Right to Life, Right to Die

Yaşama Hakki, Ölme Hakki

KATERYNA RASSUDINA
Taras Shevchenko National University of Kyiv

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Abstract: The article deals with the problem of the right to die as the derivative of the right to life. The author uses problematic, systematic, interdisciplinary, and descriptive approaches when she is looking for answers to such questions: 1) does any life have value? 2) whose claims to live should modern society guarantee? 3) is it appropriate to speak not only of the right to life but also of the right to die? For this purpose, the utilitarian position of P. Singer, J. McMahan, and M. Tooley is mostly analyzed. Several representatives of the “sanctity of life” conception become their opponents. The author concludes that 1) they speak about the right to die when they question life as an absolute or ontic good; 2) an alternative may be to distinguish between the levels of rights and to respect the persons, not their manifestations. Eventually, a different understanding of values is at the core of the disagreement.

Keywords: Consciousness, dignity, good, person, right to life, right to die.
Introduction

Despite many attempts of both natural sciences and religious and philosophical teachings in the 21st century, the death and the suffering remain for us a factor of fear, despair and loss of meaning. Undoubtedly, it is considered as evil, and life as good is its opposite. At first glance, this state of affairs seems to be natural. Therefore, the efforts of medicine to extend life look like a great example of service to humankind. Moreover, due to technological advances, considerable progress has been made in this area (the invention of cardiopulmonary resuscitation, artificial nutrition and so on). However, it is precisely these achievements that raised a number of new questions for contemporary moral philosophers: 1) whether life extension always serves the person; 2) are there situations where, on the contrary, rapid death would be better consistent with personal dignity; 3) should the right to life be paired with the right to die?

Many philosophers have compared the right to life, the right to die, explored the origin of the problem, and the argumentation of all parties involved in the debates. On the one hand, it is necessary to list those who, referring to the special value of human life, interpret the death as an undeniable evil and, accordingly, consider the right to die as absurd. There are T. Biesaga, A. Brown, H. Ciach, L.R. Kass, W. May, W. Ochmanski, E.D. Pellegrino, P.J. Riga, T. Shannon, J. Walter. Their opponents refer to the fact that persons can believe that their lives are worthless, and therefore they must have the right to choose the opposite, death. Among them, we should mention W. Chanska, J. Harris, H. Kuhse, J. McMahan, P. Singer, M. Tooley.

The purpose of this article is to demonstrate the paradox in modern bioethics, when the fundamentality of the right to life is called into question, and new attempts are made to justify the persons’ right to freely choose their own death. So, the author analyzes the answers to such questions: 1) does any life have value; 2) whose claims to life should modern society guarantee; 3) is it appropriate to speak not only of the right to life but also of the right to die?

The Life as a Good and Its Value

The rapid development of medical technologies in the 20th and 21st
centuries led, on the one hand, to the saving of the lives and the improving human well-being, and, on the other, to the increasing controversies about the life as a good and value. When physicians did not deal with, in fact, hopeless cases, seriously ill or crippled persons suffered from severe pain, but died shortly after their disease began. It was not such a life that was evil for them, but sickness and death, and the treatment, which brought at least some relief, was considered beneficence.

Nowadays, some medicines help patients to return to a fulfilling life, and therefore their expediency does not raise any objections. However, sometimes therapy or surgery extends life only for a short time, causing constant pain, dependence, or even unconsciousness. This could not but affect the very perception of the life and the death.

It seems that the development of medical technology is only a pretext for the introduction of new ideas, and the real reasons are changes in the understanding of human being and the moral laws. The notion of value as a subjective and relative quality given to us by society, or rather, by rationality, as well as autonomy as a foundation of dignity, rise and ourselves to new fears. For our contemporaries, total loss of consciousness and, most importantly, even partial loss of autonomy equals deprivation of dignity. The utilitarian notion of happiness as maximizing pleasure and minimizing suffering, or as the realization of desires, excludes the severely ill patients from the list of contenders for it. Their lives lose value in the eyes of society and in their own eyes. Therefore, the achievements of medicine turn into the cause of many evils.

The debate over whether each life is valuable, or just a life of a certain quality, personal and dignified, has served as a catalyst for discussing whether to continue a “wrongful life” and whether or not a “mercy killing” would be a better alternative. It was thought that the continuation of a purely biological life does not serve the persons’ good, but on the contrary, debases them (more precisely, individuals that are no longer persons because they do not show the necessary features).

Those thinkers who identify the person not with the manifestations of certain characteristics express the opposite position, above all, but with their basis, which does not disappear even when we do not empirically fix them. The life, even biological, is the condition of existence for
such a basis-person, an ontic good, a real value inherent in every human being (Walter, 2005, 218). After all, only living persons are able to realize all those autonomous and rational aims that they set for themselves.

