

## Euthanasia: Should it be Lawful or Otherwise?

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The case "Euthanasia: Should it be lawful or otherwise" shows how a society grapples with changes those fall in the intersection of morality and reality of social order. This case provides a just platform to discuss this issue in today's context. It provides an option to highlight how highly acclaimed human values may lead to very different actions and therefore opposite consequences. Given this dichotomy, how does a society try to ensure that the actions fall under the ambit of accepted social norms, and therefore the consequences are moderated and accepted?

Take the case of human empathy. What if a fellow human being's empathy towards a person living in a vegetative state pursues him/her to ascertain that death is better than such a life? It is probably the same empathy that Mahatma Gandhi had towards the calf in pain that forced him to suggest death for the poor suffering animal. Obviously society did not approve that, and we witnessed a small but powerful conflict between individual morality and prevalent social norms. What if the same human empathy and love pursues another human being (or a group) to serve a person for 37 long years tirelessly, uninterrupted, and voluntarily? And with that moral right, he/she does not accept the prospect of intervened death for the sufferer. In absence of opportunistic behaviour both the persons in the above scenarios are acting out of empathy and are clearly not immoral. However, the consequences of their empathy are very opposite. How should the society grapple with these opposites?

For the sake of argument, assume the prospect of opportunistic behaviour<sup>1</sup>. The person in favour of death may be suggesting so because of possible material gain or for reducing personal inconvenience arising out of maintenance. The person(s) against death may be suggesting so because of his/her/their personal attachment and therefore unable to accept the prospect of emotional loss in case of death. Or worst, he/she/they might be doing so to gain social capital which he/she/they can leverage at opportune moment (for example: a hospital might do so for publicity). However unrealistic this prospect may sound; it is possible. In all the above scenario, clearly the patient's interest seems secondary and we may not call this moral. Nevertheless, again the consequences of the opportunistic behaviour are very opposite.

This leads us to the real problem of a society that grapples with the issues so close to morality, human frailty, and the larger context of social order. First, how does society determine a process or establish a system (e.g. law) which not only provide room for human values (such as empathy) to prosper but also reduces the risk of human frailty (such as opportunistic behaviour)? This is a problem of social optimization. Second, the problem of discretion and detection: the system also must recognise the possibility of a seemingly moral action sourced from an immoral reason (for example, ulterior motive leading to argument against death) and vice-versa. Lack of discretion in such cases may lead to social disorder in long run. Third, problem of contextuality and generalization: this is related to the problem of discretion. How does one ensure that the system (or process) considers the context of individual cases so that it remains fault-free and relevant, and at the same time is generalizable so that society considers the system to be impartial, universally applicable, and acceptable?

There are no easy answers to these questions. In fact, there are not many easy answers to the problems of life and society. Precisely that is the reason, why a case should highlight the problems, should enable discussants to appreciate different perspectives, to question them, and not essentially declare a solution to be universal. This case on Euthanasia does that beautifully.

## Note

I All the characters in this case (especially Mrs. Virani, and the KEM staff) have their points. However all the characters and their actions need scrutiny. Even the principle "right to life is sacred" needs scrutiny in this context, especially because the right is not self-determined. According to "mimamsa", one of the six philosophical lineages in India, all words have self-existence and characters of their own. They should be considered independent of the source and context as they might reveal the universal truth. In this light "right to life is sacred" is axiomatic (as considered by the Supreme Court), and if considered to be universal truth then the question of euthanasia does not arise. However, according to "Nyaya" words and their meaning are source and context specific. The same utterance by different persons may have different meanings. In this light "right to life is sacred" may not be axiomatic but may be interpreted in the context of the source. Especially, as the patient in question neither espouses this nor in a position to decipher its consequences.

If we go by "mimamsa" and accept "right to life is sacred" as universal truth, then the definition and consequence of our morality changes. Even a painful, bedridden life is moral and painless death is immoral. Therefore, despite the circumstances, euthanasia is immoral. If we go by "Nyaya" it is very important to know the motive of the person who invokes the axiom "right to life is sacred". Then the prospect of opportunistic behaviour and adverse selection - not only by the individuals but also by the institutions - arise. There may also arise a conflict between the morality of an individual and the morality of a collective, i.e. society (as seen in Mahatma Gandhi and the suffering calf case). Given the conflicting and possible opposite motive, (and also divergent interpretation of morality even though all may be right in their own context), such problems become social optimization problems where equilibrium or social order is more important than the morality itself.

## Author's Profile

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