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Euthanasia and Assisted Suicide from Confucian Moral Perspectives

Ping-cheung

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Euthanasia and Assisted Suicide from Confucian Moral Perspectives

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Abstract This essay first discusses the three major arguments in favor of euthanasia and physician-assisted-suicide in contemporary Western society, *viz.*, the arguments of mercy, preventing indignity, and individual autonomy. It then articulates both Confucian consonance and dissonance to it. The first two arguments make use of Confucian discussions on suicide whereas the last argument appeals to Confucian social-political thought. It concludes that from the Confucian moral perspectives, none of the three arguments is fully convincing.

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Keywords Euthanasia · Assisted suicide · Mercy · Indignity · Autonomy · Confucianism

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1 Euthanasia, Suicide, and Physician-Assisted-Suicide

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There has been an evolution of the concept of euthanasia. The earlier, vague concept of the term signifies a good peaceful death. Currently the meaning of the term is largely confined to “a deliberate medical intervention undertaken with the express intention of terminating a life to relieve intractable suffering” To be more precise, there are five components in this practice, all of which must be present: (1) regarding the agent and the subject of death, euthanasia is given by one person to another; (2) regarding the agent’s intention, it is to bring about a quick and painless death of the subject; (3) regarding the agent’s motive, it is solely for the best interests of the subject; (4) regarding causal proximity, what the agent does or chooses not to do directly causes the subject’s death; (5) regarding outcome, the subject dies (Draper 1998: 176).

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Some distinctions are needed before we proceed. “Active euthanasia” refers to terminating life via action, *i.e.*, causing death by commission, *e.g.*, lethal injection. “Passive euthanasia” refers to terminating life via inaction, *i.e.*, causing death by omission. An example of the latter might be a Baby Doe case, withholding food from a Down Syndrome infant, with death occurring as the direct causal consequence of this inaction. But in this case the motive might not

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be benign and the dying process is definitely not quick and painless. Though “passive euthanasia” is a coherent concept, it is rare to find it practiced.¹ Euthanasia can be further divided into 3 types: voluntary, non-voluntary, and involuntary. Since no serious scholar advocates involuntary euthanasia, and only a handful of them, the most famous of which is Peter Singer, endorse non-voluntary euthanasia (largely confined to defective newborns), this essay shall address the more commonly discussed issue of voluntary euthanasia (to be abbreviated as VE below). Currently, in serious discussion in Western societies also is the practice of physician-assisted suicide (to be abbreviated as PAS below). PAS differs from VE only in component 4 mentioned above, viz., what the agent does or chooses not to do only indirectly causes or only provides a causal factor for the subject’s death, as the subject self-administers the lethal act.

In this essay I shall analyze three major arguments in favor of VE and PAS as widely discussed in Western societies. I shall make use of movement pamphlets, court opinions, government documents, and philosophical writings. I shall then hermeneutically retrieve Confucian perspectives, with extensive use of ancient Confucian writings, to respond to these arguments. I shall identify both consonance and dissonance between the Confucian perspectives and the Western arguments. Hopefully, through such a cross-cultural dialogue our understanding of the various issues of VE and PAS can be deepened. I shall conclude that from Confucian moral perspectives none of the three arguments is fully convincing. Since the current practice of VE and PAS are absent in traditional Confucian writings, the dialogue is possible only through the mediation of Confucian discussions on suicide, which are plentiful.

2 A Confucian Ethic of Terminating One’s Life²

A distinct emphasis in early Confucian ethics is that biological life is not of the highest value, as Confucius says, “For gentlemen of purpose and men of *ren* 仁 (benevolence or supreme virtue), while it is inconceivable that they should seek to stay alive at the expense of *ren*, it may happen that they have to accept death in order to have *ren* accomplished” (*Analects* 15.9; translation modified). Likewise, Mencius explains in a famous passage:

Fish is what I want; bear’s palm is also what I want. If I cannot have both, I would rather take bear’s palm than fish. Life is what I want; *yi* 義 (justice or dutifulness) is also what I want. If I cannot have both, I would rather take *yi* than life. On the one hand, though life is what I want, there is something I want more than life. That is why I do not cling to life at all cost. On the other hand, though death is what I loathe, there is something I loathe more than death. That is why there are dangers I do not avoid.... Yet there are ways of remaining alive and ways of avoiding death to which a person will not resort. In other words, there are things a person wants more than life and there are also things he or she loathes more than death. This is an attitude not confined to the moral person but common to all persons. The moral person simply never loses it. (*Mencius* 6A10; translation modified)

¹ Current usage of the term “passive euthanasia” no longer refers to the appropriate foregoing of life-sustaining treatment.
² For an elaborate treatment of this topic, see Lo 1999a, b: 69–101 (also in May 2005: 624–641). For the fullest treatment on this topic, see Luo 2001: 5–50.