The Problem of the Right to Life

In the modern world, the thesis that the person has the right to life is indisputable. However, we have already noted that personality is interpreted differently by different thinkers. Some of them identify it with the manifestation of certain features (broadly: with consciousness and/or its content), others – with the basis of such features (substance). Accordingly, representatives of the first group may claim that not everyone is a person, first of all, when they say about unborn baby or even an infant, or a patient in a vegetative state. By proving that certain individuals are not persons, philosophers deny them the right to life (it means, for example, the legalization of voluntary euthanasia or abortion). They also seek the very basis of the right to life, which is more or less related to personal status. Otherwise, we can talk about the basis of the value of life, because we are not obliged to protect something that has no value.

The American philosopher Michael Tooley (1972, 37-65) suggests that the persons as the subjects of moral responsibility can have the right to those things only that they are able to realize. Thus, Tooley maintains a position of preference utilitarianism that requires maximization of satisfaction of any individual’s actual desire. Unconscious persons have no such desires that is why they are inferior. It means not only that their rights can be ignored, but also that their lives have little or no value at all.

A well-known Australian moral philosopher, Peter Singer, shares this view. In his opinion, a life lacking in consciousness or more precisely in its content has no any value. Describing the fate of coma patients or patients in vegetative state, (it is often problematic to wake up from such a state); Singer considers them similar to newborns with defects. Just like infants, they are unconscious, irrational and dependent. However, the decisive criterion that determines their worthlessness is the lack of experience. “If they have no experiences at all, and can never have any again, their lives have no intrinsic value, – the philosopher (1999, 192) writes. – Their life’s journey has come to an end”. The situation of patients in a
vegetative state, but conscious, seems him to be a little better, however, if in their personal experience, pleasure prevails over suffering, or their life preferences can be satisfied.

Some thinkers, such as Fred Feldman, call one more reason to consider life as valuable and to give the right to it. They talk about a high investment of individuals in their own existence. For example, an eight-month-old fetus has invested to his development at least energy, but has not yet had the opportunity to take advantage of this work, and therefore he has the right to life, and his abortion is inadmissible (Feldman, 1992, 203). We can find criticism of this approach in the text of Feldman’s utilitarian colleague, Jeff McMahan. The American moral philosopher (2002, 178) writes that mentioned investments:

...are things that happen to the fetus rather than things it does. Because they are not purposeful activities, and because the fetus is not even aware of it when they are occurring, these processes are no part of the biography, which has, indeed, yet to begin.

Instead, Polish researcher Weronika Chańska (2009, 177-178) claims that only independence (the ability to create and reach one’s own ideal of a good life) is the basis on which the persons can build their lives as values. In other cases, the extension of a persons’ existence can only be justified by the will of their loved one. Moreover, the life of an individual who is not even able to realize the lack of meaning in it seems to be wrongful.

For many researchers, senseless or wrongful life of some individuals is a reason to deprive them of the right to life, and besides for their own good. The very concept of human rights is directly linked to the recognition of the specific dignity of the person; and this dignity is frequently associated with a high level of rationality. It seems that the right to life is guaranteed only to those ones who are “worthy” of this right, and, on the contrary, it would be better to deprive of life those individuals whose state degrades the dignity. Let us recall Tooley’s thesis. Only those persons have the right to life who are able to understand what the extension of their lives is. A coma patient or an embryo whose brain has not yet formed are not aware of themselves; and even if we tried to put ourselves in their shoes to evaluate the best choice for them, we would not be able to do it, since there is no “better” prospect for them, they do not have
both preferences and priorities. There are, however, cases of the sleeping or temporarily unconscious persons who also have no actual desires and goals. To avoid accusations of deprivation them of the right to life (the simplest rejection to the researches who consider persons’ rights as dependent of their desires and needs), Tooley clarifies his position. In Singer's words, he states that “possession of a right must in some way be linked with the capacity to have the relevant desires, if not with having the actual desires themselves” (Singer, 1999, 96).

Singer in turn denies the right to life those persons (mainly babies) who have mental or physical disabilities, because of the lack of – in the first case – the value of unconscious existence, and the fact that – in the second case – an unhappy life is not worth continuing (Ciach, 2003, 162). In both cases, he makes the right to life dependent on the “perfection” of a particular life, as if our right to property would depend on our claim to diamonds or a villa in Miami Beach, and not vice versa: we would have right to these benefits only because we have the inalienable right to dispose of any legally acquired property.

