Reviewer's report

Title: Are there relevant differences between hymen restoration in order to avoid honour-related violence and special treatment in order to avoid blood-transfusion for Jehovah's Witnesses?

Version: 2
Date: 27 October 2014

Reviewer: Brian Earp

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To Whom It May Concern:

This is a well-written paper that will contribute productively to the bioethical debate concerning the two practices under discussion. I recommend publication of the paper, upon minor revision by the authors. See my notes as follows.

Signed,

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Major Compulsory Revisions
None.

Minor Essential Revisions

Title: the word “moral” should almost certainly be added to the title between “relevant” and “differences” – otherwise, we don’t know (although we suspect) along what dimension the differences are going to be analyzed.

Abstract: In the abstract, there is a grammatical ambiguity in the first sentence. It reads “...to help young females subject to honour-related threats.” However, “subject to” can mean either “under threat of” (which is the intended meaning) or “to give into” (which is obviously not meant, but which a logical way to read the sentence). So, something like “... to help young females under threat of honour-related violence” would take care of the problem.

Introduction: I would like to have seen an introduction giving an outline of the paper, or some general remarks, before getting right into the ‘background’ section. I realize that this function is served, at least partially, by the abstract – but I think that even a small paragraph of introductory material (that doesn't just repeat the abstract) would improve the reader's experience, and give a sense of
‘overview’ before jumping into the background section.

Line 30. Instead of saying “one is disgracing … oneself” the authors should say, “one is thought to be disgracing … oneself” – i.e., the authors need to be clear that they are not, themselves, endorsing the honor-culture theory, but rather describing what is perceived as being so, by (some) people in the relevant cultural contexts. This is true throughout the ‘background’ section: the authors need to go through and say what is ‘perceived’ or ‘thought to be the case’ re: the meanings (commonly) associated with sex & virginity in an honor-culture context.

Line 33: Instead of saying “it is presupposed that the young female …” the authors should say something like, “it is usually presupposed” or some such similar qualifier. This is because the authors should not homogenize the cultural groups they’re talking about: surely, there are at least some individuals from these cultural backgrounds who dissent from the dominant interpretations, reject the relevant norms, etc.

Line 35. The authors say, “since traditional honour cultures are patriarchal, focus has been on the young females rather than the males.” I’m not sure what the explanatory value is of referring to these cultures as “patriarchal” since most societies on earth could be described as patriarchal (see, e.g., Public Policy Advisory Network … 2012), and since patriarchy and honor-based norms are not necessarily linked (i.e., one can have the former without the latter, although probably not vice versa).

Line 39. Again, instead of saying “Disgrace is brought on the young women’s family,” the authors should say something like, “Disgrace is thought to be brought on the young woman’s family.” That is, they should make it clear that they are not endorsing the theory, but simply reporting on what is commonly thought to be the case, in the relevant cultural context.

Line 40. Instead of “The only way of restoring that honour might be to …” it should be: “The only way of restoring that honour is commonly thought to be …” (and so on).

Line 44. The authors say, “In today’s western society, we generally consider …” However, this is a needlessly western-centric way of setting things up; it assumes that the reader is “western” and shares the author’s values as well as cultural framework. Since we have the internet now, papers (such as this one) can be accessed/read by anyone, anywhere on the globe: more inclusive language is probably preferable. Also, the term ‘western’ is increasingly seen as being problematic. So, perhaps something like, “In ‘western’ societies, by contrast, honour-related norms are typically seen as obsolete and dysfunctional” would be better. Although it’s cumbersome, the authors might consider putting ‘western’ in single quotes (like that) throughout, just to acknowledge the scholarly controversy over the term. Up to them.