These two discourses together became the *locus classicus* of the classical Confucian view on the value of human life, and have been tremendously influential through the ages. According to this classical view and many subsequent interpretations, the preservation of our biological life is a good but not the supreme good; death is an evil but not the supreme evil. Since the cardinal moral values of *ren* and *yi* are the supreme good, it is morally wrong for one to preserve one's own life at the expense of violating *ren* and *yi*. Rather, one should sacrifice one's life, either passively or actively, in order to uphold *ren* and *yi* (*chengren quyì* 成仁取義). To act contrary to *ren* and *yi* is ethically worse than death. Hence, terminating one's life is morally permissible and even praiseworthy, if it is committed for the sake of *ren* and *yi*. In some circumstances, furthermore, terminating one's life is more than supererogatory; it is obligatory. There is a doctrine of the sanctity of moral values, but not a doctrine of the absolute sanctity of human life. Sheer living has no intrinsic moral value; one ought to live as a virtuous person does. There is no unconditional duty to preserve and continue life, but there is an unconditional duty to uphold *ren* and *yi*. For the sake of convenience, I shall summarize this classical Confucian view as Confucian Thesis I: *one should sacrifice one's life, if necessary, either passively or actively, for the sake of upholding the cardinal moral values of ren and yi.*³

There are numerous subsequent expositions of this thesis in the history of interpretation. I shall mention just one here. When the Mongols invaded China in the 13th century and were about to conquer the entire land of the Southern Song Dynasty, many generals preferred death to surrendering to "barbarians." The most famous example was WEN Tianxiang 文天祥 (1236-1282 CE), who kept a suicidal note in his pocket all the time during his capture, which began by saying, "Confucius says that one should fulfill *ren*, and Mencius says that one should adhere to *yi*." In a short poem he also wrote, "Who does not have to face death (in one way or another) since time immemorial? (The preferable way of dying is) that my heart of pure loyalty may leave a page in the annals" (*Songshi*: Biography 177). This saying became immensely popular and is known today by most Chinese.

Wen's point is that since one must die one way or another, one should die in such a way to render one's life meaningful or honorable. In other words, though death is the termination of life, dying is still part of life. "How one dies" is part of "how one lives." Hence, dying should serve life. To take charge of one's life implies to take charge of one's dying. To secure a noble and honorable life implies that one should secure a noble and honorable death. To live meaningfully implies to manage the time and circumstances of one's dying in such a way that one dies meaningfully. To insist on living out one's life to its natural limit is not in itself desirable. What matters most is not life's quantity (its length), though in itself it certainly matters, as the previously quoted Mencian saying makes clear. Rather, what matters most is its quality, to be defined morally with reference to *ren* and *yi*. In order to secure a high quality of life, in some circumstances, one has to be prepared to die, lest what is going to transpire in the prolonged life will severely reduce the quality of life (i.e., to violate *ren* and *yi*).

Both *ren* and *yi* have a narrow as well as a wide sense. In the narrow sense, as the first two of the four cardinal virtues, *ren* means benevolence, and *yi* means justice. In the wide sense, however, both words, especially when they are used together, can mean supreme virtue or morality (see Nivison 1987: 566–567). In the context of "to die to achieve *ren*" and "to lay down one's life for a cause of *yi*," *ren* and *yi* were usually understood in the

³ In this paragraph I have "translated" the idioms of Chinese classical texts into the idioms of contemporary moral philosophy. This is not just a matter of textual exegesis; the hermeneutical process is more complicated than it appears here (see Lo 1999a, b: 70–78, 84–85).

wide sense. One should note, however, since the Han Dynasty, morality or *ren* and *yi* has been conceived of manifesting in particular human relationships rather than in a universal and general way. In other words, *ren* and *yi* as morality were understood not through universal love or duty to society in general, but through interpersonal commitments such as loyalty (in the emperor-subject relationship), filial piety (in the parent-child relationship), chastity (in the husband-wife relationship), and faithfulness (in friendship). In other words, *ren* and *yi* are other-regarding morality mediated through concrete familial, social, and political relationships.

Accordingly, most other-regarding suicides are deemed suicide for the sake of *ren* and *yi*. They are admired, praised, and honored. Among the more important reasons for suicide are (1) the sake of the country (dynasty) and/or emperor; (2) the sake of the husband who just passed away; (3) the sake of the master; (4) the sake of the benefactor, as a token of gratitude; (5) the sake of a friend, especially those with whom one has entered into a pact of brotherhood; (6) the sake of keeping a secret for someone; (7) the sake of saving other lives; and (8) for the sake of avenging one's parents, husband, or master.⁴ In short, these Confucian teachings, "to die to achieve *ren* (*shashen chengren* 殺生成仁)" (Confucius) and "to lay down one's life for a cause of *yi* (*shesheng quyì* 捨生取義)" (Mencius), not only inspired many Chinese to risk and sacrifice their lives for noble causes but also motivated some Chinese to commit suicide for noble causes. When people thus committed suicide, they were not condemned; rather, they were praised for their aspiration and dedication to *ren* and *yi*. This moral view prevailed as late as the early 20th century.

Furthermore, in the Chinese language, these acts were not called "suicide" in the pejorative sense of "self-destruction" or "self-slaughter." A different set of phrases, usually a combination of another word with *xun* 殉 (sacrifice) or *jie* 節 (moral integrity), words with connotations of praiseworthiness, were used instead.⁵ Hence such a suicide is not deemed an act of self-destruction; rather, it is an act of moral construction. TANG Jungyi 唐君毅 and other prominent contemporary neo-Confucians compare such suicides of *xun* and *jie* to the deaths of martyrs in early Christianity. Just as the Christian martyrs were prepared to endure anything, even death, for the sake of upholding their faith, the Confucian men and women of integrity (*qijie* 氣節) were also prepared to endure anything, even death, for the sake of upholding *ren* and *yi*. The distinction between letting oneself be killed and killing oneself does not make any moral difference here. TANG Jungyi therefore adds that the religiosity (absolute devotion, unconditional dedication, and ultimate commitment) of these men and women could not be denied (Tang 1974: 144).