Those who are not fortunate and do not meet the standards of society put the label “a life which is not worth living”. We cannot but agree with Wladyslaw Ochmanski’s (2007, 49) remark:

In the light of the utilitarian grounds, we jump to the wrong conclusions, for example, that the right to life does not belong to the person by nature and dignity, but depends on the will of society, on the so-called “experts”. This position is the barbaric practices’ reminiscent of domination of the strong over the weak.

One way or another, most attempts to justify the thesis that the right to life belongs only to the elect – those who have consciousness, autonomy, ambitions, etc., do not take into account the important difference. We refer here to William E. May's distinction between claim right and liberty right (May, 2003, 185-187). All persons and groups of persons are obliged to provide the claim right to those who have it. Undoubtedly, the right to life is a claim right. Liberty right is legitimate only if it does not violate the claim right. The latter type can include the persons’ right to dispose of property or to realize their desires, i.e. to manifest their personal features.
The Problem of the Right to Die

Therefore, for various reasons (first and foremost in view of the current notions of dignity and happiness) the persons may consider their lives as those that are not worth continuing. In this case, according to the approach of utilitarianism, to help them die is a morally good thing, since it corresponds to the desire or interest of the individuals, and helps to minimize suffering on the planet (the principle of so-called total utilitarianism).

According to Singer, the euthanasia of those who do not manifest person’s features, and therefore have neither desires and interests, nor autonomy, will meet moral standards. Precisely because they have neither desires and interests, nor autonomy, their status can be equated with the status of animals. Such individuals do not have self-awareness and cannot choose their death themselves, that is why we can perform on them involuntary euthanasia. No wonder Singer (1999, 102) claims that the killing of living creatures is evil, primarily because of the possible elimination of pleasures they could still count on in the future: “we should not cut short a pleasant life”.

Regarding the individuals, which he considers as persons, Singer prohibits the involuntary euthanasia, even if for some reason they have lost the ability to make independent judgments. As he (1999, 201) writes, “yet to make this decision one would have to be confident that one can judge when a person’s life is so bad as to be nor worth living, better than that person can judge herself. It is not clear that we are ever justified in having much confidence in our judgments about whether the life of another person is, to that person, worth living”.

Singer's summary raises the question of whether we can be sure that another person's life is worse than death that it is worse than one, which we used to call worthy. Singer himself, as well as other researchers who support the legalization of euthanasia, or advocate abortion practices as a way of reducing disabilities and related problems (e.g., W. Chańska), feels embarrassed about this kind of question. First, there is a conflict of values that they pursue, namely between respect for the freedom of the individual and the fulfillment of the minimizing of suffering principle.
For many modern people (no matter if they think in utilitarian or existentialistic way), except in some particularly difficult cases, the right to die has taken place of the right to life in the system of the most important values. From the utilitarian perspective, the desire to die must be realized to the same extent as any other desire that does not threaten the happiness of others. The counterbalance could be the possible suffering experienced by the relatives or some other persons who are afraid of this way of ending their existence. The choice to die can also be described in the terminology of preference utilitarianism, since euthanasia is the best alternative than a wrongful life. “Just as preference utilitarianism must count a desire to go on living as a reason against killing, – Singer (1999, 195) writes on this subject, – so it must count a desire to die as a reason for killing”.

Singer argues for the right to die, referring to the analogy with the generally accepted right to life (while at the same time denying this right to some human beings). However, other thinkers say, rather, about the right to dispose of person’s own life, just as we can dispose of different goods. Pretentious Joseph Fletcher was one of them. In his opinion, the persons are not obliged to live, and therefore may choose to die if their personal features are reduced or degraded (Ochmański, 2007, 33-34).

The documents of official commissions dealing with bioethical issues avoid the categorical statements that we find in the monographs of some scientists. Yet they also take into account the “spirit of the times”. Having analyzed the reports of two commissions which operate in the United States (Deciding to Forego Life-Sustaining Treatment of President’s Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research, 1983, and the Hastings Center’s Guidelines on the Termination of Life-Sustaining Treatment and the Care of the Dying, 1987), Chańska (2009, 152-158) notes that they both offer mechanisms of action in the harsh medical situations, particularly for saving lives, but none of them mentions the persons’ obligation to maintain their own existence. We emphasize here the position of the Polish researcher, which may be entirely subjective.

Of course, the persons are endowed with freedom and able to make decisions freely in every situation of their lives, including the harsh ones.
The obligation to survive may not be abided in cases where it requires too much sacrifice, e.g. unbearable costs or intolerable procedures (at the same time, medicine must try to overcome such obstacles in saving lives), or when abiding of the obligation results in neglecting other high values, e.g. in renunciation of faith, treason against the Motherland, refusal to help a neighbor. However, the emphasis on freedom to dispose of persons’ lives as if they were their property in the literal sense of the word, as well as refusal of the obligation to maintain their lives, led to the formation of an emasculated notion of life as a value. For many modern people, their lives are no longer the equivalents of the highest gifts that they can sacrifice, but they have become bargaining chips that should not be kept in the wallet if they do not provide comfort, do not help to maintain self-esteem or to achieve goals.