Line 47. The authors write, “Some young women adopt the habits of the host country, including sexual relations before marriage.” This is a bit
ambiguous/unclear. It’s not so much that ‘western’ societies have a ‘habit’ of premarital sex, as that they are generally more tolerant toward such sex, as a general rule (although of course, in, say, the southern United States – surely a ‘western’ country that hosts immigrants from relevant other cultures – there are widespread ‘indigenous’ honour-based cultures that use shaming to discourage premarital sex as well: e.g., certain conservative Christian groups in the “Bible Belt”). So, clearer would be something like: “Some young women adopt the attitudes and/or behaviors of the host country, including tolerance toward (or engaging in) sexual relations before marriage.” Then: “Since very few of these young females (who have engaged in premarital sex) are prepared …”

Line 51. The word ‘tighter’ should probably be in single quotes (like that) to pick it out, since it’s a somewhat crude way of referring to vaginal tightness (i.e., the young female is being described as being ‘tighter’ – when actually, it is her vaginal opening specifically, to which she should not be linguistically reduced. Putting the term ‘tighter’ in single quotes would make it clear that the authors are not engaging in such linguistic reduction themselves, but rather gesturing at the reduction being committed by those who think, e.g., the young females should be virgins at marriage.)

Line 56. The authors refer to “the official guidelines” – but what do they mean? As published by what organization? The specific issuing body should be stated, so that the reader doesn’t have to go to the references section to find out.

Line 57. I’m not sure “medically futile” makes sense here. Either one adopts a broad definition of medicine, according to which it is the sort of thing that employs ‘medical’ technologies to improve health/well-being – in which case hymenoplasty is probably not futile, since it could plausibly have this effect; or, one adopts a narrow definition of medicine, according to which it is the sort of thing that is geared toward treating disease or deformity (setting aside the obvious debate over the meaning of those terms), in which case ‘medically futile’ is still an inappropriate term, since hymenoplasty is not intended as ‘medicine’ in this sense. Now, the authors are just citing the “official guidelines” here, so I’m not saying that they are using the term improperly themselves; but it seems obvious that the “official guidelines” (if they do in fact use this term) are making a conceptual mistake. Therefore, for the authors to simply reference/cite/include this mistake without any kind of comment is less than ideal. So, either the authors need to say a bit more about what the “official guidelines” are getting at in the use of this term, perhaps in a footnote, or, if they don’t want to get bogged down in a discussion of the appropriateness (or otherwise) of the term medical futility in this particular passage, perhaps they should just use a different term (e.g., by describing the “official” stance as saying something along the lines that hymenoplasty “has no medical function” … or something like that—in which case it would be clear that the official guidelines are using a ‘narrow’ definition of medicine).

Line 58. What ‘human rights’ are being referred to here? The girls’ right not to be killed for ‘bringing shame’ upon her family? The girls’ right to have consensual sex with whomever she pleases without facing social consequences? The latter
is probably harder to defend as being a universal right. In other words, this is a somewhat facile and imprecise reference to ‘human rights,’ given well-known debates about the grounding for such rights, the scope of their applicability, etc. (e.g., Dembour, 2006). A parenthetical phrase saying what is meant/what right is being referred to, would help.

Line 87. A qualifier is needed: something like, “since he or she [typically/might/could be expected to] lose all old friends and relatives.” This is because we don’t know for sure that this will happen, and it probably doesn’t in some cases.

Line 92. This is ungrammatical. It should be something like: “The case of Jehovah’s Witnesses has actually been used as a paradigm example of …”

Line 104. The word “healthcare” should be “a healthcare professional” (or similar).