There were, of course, many suicides in premodern China that were not deemed suicides for the sake of *ren* and *yi*. Most self-regarding suicides, for example, suicide as a result of being tired of life, as a quick solution to one's troubles or failures (financial or marital), as a solution to chronic depression, as an expiation of one's wrongdoing, and out of fear of punishment or public mockery, etc., were not so evaluated. They were pitied and deplored. These suicides were called *qingsheng* 輕生 (taking life too lightly) rather than *siyi* 死義 (dying for the cause of *yi*). They were evaluated as self-destruction or self-slaughter.⁶ Such

⁴ The sources of my information are from the *Records of the Historian* (*Shiji* 史記) and some collections of Chinese novels in the Ming Dynasty. The former contains the biographies of many celebrities in ancient China, whereas the latter narrates the stories and legends of many ordinary people in late imperial China.

⁵ *Xunjun* 殉君, *xunzhu* 殉主, *xunfu* 殉夫, *xunqing* 殉情, *xunzang* 殉葬, *xunsi* 殉死, *xundao* 殉道, *xunjie* 殉節, *xunguo* 殉國, *sijie* 死節, *qijie* 氣節, *shijie* 士節, *xunjie* 殉節, *jielie* 節烈, and *jiecao* 節操.

⁶ *Zicai* 自裁, *zijin* 自盡, *zijing* 自經, and *ziquang* 自戕.

suicides were deemed wrong primarily because of another important Confucian value, *viz.*, *xiao* or filial piety. Committing suicide in such circumstances was deemed contrary to filial piety, not because of the trivial reason that it would cause grief to one's parents (see Battin 1996: 67–68). For one thing, Confucian filial piety requires that sons and daughters attend to their parents' daily needs for their entire life. Terminating one's life renders one unable to fulfil this important filial duty. For another, Confucian literature on filial piety argues that children are permanently indebted to parents because children do not exist on their own but owe their existence to the parents. If one is not the "author" of one's biological life, how can one have the autonomy to dispose of one's life as one wishes? Suicide is then understood as usurping the authority of parents.⁷ In short, filial piety is one manifestation of *ren* and *yi*. Unless filial piety is outweighed by another moral value which better embodies *ren* and *yi* (for example, patriotism), the former is usually a moral reason strong enough to forbid suicide.

3 Argument of Mercy

A very familiar moral argument for VE and PAS is the argument of mercy. According to this argument, a medical doctor has the duty to relieve the pain experienced by patients. Furthermore, there are situations in which the only effective way to alleviate a patient's pain is to terminate the patient's life. Hence, there are situations in which the doctor is morally justified in practicing VE or PAS. The Netherlands has been practicing VE and PAS since the 1980s, and as some Dutch scholars who have analyzed their country's legal change explain, "The duty of a doctor to alleviate 'unbearable and hopeless suffering' has, via the justification of necessity recognized by the Supreme Court, become the principal legal basis for the legalization of euthanasia and assistance with suicide" (Griffiths 1998: 172). In the "situation of necessity," in which a doctor is caught in a conflict of duties, the duty to relieve suffering should have a moral priority over the duty to preserve life (Griffiths 1998: 65; see also 81).

Such an argument justifies not only VE and PAS in the case of intolerable physical pain, whether the patient is in the final phase of a terminal illness or not, but also VE and PAS in the case of non-somatic, psychic pain. The landmark case in the Netherlands involves Ms. Hilly Bosscher and Dr. Chabot. Briefly put, in 1991 the psychiatrist Chabot assisted a 50-year-old woman in committing suicide. The woman was physically healthy, but suffered from severe depression after the death of her two sons and the break-up of her marriage. She declined therapy, did not want to live any longer, and persistently requested that Dr. Chabot assist her to die. Chabot deemed that "intolerable psychological suffering is no different from intolerable physical suffering" and so complied. The courts concurred (Griffiths 1998: 80–82, 329–340).

What was practiced in the Netherlands was advocated by philosophers long ago. For example, according to Peter Singer, "Euthanasia"... is now used to refer to the killing of those who are *incurably ill* and in great pain or *distress*, for the sake of those killed, and in order to spare them further suffering or distress" (Singer 1979: 127; emphasis mine). What is noteworthy in this definition are (1) he uses the phrase "incurably ill" rather than "terminally ill," and (2) he extends the scope of suffering from pain (physical) to distress (mental).⁸ In the United States during the 1990s, Dr. Kevorkian, nicknamed "Dr. Death," alleged that he assisted more than 100 persons to die, even naming his device to help patients die "Mercitron" (Kevorkian 1991: 210).

⁷ More on this topic of autonomy and Confucianism will be discussed in Section 11 below.

⁸ In 1973 the courts of the Netherlands dropped the condition of being in the terminal phase of an illness from the prerequisites of permissible PAS and VE. See Griffiths 1998: 52.