Dignity in Death. The Notion of Decent Death

If the persons are unable to continue a decent, in their opinion, life, an alternative of a decent death appears. This idea is not new, as is the desire to be healthy and happy. Since time immemorial, people have tried to meet a good death, free of suffering and agony, in accordance with their religious beliefs or their moral code (e.g. in the battlefield). In other words, the notion of decent death did not appear when the idea of euthanasia was spread in the 20th century and it was legalized in some countries in the 21st century.

It is true that the conditions of individuals’ dying differ as much as the conditions of their lives. Humanity commands us to care for the improvement of both. It is a good thing that modern societies that have the appropriate financial resources are seeking to improve the quality of life of their members, in particular, to improve health care, in line with our conceptions of human dignity. However, when it comes to death, the only alternative to a long and difficult process of dying is a voluntary speeding up of it.

The term “voluntary euthanasia” itself is questionable. They say about killing persons with their explicitly formulated consent, and oppose it to non-voluntary euthanasia (if they are unable to express their consent), or even involuntary one. The ideologues of voluntary euthanasia
legalizing refer, above all, to the value of autonomy of the persons that requires respect for the aspirations they freely choose and justify. However, can we talk here about rationality and freedom? Let’s look at the reasons why people choose to die. As Chańska (2009, 124-125) writes, “this desire is usually caused by unbearable pain and suffering, by complete dependence on assistance from and care by outsiders.” The decision of such a patient to die, in her opinion, deserves respect.

If I understand Chańska’s opinion correctly, the decision deserves respect because it was made autonomously. We can recognize the desire to die expressed by persons who have incurable diseases, which destroy their bodies. However, we cannot agree that their decision-making under such circumstances is independent. On the contrary, they are affected by their sufferings, fears, shame and weakness. If I for fear give my wallet to a robber, we cannot consider this action as independent, although it is quite prudent and is taken by myself. When we recognize killing as an alternative to finding a means of overcoming currently incurable diseases, pain and other problems, we do not respect the person. The analogy may be satisfying of terrorist demands in order to release the hostages. Such cases do occur, but we should not turn mistakes into rules, even if they are common.

It should be noted that Singer also takes such reproach into account. He accepts that the request for euthanasia is not always the result of an independent and reasonable decision. “And even if there is no pressure of falsification, can anyone who is ill, suffering pain, and very probably in a drugged and confused state of mind, make a rational decision about whether to live or die?” (Singer, 1999, 196). Singer, however, considers such a problem to be only technical and not moral one on the path to legalizing voluntary euthanasia.

In my opinion, the alternative to the right to die should be securing the right to life and to decent dying. It is not destroying of a “wrongful” life that corresponds to persons’ dignity, but taking care of them. Better care for the sick and especially for dying patients, for instance, in hospices, as well as anesthesia, and moral support should be a priority in the development of medicine, not a death as a “magic wand” that overcomes the problem by killing human beings.
Conclusion

The modern idea of rationality and autonomy as key values, on the one hand, and utilitarian concept of happiness, on the other, have led to changes in the perception of life and death. Nowadays, not every life is considered good, and not every violent death – to be evil. This affects, in particular, the understanding of the functions of medicine; so, the idea of euthanasia is developing. Nevertheless, we may also consider life as an ontic good. Its presence is a necessary condition for the existence and manifestation of personal characteristics.

Discussions around the right to life are based on questions about what makes life valuable. Identifying the person with consciousness leads to perceiving this value in the functions of consciousness, in filling the consciousness with content, in self-realization in the manifestations of autonomy. We find such ideas, among others, in the works of M. Tooley, P. Singer, and W. Chańska. Thus, the right to life depends on the ability of the persons to use their lives for their own needs. An alternative may be to distinguish between levels of rights where the right to life is the base for possession of any other rights, and therefore they do not infringe it.

Discussions about the right to die are based on the question of whether there are values (e.g. freedom or pleasure) for the sake of which we can and even have to sacrifice our lives. In other words, it is claimed that in some cases lives injure the dignity of the persons, and therefore should be destroyed. An alternative may be to provide the person with a comfortable, full of meaning life, on the one hand, and dying, on another, – a true manifestation of humanity.

References


Kateryna Rassudina


Anahtar Kelimeler: Bilinç, haysiyet, iyilik, insan, yaşam hakkı, ölmé hakkı.