Line 144. A few general questions about this section on “need” … If the argument is supposed to be that a “need” is equally present in both cases, then, do the authors suggest that such a “need” (in the relevant sense) must be demonstrated before the operation could be considered permissible? In both cases, “the patient’s life might be threatened” is offered as the relevant problem, to which an “extraordinary intervention” might solve the problem. But in some cases, a girl’s life may not really be threatened (in that there is a meaningful chance she will actually be killed), but rather, she may be subject to harassment/shame, stopping short of murder. So, must she offer a credible case that her life really is threatened, for the moral analysis to work? By contrast, in the case of JW’s, we “know” that failure to do the transfusion (assuming other options are off the table) is life-threatening in a deterministic, physical sense. So, it’s not clear that “the patient’s life might be threatened” actually signals an equivalent risk in both cases, holding all else equal. Another point about need: the authors are using a very loose definition of this term! “Potentially having a problem, X, to which Y is (or may be) one possible solution, although there are potentially other solutions, as well” is not really enough to show that Y is “needed” on any reasonable gloss of that term. In order for Y to be considered “needed” (even on a very loose definition of ‘need’), we need to be able to rule out alternative solutions. So, I would put the section on “alternative solutions” (currently Issue 9) immediately after this section – Issue 1 – on “need” so that we can have a more meaningful sense of “need” (i.e., by having ruled out alternatives, or shown that the alternatives are equally undesirable in both cases, or whatever).

Line 145. “If a sexually active young female is unable to imitate a virgin’s signs and produce a bleeding…” needs a qualifier, something like: “If a sexually active young female is unable to imitate (what are presumed to be) a virgin’s signs …” – since, of course, one can be a virgin (i.e., not have had penetrative sex) and yet still not bleed nor have a hymen (for any number of reasons).

Line 152. In the discussion on “medical reasons,” the authors should consider making use of the much-discussed distinction between “treatment” and
“enhancement” – since, on the definition of the latter term recently proposed by Earp, Sandberg, Kahane, and Savulescu (2014), both hymenoplasty and bloodless transfusions could be considered ethically-justifiable uses of medical technology -- even if they are not geared toward ‘treating’ a recognized disease – since in both cases, they would likely improve the person’s well-being (all else being equal), given relevant circumstances.

Line 176. Since an empirical claim is being made – i.e., that hymen restoration is “fairly risk free” – a citation should be given for this.

Line 180. I don’t see how the “prestigiousness” of the intervention is even potentially morally relevant. I think this section should be deleted, unless the authors have a very good reason for including it, which they should then make clear.

Line 192. I think “benefits for surgical practice” would be much clearer than “values for surgical practice” – since “values” has different meanings.

Line 210. The authors should say, “potentially life-threatening situations” instead of just “life-threatening situations” – because, in at least the hymenoplasty case, we don’t actually know that the case is life-threatening without some further evidence.

Line 219. In this section, some mention of the concept of “assent” should probably be made. There are many cases in which a young person is considered capable of providing age-appropriate “assent” to some intervention, even if s/he can’t strictly provide “consent” (because the cognitive demands for assent are thought to be less than for consent).

Line 230. More needs to said about “autonomy-empowering” treatment. First, what is it, exactly – or, roughly, how does it work? Second, would such ‘treatment’ actually mitigate the threat-to-life in cases in which that threat exists?

Line 233. More needs to be said about why a differential appraisal of the “reprehensibleness” of the relevant norms gives us ‘no reason’ to treat the patients differently. ‘No reason’ is a very strong claim! So: if someone wants to do something on behalf of norms that are considered especially reprehensible, and if we think that by allowing that action, we reinforce that norm, then we may indeed have a good reason to fail to endorse that action. This is as compared to another action, resting on different norms – and norms that are seen, perhaps justifiably, as being less ‘reprehensible’ – whose endorsement/facilitation, therefore, would reinforce a less problematic norm. So, unless we can show either that the norms are, in fact, equally problematic (‘reprehensible’), or that our allowing the action does not in fact reinforce the relevant norms (or etc.), then it seems to me that, at least prima facie, a different appraisal of the norms (assuming that the appraisal is grounded in some morally relevant concern) could in fact justify differential treatment. This isn’t an insurmountable problem; I’m just saying that a little more discussion of this point would be useful before moving on.
Line 235. It says, “The only way to save the JW patients is to offer the additional treatments.” But a qualifier is needed. It should be something like: “The only way to save the JW patients (without putting them at serious risk of being ostracized from their communities) is to offer the additional treatments.” Otherwise the sentence just isn’t true.

Line 242. Grammar: “as regard costs” should be “as regards costs.”