4 Confucian Consonance 206

Mercy, or compassion, is a very important virtue in Confucianism, as the following famous teaching by Mencius testifies: 207
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My reason for saying that no man is devoid of a heart sensitive to the suffering of others is this. Suppose a man were, all of a sudden, to see a young child on the verge of falling into a well. He would certainly be moved to compassion, not because he wanted to get in the good graces of the parents, nor because he wished to win the praise of his fellow villagers or friends, nor yet because he disliked the cry of the child.... The heart of compassion is the germ of benevolence. (*Mencius* 2A6) 200
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A person of benevolence or *ren* cannot bear to see the suffering of others. As CHAN Wing-tsit renders it, “the feeling of commiseration is the beginning of humanity” (Chan 1963: 65). Hence, a person of *ren* cannot bear to see a patient suffer unnecessarily. Some significant effort must be made to relieve the patient’s suffering. Traditional Chinese medicine has been known as “an art of *ren* with a *ren*-mindset” (*ren xin ren shu* 仁心仁術). Hence, this passage has been understood historically as relevant to the practice of medicine. In the contemporary setting, one can argue that if to terminate the life of a suffering patient is the only effective way to relieve his or her suffering, in such a dire and desperate circumstance the Mencian ethics of *ren* can be extended to endorse VE and PAS.⁹ Besides, as the great neo-Confucian philosopher ZHU Xi 朱熹 observes, the Chinese phrase “*manu buren* 麻木不仁” (to be indifferent to others’ intense suffering is the antithesis of *ren*) is well put (Qian 1971: 71). Hence a person of *ren* just cannot be indifferent to the excruciating pains of many a patient.¹⁰ 216
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5 Limitation of this Consonance 228

The Confucian endorsement of this argument of mercy hinges on one crucial premise, *viz.*, VE or PAS is the only effective way to relieve intractable pain. According to contemporary bioethical discussions, however, this premise has been severely contested because the advance of palliative medicine and the improvement of hospice service provide a third alternative. Palliative medicine changes the medical strategy from cure to care and devotes more resources to pain control. As the pain of a dying patient is more than physical, hospice service provides holistic care and holistic management of pain (physical, emotional, social, and spiritual). As a hospice organization testifies, 229
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The real proof of hospice as a preferable option for care of the terminally ill lies in the results. The evidence demonstrates that when terminally-ill persons who request assistance with suicide are treated for depression and are given proper palliative and supportive care, they tend to change their minds about assisted suicide.... When physical and psychological sufferings are successfully addressed, the patient becomes free to pursue the greatest amount of personal fulfillment possible in his or her remaining life. (Brief *Amicus Curiae* 1997: “Argument,” Section I). 238
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⁹ I said “can be extended to” because this way of acting on the moral sentiment of commiseration is surely not a straightforward application. The example that Mencius uses to illustrate this moral sentiment of commiseration is rescuing an endangered human life. VE and PAS, on the other hand, is terminating human life. The moral hermeneutics here is admittedly more daring and innovative.

¹⁰ An act of mercy killing, in a nonmedical context, was described in the novel *Red Sorghum* by Mo Yan (which also appeared in the movie of the same title). I think a person of *ren* can support this act.

Accordingly, when effective palliative medicine and good hospice service are available, to advocate VE and PAS as the only deliverance from pain is factually wrong. Such an argument assumes a false dichotomy between preserving life and relieving pain.

A supporter of the argument of mercy can retort that such an alternative is not available to a patient suffering from psychic pain such as Ms. Bosscher in the Netherlands (see Section 3 above). Psychic suffering in a non-terminal situation cannot be treated by medicine. There is no pain-killer for relieving the anguish of the soul. No palliative care will help. VE and PAS are still needed in such cases. I think Confucianism can join in the voice against the medicalization of life. Anguish of the soul such as Ms. Bosscher's, one can contend, is outside the scope of medicine. It is naïve to ask medicine to solve the existential problems of human life. A psychic sufferer should read Confucian texts and pursue self-cultivation for a re-orientation of life. Psychic suffering caused by miseries, calamities, tragedies, adversities, and misfortunes (as in the case of Ms. Bosscher) should be put in perspectives, as the famous teaching from Mencius puts it:

That is why Heaven, when it is about to place a great burden on a man, always first tests his resolution, exhausts his frame and makes him suffer starvation and hardship, frustrates his efforts so as to shake him from his mental lassitude, toughen his nature and make good his deficiencies. As a rule, a man can mend his ways only after he has made mistakes. It is only when a man is frustrated in mind and in his deliberations that he is able to innovate. (*Mencius* 6B15)

Confucianism can concur with the following observation by the psychiatrist M. Scott Peck, “While the physical pain of [dying] can and should be alleviated, the existential suffering involved is enormous. It is quite understandable that some should opt for euthanasia to short-circuit that suffering. Nonetheless, euthanasia also short-circuits the opportunity for learning and soul development” (Peck 1997: 152; see also 160). What is said of pre-death existential suffering in this passage is equally true for existential suffering during life. Confucian ethics, as virtue ethics rather than as hedonistic ethics, surely would agree that, amidst existential adversity and anguish, one should not short-circuit the opportunity of “soul development” or learning to cultivate moral character (such as perseverance, fortitude, courage, etc.). Moreover, as explained above, a key value in Confucianism is that we should not be indifferent to others’ intense suffering. Confucian compassion, therefore, dictates that we should devote more resources to palliative medicine and make hospice care more easily available. In the event, however, that all palliative treatments fail or no palliative treatment is available because of economic backwardness, and terminating John Doe’s life immediately is the only way of relieving John Doe’s dragged out physical suffering in the dying process, one can argue that VE and PAS in this special situation are not morally opposed by *ren*. In short, *ren* manifests itself in different ways, depending on the variation of empirical factors such as the availability of effective palliative treatment.

6 Argument of Preventing Indignity¹¹

I shall now analyze the so-called “death with dignity” argument in favor of PAS and VE in contemporary Western societies. I shall try to show that the phrase “death with dignity” is actually a misnomer for understanding this argument. The argument is really an argument for preventing an undignified dying process. In other words, as the argument goes, PAS and

¹¹ For an elaborate treatment of this topic, see Lo 1999a, b: 313–333.

