readers to assume that their account requires an “objective” estimation or procedure for taking the measure of the strength of one’s legs or the height of the hurdle. Surely, such objective data would not provide a hurdler with what is needed to assess his capacity for engaging in the action of running hurdles, because such objective data would not provide a hurdler with the practical or experiential information about the action that is needed to clear a hurdle at any given time. Experienced hurdlers have certainly established that their legs are objectively strong enough and they are knowledgeable about the standard height of hurdles as measured objectively in inches or centimeters; yet, in running hurdles, this objective knowledge does not provide what is needed for an accurate self-assessment in the running of hurdles. Hurdlers need to be able to “sense” or “know” in a practical or actional way as they approach the hurdle or as they extend the leg that they are going to clear the hurdle this particular time. They need a capacity that is an engaged assessment of their ability as they perform the action. Although they may have an established or developed ability, one that has been repeatedly validated with external corroboration, they need to be able to enact this ability if they are to make the next leap. The self-assessment thus needs to be not only accurate, but one that operates in the performance of the action itself. Such a capacity is also at work when hurdlers come up short or miss a hurdle; no hurdler ever clears all hurdles. The hurdler needs the capacity to adjust to the present situation, to be able to correct in mid-jump or in the next jump, to compensate for the various factors that might cause a failure of effort. Thus, something must be involved besides a purely “external” assessment that could be performed outside of the action if accurate self-assessment is to be a practical capacity that operates in the everyday world of action. That something points to the operative nature of the capacity with respect to the action in question. It must operate in and through the practical action and not just in reflection. It thus cannot really be external to the action, but must constitute the very sense or meaning of the action that is undertaken. It is furthermore quite misleading to suggest that the self-assessments required are “best expressed probabilistically” (Anderson and Lux 2004, 281), because this suggests further that the assessment involves some sort of calculative func-
tioning, which seems what is obviously not involved.

Their account of epistemological externalism (Anderson and Lux 2004, 281–282) involves the view that self-assessment must correspond to “the facts” rather than what is subjectively reasonable for one to believe about one’s abilities. It is clear to see why they want to avoid a subjective standard, but insisting on a correspondence to “facts” is misleading. The “facts” that they point to are, in fact, an idealization that should not be mistaken for the underlying phenomena. The facts do not have epistemological priority, but are a construct to explain when self-assessment attains “accuracy.” “Facts” do not guarantee accuracy in any independent sense, but accurate self-assessment contributes to a realization of how matters stand. Of course, we commonly refer to this corroboration as being factual, but an independent set of “facts” is not necessary for this usage to be meaningful. This point is important, because self-assessment is neither purely subjective—a position they clearly reject—nor purely objective—a position that one could easily impute to them.

In the cases they discuss, accurate self-assessment operates on a performative and not an epistemic level. It does admit an intersubjective openness to some degree, which is why talk of “facts” seems so natural. Intersubjectivity also explains why the feedback mechanism that is required involves more than a subjective or private learning from experience. Others can usually see and understand what a person is trying to do and may be in a better position to determine the reasons for failures. Because other persons can be in a position to understand the nature of the practical task and the processes that underlie the performance of these tasks, including the neurologic ones that Anderson and Lux discuss, they can offer advice to the agent. The agent who is learning is usually able to gain a performance edge from the evidence offered by others, but not all agents can “see” the point of explanations or advice. Their inability to see points to the capacity that usually lies hidden in the everyday actions. The case of John amply illustrates this point.

John suffers not only from a persistently mistaken assessment of his visual capacity, but from an impairment in being able to integrate the information about his disability provided by others. He relied on an erroneous self-assessment that was grounded both in his blindness and his unawareness of his visual deficit. Patients like John are not able to integrate the information provided by others about their incapacities; thus, they lack not only the capacity of sight, but the awareness of their own deficiency. Thus, accurate self-assessment involves more than a “subjective” experience, which in the case of John was erroneous; it involves the ability to integrate the experience and advice of others, because the world of experience does not occur in an “objective” space, but is essentially defined intersubjectively. This means that autonomy involves an essential connection with others. The possibility of corroboration of one’s capacity for sight is essential to the meaning of being sighted, namely, one sees the world that others share and not some purely subjective reality. The liberal ideal of the autonomous agent as an independent rational decision maker must give way to seeing autonomy as involving such relationships with others. Some of these relations can thwart or even destroy the conditions for autonomy, paternalistic actions such as coercion, for example, but others support and enhance autonomy. Because other persons, for example, in education, can contribute to the accuracy of self-assessment, they are able to affect the very conditions of autonomy.

These points are offered as clarifications and not criticisms. If I read Anderson and Lux’s account correctly, they offer a nuanced view of autonomy by capitalizing on some cases of fundamental derangements associated with serious neurologic injury. These injuries provide insight into core components of autonomy across the broad spectrum of the manifestations of autonomy in everyday experience. Paying attention to these kinds of derangement can help us to understand that autonomy is primarily a practical and everyday phenomenon. Based on an understanding of the functional capacities underlying the everyday expressions of autonomy, one might build a more workable theory of autonomy. The concept of actual autonomy (O’Neill 1984) is
one that might be employed to lay out the sense in which autonomous expressions and engagements within the everyday world might be identified in individuals who suffer significant cognitive and memory impairments (Agich 2003, 83–124). Actual autonomy refers to the ways that autonomy is expressed in the everyday social world of action; it provides the common basis for all talk about autonomy that philosophical theories need to accommodate. Ultimately, it is the everyday experience of autonomy that provides the material for philosophical and moral analysis.

This discussion of Anderson and Lux’s exposition is not intended as a criticism, but an attempt to clarify their descriptions. Choosing the best terminology is a challenge for anyone wanting to link philosophical understandings of autonomy with basic neurologic processes and their derangements. Some of the potential confusions that I have discussed arise when Anderson and Lux tie the treatment of clinical cases involving basic impairments in autonomy-enabling capacities to the central debates and theoretical discussions of autonomy as a moral concept. They are right in saying that the capacities impaired in the clinical cases bear on the broader questions of autonomy, but the terminology used may mislead and the linkage is hardly established in any direct way by these allusions. I strongly support their project of highlighting the relevance of neurologic phenomena for understanding autonomy in its everyday presentations, but in drawing connections with philosophical and moral concepts of autonomy, they may foster misunderstanding. The difficult question is how are the connections to be drawn and in which direction should we look for the foundational meaning? Should the emphasis be placed on the moral or philosophical concepts and meanings of autonomy or on the allegedly more basic neurologic capacities that underlie autonomy in its everyday manifestations?

Anderson and Lux, in effect, answer this question by stressing that their view of the degree of accuracy required depends upon the “practical purposes” for which the self-assessment is undertaken. This is the essential point. They view the neurologic processes as underlying these practical purposes, but these practical purposes must be understood primarily in actional rather than rational or intellectual terms, at least in the cases they present, so the choice of terminology here is critical if the phenomena in question are to be appropriately displayed. Accurate self-assessment should thus be conceptualized as a complex process that involves “feedback” mechanisms or reflexivities, which are primarily actional or practical.

References