Line 248. The discussion here seems a bit facile. One argument that some people might make is that honor-related norms are especially “reprehensible” because they are sexist; and since JW norms are not sexist (at least not the ones related to blood transfusion), they are less problematic (at least along this dimension). So, they might say, if doing the relevant intervention serves to reinforce the relevant norm, it is actually worse to do the intervention in the case of the more problematic norm, i.e., the one that, in addition to whatever other problems it has, is also sexist. Now, again, I don’t think this is an insurmountable objection to the author’s view; I just think they need to engage with it a little bit more carefully.

Line 257. I don’t understand this sentence: “However, considerations of fairness are …” – What does it mean?

Line 263. See Earp (2014) for a recent discussion of the possibility that hymenoplasty might reinforce problematic norms and/or patriarchal structures, and how, potentially to get around this problem.

Line 271. Grammar: “against this kind of … arguments” is ungrammatical. It should be either: “this … argument” or “these … arguments” ...

Line 277. I think “hymenoplastic” should be “hymenoplasty” to make clear it is a noun.

Line 280. This discussion of JW norms seems a bit too easy. The specific norm about blood and blood transfusions is not patriarchal/sextist, and so, it’s not clear that upholding this specific norm actually does have anything to do with upholding patriarchal structures, either in practice, or in terms of “expressive” support.

Line 282. The phrase “not exactly famous for” reads as being sarcastic, and should almost certainly be changed. And, again, just because – in general – JW’s may not be committed to gender equality, doesn’t mean that the specific norm about blood transfusion is problematic, simply on account of its being one of a number of norms that are held by JW’s.

Line 282. I think the authors are right that religious norms vs. cultural norms are not quite so obviously separable as many people tend to think. In fact, a good paper making this point recently is “Cultural circumcision in EU public hospitals—an ethical discussion” by Brusa and Barilan (2009), which I think the authors should consider referring to and incorporating into their discussion in this
passage. As it stands, this section moves a little bit too quickly, and doesn’t quite give enough weight to the prevailing argument that ‘culture’ is different to ‘religion’ in a morally relevant way. Again, I don’t think the prevailing argument is very convincing, so I agree with the authors, I just think they need to expand on this point a little bit more, perhaps using the paper by Brusa and Barilan as a model.

Line 304. Once again, I think the entire discussion of “prestige” is distracting, and obviously not morally relevant. I would recommend deleting this section. The authors could pick up the conversation around line 315, about the different attitudes towards JW norms vs. honor-related norms.

Line 321. Again, the use of “our” here, makes it seem very western-centric, and needlessly exclusive. The authors shouldn’t assume that their readers are ‘western’ and share their perspective! Similarly, on line 324, “of course” should probably be deleted, and/or replaced with something like, “we believe.” I would also add “even” before “disgusting” in that line.

Line 328. Yes, JW norms – in general – might be seen as being derived from an ‘old fashioned’ and patriarchal worldview, but (1) there is nothing morally wrong with being ‘old fashioned’ (so that’s not the relevant concept here); and (2) the specific norm about blood being a form of life that shouldn’t be exchanged between bodies, while potentially irrational, is not sexist/patriarchal. So, again, I think it’s a bit too easy to suggest that ALL norms that are held by some group that is patriarchal can be seen as “upholding” patriarchy, even if the specific norm in question does not seem to be related conceptually to invidious sex-based discrimination.

Line 339. Re: the conclusion: it occurs to me that there might actually be a couple of morally-relevant differences between the two cases (if some of my above comments do in fact entail this, although they may not, if the authors have good counterarguments), but this wouldn’t necessarily mean that we shouldn’t treat the two cases the same (i.e., reject both interventions or accept both interventions). This is because it could be a balancing act: thus, while there are potentially SOME relevant differences between the two cases, it could still be true that SOME of those differences point in one direction (i.e., in favor of hymenoplasty) while others point in a different direction (i.e., in favor of JW norms), such that, on balance, the cases should still be treated equally with respect to whether we offer the intervention or not. So, all I am saying is that the authors don’t need to actually prove that there are NO relevant differences (or ONLY differences in favor of hymenoplasty) – which is a tough standard to meet – for their general conclusion to hold.