VE do not positively confer dignity upon a person when she or he dies (i.e., dying with conferred dignity); they only negatively prevent a person from falling into an undignified state of existence (i.e., dying without indignity, bringing about death to prevent indignity).¹² In virtue of the success of palliative medicine, the argument of mercy is losing persuasive power and the argument of preventing indignity becomes very prominent, which deserves a more thorough analysis here.

6.1 Popular Movement Pamphlets

When Californians debated California Proposition 161 (“Death with Dignity Act”) in 1992, a group called Californians against Human Suffering published a pamphlet entitled *Questions and Answers on the California Death with Dignity Act*. Question 9 in this pamphlet asks, “Shouldn’t the law be restricted to those who are [in] intractable pain?” and the answer provided is as follows:

No! The *loss of personal dignity* may be as intolerable to a patient as horrific pain. Many are willing to fight back against their terminal disease as long as they can maintain a minimally acceptable quality of life, but many of us do not wish to *live like a zombie*, which is often the result of adequate pain control. For others whose *bodily functions fail* and are *confined to bed, totally dependent on others for every aspect of existence*, their life has become unbearable even if their pain is being controlled. (Californians against Human Suffering 1992; emphasis added)

This passage makes three significant points: (1) the argument of “death with dignity” is distinct from the argument of compassion (the elimination of pain); (2) the concern is negative (the loss of dignity) rather than positive (the conferral of dignity); and (3) indignity happens because of failing health and the side-effects of large dosages of pain-killing medicine.¹³

6.2 Court Rulings and Government Documents

This abhorrence of failing health seems to suggest a conscious rejection of the natural cycle of life, which starts from the dependence of infancy, moves on to the independence of adulthood, and then comes back to the dependence of failing health in old age. As some judges in the United States Court of Appeals for the Ninth Circuit argued in 1996:

Like the decision of whether or not to have an abortion, the decision how and when to die is one of “the most intimate and personal choices a person may make in a lifetime,” a choice “central to *personal dignity* and autonomy.” A competent

¹² Thus understood, some objections against the argument of “death with dignity” (such as Ramsey 1974) are misdirected, and the charge that the phrase “death with dignity” is an oxymoron is also unjustified (as in Kass 1991: 132).

¹³ Likewise, in Holland, when the Dutch Parliament finally approved laws permitting euthanasia in 1993, the *New York Times* reported: “In Dr. Cohen’s experience the main motive for requesting death is not only a question of physical suffering. ‘Generally, *personal dignity* plays an important role,’ he said. ‘People don’t want to *live on machines*, someone may be *half paralyzed, incontinent*. This can be harder to bear than pain’” (Simons 1993: A10; emphasis added). Besides, when Oregonians debated the Oregon Ballot Measure 16 (Death with Dignity Act, 1994), John A. Pridonhoff, then Executive Director of The Hemlock Society, U.S. A., explained in an essay, “And for some people, the *loss of dignity* and self-respect amid chronic suffering, where the *loss of mental competence and control of bodily functions* are definite prospects, is enough to make some people choose to take control of the time and manner of their death” (Pridonhoff 1994: 49; emphasis added).

terminally ill adult, having lived nearly the full measure of his life, has a strong liberty interest in choosing a <i>dignified and humane death</i> rather than being reduced at the end of his existence to a <i>childlike state of helplessness, diapered, sedated, incontinent</i> . (United States Court of Appeals for the Ninth Circuit 1996: Majority Opinion, Section IV, subsection F; emphasis added)	324 325 326 327 328 329
Some people seem to blame this utter dependence of the dying elderly on the relatively long dying process of modern patients	330 331
As a result, Americans are living longer, and when they finally succumb to illness, <i>lingering longer</i> , either in greater pain or in a stuporous, semi-comatose condition that results from the infusion of vast amounts of pain killing medications. Despite the marvels of technology, Americans frequently <i>die with less dignity than they did in the days when ravaging diseases typically ended their lives quickly</i> One result has been a growing movement to restore humanity and dignity to the process by which Americans die. (United States Court of Appeals for the Ninth Circuit 1996: Majority Opinion, Section IV, subsection D; emphasis added)	333 334 335 336 337 338 339 340
Some witnesses told the Committee that a prolonged dying process can cause a loss of dignity. Furthermore, it can lead to a loss of independence and control over their lives which, for them, is paramount. (The Special [Canada] Senate Committee on Euthanasia and Assisted Suicide 1995: VII)	342 343 344 345 346
6.3 Voices of Medical Doctors	347
Perhaps being mindful that the “dignity-talk” can be over-used and sound hollow, some authors choose different terms to describe the utterly unpleasant condition of the dying:	348 349
There are concerns about <i>loss of dignity</i> and the occurrence of symptoms of situations which are perceived by the individual as <i>demeaning or degrading</i> . These concerns are raised by a number of patients but are particularly common in Alzheimer’s disease and AIDS. Patients with Alzheimer’s disease may perceive euthanasia as a welcome release from the relentless progressive loss of intellectual faculties and worsening physical status which ultimately result in a <i>completely dependent and institutionalized state</i> . Similarly, the final stages of AIDS may be extremely unpleasant and unattractive and it has been argued by a number of AIDS groups that euthanasia is a needed option for patients who wish to forgo this <i>degradation</i> . (Ontario Medical Association 1991:11; emphasis added)	350 352 353 354 355 356 357 358 359 360 361
There is one passage that contains almost all the ingredients of the argument of “death with dignity” analyzed above. This passage is from a book entitled <i>Death and Dignity</i> , authored by Dr. Timothy Quill, a leading physician-spokesperson and activist of the PAS movement in the U.S.	362 363 364 365
Despite the effectiveness of the hospice program, Diane still feared being <i>out of control, bedbound, and totally dependent</i> . She had an extreme aversion to <i>lying passively in bed</i> , to being <i>unable to attend to her basic bodily functions</i> , or to being <i>sedated or confused while she waited for death</i> For some people, such <i>prolongation of dying</i> might have a purpose; for others, it is meaningless and even cruel.... For those who place extreme value on their physical and intellectual integrity, living out their final time with the progressive dementia associated with	366 368 369 370 371 372 373

HIV can be far worse than death. “ <i>What dignity can be found dying demented, lying in my own feces, unaware of my surroundings?</i> ” they ask... a “natural” death that they would find <i>humiliating</i> . (Quill 1993: 105–107; emphasis added)	374 375 376 377
6.4 Philosophers’ Arguments	378
Many philosophers have written on this topic. One representative piece is an <i>amicus curiae</i> brief, known as <i>The Philosophers’ Brief</i> , composed by six very famous American philosophers, viz., Ronald Dworkin, Thomas Nagel, Robert Nozick, John Rawls, Thomas Scanlon, and Judith Jarvis Thompson. ¹⁴ In one passage they write,	379 380 381 382
Some people make the latter choice [to end their lives with physician assistance] not just to escape pain. Even if it were possible to eliminate all pain for a dying patient—and frequently that is not possible—that would not end or even much alleviate the anguish some would feel at remaining alive, but intubated, helpless, and often sedated near oblivion.... [for them] further life means only degradation. (Battin, Rhodes, & Silvers 1998: 433)	383 385 386 387 388 389
Ronald Dworkin, the leading author of <i>The Philosophers’ Brief</i> , also argues in a similar manner in his own book,	390 391
Many people, as I said, think it <i>undignified</i> or bad in some other way to live under certain conditions, however they might feel if they feel at all. Many people do not want to be remembered living in those circumstances; others think it <i>degrading to be wholly dependent</i> , or to be the object of continuing anguish.... At least part of what people <i>fear about dependence</i> is its impact not on those responsible for their care, but on their own <i>dignity</i> . (Dworkin 1994: 209–210, emphasis added)	393 394 395 396 397 398 399
7 Confucian Consonance	400
In short, the argument of “preventing indignity” holds that our biological condition can deteriorate so badly (for example, incontinence, regressing to the state of infancy, total dependence on others, entirely bedbound, progressive dementia, disability, and becoming comatose, sedated to a semi-conscious state) that our relatively long dying process can be utterly <i>undignified, humiliating, disgraceful, dishonorable, and degrading</i> . Such an indignity can be more intolerable than physical pain. PAS and VE can therefore deliver us from such an undignified state of existence. Most self-regarding suicides, as explained in the last paragraph of Section 2, were generally regarded as morally wrong in ancient China, and nobody felt the need to discuss them. There was one kind of self-regarding suicide, however, that did evoke some discussion and it can be conveniently called, in modern	401 402 403 404 405 406 407 408 409 410

¹⁴ The occasion of this piece of writing was that, “In 1997, the United States Supreme Court ruled for the first time on the matter of physician-assisted suicide. At issue were two 1996 federal appellate court decisions, *Compassion in Dying v. Washington* in the Ninth Circuit...and *Quill v. Vacco* in the Second Circuit.... Both Circuit Courts had declared that state prohibitions on physicians assisting competent terminally ill patients to commit suicide were unconstitutional” (Battin, Rhodes, & Silvers 1998: 373). *The Philosophers’ Brief* was composed to urge the Supreme Court to uphold the lower courts’ decisions; it is reprinted in Battin, Rhodes, & Silvers 1998: 431–441. To their disappointment, the Supreme Court unanimously reversed.

idiom, “death to prevent indignity.” In the Former Han Dynasty (206 BCE-8 CE), Confucianism was elevated to the role of the established ideology of the empire. The Confucian who was instrumental in making this happen was DONG Zhongshu 董仲舒 (c.179-c.104 BCE). Though modern Chinese philosophers often consider him of minor philosophical significance, historically he was of utmost importance. The imperial policy of establishing the supremacy of Confucianism, advocated by Dong, was adopted in 136 BCE and continued in different degrees until 1905 CE.¹⁵ Furthermore, he has been widely acknowledged to be the most religious thinker in the entire history of Confucianism because he elevated “Heaven” to a personal God in his political theory.

One should note that it was not the early Confucianism of Confucius and Mencius that was honored in the Han Dynasty; rather, it was Dong’s creative synthesis of various streams of Confucianism together with other schools of thought. Dong’s masterpiece was entitled *Chunqiu fanlou* 春秋繁露 (*Exuberant Dew of the Spring and Autumn*), which was an elaboration on the thought of the *Spring and Autumn Annals*, the authorship of which was attributed to Confucius. Dong regarded the *Spring and Autumn Annals* as the canon within the Confucian canon. In one chapter of this *magnum opus*, he eloquently elaborated a variation of Confucian Thesis I which was shared by other Confucian writings around the same time in the early Han Dynasty. In Chapter 8 (“Zhulin 竹林”) of the book, Dong commented on one event recorded in the *Spring and Autumn Annals*. King Qing of Qi 齊頃公 was in a battle with his enemies and lost. The enemies surrounded his armies and it was highly likely that he would be captured and killed. His adviser FENG Choufu 逢丑父 happened to look quite like him and therefore offered to exchange clothing so that the king could escape unnoticed. The strategy succeeded. King Qing escaped while FENG Choufu was mistaken for the king, captured, and killed.