Discretionary Revisions

The title is a little long; could it be shortened to something a more concise?

Line 76. This is a non-sequitur. The previous sentence said that we were going to be turning to a case of an “extraordinary intervention” (that could be analogized
to hymenoplasty), but then the sub-heading here says, “the norms of Jehovah’s Witnesses” (which is not ‘a case’) and the first sentence of the section begins talking broadly about Jehovah’s Witnesses as a branch of Christianity (which is also not ‘a case’). It’s clear what is meant, but the sub-heading and the first sentence of this section do not follow logically from the final sentence of the previous section. Some kind of transition would be helpful.

Line 99. The word “are” should probably be added after “children” and before “taken care of” just for style/ clarity.

Line 165. The word “for” should probably be added between “and” and “other” in the phrase “… with the former and other authorities …” for logical clarity. So: “with the former and for other authorities” …

Line 176. The word “is” should probably be added between “and” and “fairly” for clarity. So: “… is an easily performed operation and is fairly risk-free.”

Line 205. In recent years, there has been a move away from considering “the medicalization of social problems” as being in and of itself a bad or problematic thing. See, e.g., Parens (2013); Earp, Sandberg, and Savulescu (2015). So, not only do the authors have the point that, if one is medicalization, so is the other, but also: even if BOTH are instances of medicalization, this may not necessarily be a moral problem (for either). The papers cited above give some relevant arguments for this view.

Line 220. On the question of autonomy and being influenced by the norms of one’s group: What if the girl actually rejects the honor-related norm? It seems important to point out that, in a lot of these cases, the girl (or woman) might not actually believe that it is wrong to have premarital sex, but may nevertheless be at risk of being murdered by her family. Is that case different from the one in which the girl actually endorses the honor-related norm (due, perhaps, to her autonomy being compromised by group pressure/indoctrination)? I suppose the same sort of reasoning could apply to the JW case: what about the case in which a JW person actually doesn’t think that blood transfusions are morally wrong, but who nevertheless is likely to be ostracized by his/her community for having the blood transfusion?

Line 239. I realize that the authors partially get into this later (when they try to say that “religious” beliefs/norms and “cultural” beliefs/norms are not obviously separable on principle), but the JW person is not just faced with “rejecting norms” of his/her community, but actually, at least potentially, giving up or rejecting an actual metaphysical belief (i.e., that blood = life) that he or she may sincerely hold. Even though this belief may seem absurd to outsiders, it seems at least potentially different from being just a “cultural norm.” On the other hand, perhaps the belief that young women should be attacked/killed in order to “restore honor” is a comparable issue: i.e., a moral-metaphysical belief that even the girl herself might sincerely hold. But then, if she does sincerely hold this belief, it is inconsistent with her own worldview to request the hymenoplasty. I’m not sure exactly what the authors should do about this point – and perhaps they should
just ignore it – but I offer it as food for thought. I just think that sincerely held beliefs vs. “cultural norms” are not quite so easily conflatable as the authors seem to think.

Line 276. I think “to deceive” should be “in deceiving” for grammatical reasons, but it’s probably discretionary.

Line 281. Grammar: “they can also be construed as an expression” should probably be “they can also be construed as being an expression” …

Line 355. The Authors’ information is given in reverse order to the actual authorship order. This should probably be synched up.

Line 368. Some of the references are in Title Case Like This, whereas others are in Sentence case like this (i.e., with only the first letter of the first word capitalized). This needs to be made consistent throughout.

References


Earp, B. D., Sandberg, A., Kahane, G., & Savulescu, J. (2014). When is diminishment a form of enhancement? Rethinking the enhancement debate in biomedical ethics. Frontiers in systems neuroscience, 8.


Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests:

I declare that I have no competing interests.