DONG Zhongshu, rather than praising FENG Choufu’s ingenuity, dedication, and sacrifice, condemned his action. To get the king to dress as an ordinary citizen and escape surreptitiously, according to Dong, was to subject a dignitary to an undignified treatment. Such humiliation should not be tolerated, even to save his life because, Dong argues, “to survive through accepting a tremendous humiliation (*daru* 大辱) is joyless, thus wise people refrain from doing it.... A person who has a sense of shame does not cling to life in a time of tremendous humiliation” He also quotes from other Confucian writings of the early Han Dynasty, implying that his ethics of suicide was derived from the Confucian canon: “If a dishonor (*ru* 辱) is avoidable, avoid it; if it is unavoidable, *junzi* (a man of noble character) sees death as his destiny (i.e., embrace death with courage)... A *ru* (Confucian) prefers death to accepting dishonor.”¹⁶ Dong therefore argues that the morally right thing for Choufu to do was to tell King Qing, “To bear a tremendous humiliation and yet refuse to commit suicide is shameless. I shall therefore commit suicide with you.” At that moment, for both of them, death is better than staying alive, as “a *junzi* (man of noble character) should prefer dying in honor (*rong* 榮) to surviving in dishonor (*ru* 辱).”

In short, according to Confucianism in the early Han Dynasty, though biological life is valuable, there is a self-regarding state of affairs more valuable than biological life, *viz.*, a life with honor. Death is undesirable, but there is a self-regarding state of affairs more undesirable than death, *viz.*, to suffer disgrace, dishonor, indignity, or humiliation in life. This is an echo of the Mencian thesis: “though death is what I loathe, there is

¹⁵ It should be noted that though Daoism and Buddhism were not established religions, they flourished in Chinese society. Persecution of non-established religions and ideologies occurred very infrequently in China.

¹⁶ These two quotations are taken from *Da Daili* 大戴禮 and *Liji* 禮記 respectively. All English translations are mine.

something I loathe more than death.” One should therefore choose death for the sake of preventing one from going through undignified treatment, and it is honorable, and even obligatory, to make such a choice. Such a termination of one’s life is honorable because it is also done for the sake of *ren* and *yi*. This view is a specification of Confucian Thesis I, with the focus shifted from primarily other-regarding concerns to primarily self-regarding concerns. For convenience’ sake, I shall call it Confucian Thesis II: *One should actively terminate one’s life for the sake of preventing ru (humiliation, dishonor, disgrace, indignity)*.

Such “death to prevent indignity” was quite common in ancient China and many examples can be found in the *Records of the Historian (Shiji 史記)* by SIMA Qian 司馬遷 (c.190-145 BCE) (see Watson 1961), the greatest historian of ancient China, and a younger contemporary of DONG Zhongshu. He recorded many suicides and often with approval. Among these suicides two types are particularly noteworthy for our purpose. First is when death is unavoidable in the near future: (1) one hears or predicts that one will be executed by the government, and so commits suicide; (2) suicide after a military defeat (otherwise the defeated general will be killed by his conqueror); and (3) suicide after a failed *coup d’etat* attempt (which means that execution is waiting for the rebel). What is common in all these three cases is that those who commit suicide consider execution a humiliation, a dishonor, and a disgrace. Hence, it is better to kill oneself than to be killed by others. Committing suicide is therefore a means of preventing one from being subject to undignified treatment. The second has no known threat to one’s life: (1) a literati-official commits suicide in order to avoid the indignity of being tried in court, regardless of guilt or innocence; and (2) a literati-official commits suicide in order to avoid the indignity of imprisonment. These literati-officials firmly believe that to be tried in court and/or to be imprisoned, even if one is innocent, is a humiliation, a dishonor, and a disgrace. Hence, it is better to kill oneself than to suffer such an undignified treatment. Committing suicide is therefore a means of preventing indignity (see Luo 2001: 22–23).

In short, both types of suicide discussed above are instances of Confucian “death to prevent indignity,” which confirm that the Confucian ethic of death to prevent indignity was widely accepted in Chinese antiquity. In fact, the influence of this idea extends to the present day. The idiom “rather be a shattered piece of jade than be an intact tile of clay” (*ningwei yusui, buzuo wacun* 寧為玉碎，不做瓦存), which is a metaphorical rendition of this ethic, is still used by today’s Chinese. This idiom means that if one’s quality of life is bound to be degradingly low (as clay), the better option is to terminate one’s life while the quality of life is still good (as jade). Besides, the motto “a *shi* (an intellectual) prefers death to accepting dishonor” (*shi keshu, buke ru* 士可殺，不可辱) is also still influential. Quite a number of intellectuals committed suicide during the Cultural Revolution for this reason.

Given the exposition and analysis above, let us examine the extent to which the Confucian conception of “death to prevent indignity” lends support to contemporary argument for PAS and VE. There is a definite consonance between these two ethics. First, neither deems suicide intrinsically immoral, and both agree that human beings should take full charge of their lives *and* of their deaths. There is no inhibition from any doctrine of divine sovereignty or from the warning not to play God; second, both ethics accept some kind of quality of life consideration and make a distinction between an acceptable quality of life and an unacceptably low quality of life; and third, both agree that in those cases in which the quality of life is so low, to drag on in such a state would be worse than death. When life is too degrading to go on living, to terminate one’s biological life boldly is a morally acceptable option. Bringing about death to prevent indignity is morally permissible.

8 Limitation of this Consonance

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There is a dissonance as well between Confucianism and the contemporary Western discourse. First, the crucial difference is the criterion for unacceptable degradation—what constitutes an indignity so serious and so grave that it is worse than death? For Confucianism, the criterion always refers to moral, not physiological-psychological. Quality of life for Confucianism is always that of moral life. Indignity, humiliation, dishonor, disgrace, and degradation are all conceived with reference to one's moral-social life rather than to one's biological life. The metaphor of jade and clay tile is not to be understood physiologically with reference to one's health condition, but with reference to one's moral character because, as I explained in Section 2 above, Confucianism has a definite theory of good and evil. Biological life is a good, but it is not the highest good; the *summum bonum* is moral sagehood. Biological death is an evil, but it is not the biggest evil; the *summum malum* is moral depravity. Hence, an authentic human life is an ascent to moral sagehood, and an inauthentic human life a descent to immorality (or in Confucian idiom, a descent from the human to the beastly). Exaltation and degradation in human existence are to be understood as moral ascent and moral depravity. Since degradation and indignity are seated in the moral soul or spirit rather than in the human body, the circumstances that constitute death to prevent indignity in Confucianism are quite different from those in contemporary pro-PAS and pro-VE movements.

Second, accordingly, it is not immediately clear to Confucianism that deteriorating biological conditions (e.g., incontinence, being brought back to the state of infancy, total dependence on others, being entirely bedbound, progressive dementia, disability, comatose, being sedated to a semi-conscious state) are so degrading that to stay in these conditions is worse than death. On the one hand, it is sad to see one's health deteriorate, but this biological fact does not degrade human existence. It is probable that Confucianism can accept the idea that "finitude is no disgrace" (Kass 1991: 141) because Confucianism also adopts a naturalistic account of death—the genesis, growth, decay, and perishing of biological life are phenomena common to all living organisms, human beings no exception. One should therefore accept pre-death decay with serenity. On the other hand, that one's biological health is deteriorating does not indicate that one's moral health is in jeopardy too; it is moral depravity, the *summum malum* that renders life so degrading that to stay on is worse than death.

Third, the Confucian "death to prevent indignity" is deemed morally commendable because it is one manifestation of a suicide for the sake of *ren* and *yi*. Though biological life is not the highest good, it is the highest price one can pay for a worthy cause, and *ren* and *yi* are such worthy causes. Hence, suicide for the sake of *ren* and *yi* is a sacrificing witness to a worthy cause (i.e., a martyr). One yields one's biological life for the sake of cultivating one's moral life (adherence to *ren* and *yi*, growth into moral sagehood). Biological destruction is brought about for the sake of moral construction. A Confucian "death to prevent indignity" is an act of moral construction because it prevents one from moral degradation. An act of PAS and VE on the grounds of deteriorating biological condition, however, cannot be interpreted as an act of moral construction.¹⁷

¹⁷ However, as one commentator puts it, "if there is reason to think that physical or mental infirmity will diminish [one's] adherence to the moral law—a risk presumably especially great in diseases which involve progressive mental deterioration" (Battin 1996: 112), preemptive suicide can be considered "death to prevent indignity" in the Confucian sense. I am not sure that human moral health will deteriorate with human biological health as this commentator suggests. But if it happens, the dissonance between these two ethics of "death to prevent indignity" will disappear.

Fourth, it should also be noted that in all the examples of “death to prevent indignity” in ancient and contemporary China, the unacceptable humiliation and dishonor stem from unstoppable hostile forces and circumstances. There is no palliation or relief of any kind. In such a case, the disjunction of either committing suicide or being subjected to humiliation and dishonor is more plausible. Hence, unless the physiological conditions of disease, sickness, and degeneration were deemed hostile enemies, corporal torture from fate, or malicious assault from nature (as suggested in Becker 1990: 551–552), there is another dissonance between these two ethics of “death to prevent indignity.”¹⁸

To conclude, “death to prevent indignity” in the Confucian sense is recommended by Confucian ethics because of “the priority of the moral over the biological.” In common with other major world religions, Confucianism acknowledges that there is much more in human life than biological health, which is only a perishable good. One should strive hard to resist the *summum malum*, even at the expense of terminating one’s biological life, and the *summum malum* in this case is much more than biological (*viz.*, moral depravity). On the contrary, “death to prevent indignity” in PAS and VE stays only on the realm of the biological. Deteriorating health is deemed the *summum malum* so that one should prevent its happening even at the expense of biological life. The goal of such a suicide does not go beyond the biological; it seeks only to overcome our actual imperfect and finite biological condition through the annihilation of biological life. From the perspective of Confucianism, such an understanding of the *summum malum* suffers from a very narrow vision of life. In virtue of its preoccupation with biological health such an understanding misplaces the source of indignity and degradation in the physical and the corporeal (body, health), and loses sight of the soul or spirit (moral life in Confucianism). To argue for PAS and VE on ground of “death with dignity” is to eradicate any room for a Confucian “death to prevent indignity” to stand out because exaltation and degradation in human life are all confined to the biological dimension. In short, to understand PAS and VE as “death to prevent indignity” has the tendency to reduce the human person to the one-dimensional existence of the biological-physical. What is more worrisome is that the arguments for, and the practice of, PAS and VE are no longer restricted to the last phase of a terminal illness. Hence, PAS and VE are offered as a solution not only to a problem concerning the manner of dying, but also as a solution to existential problems in human life, *viz.*, disability, mortality, corruptibility, failing health, frailty of human body and mind, and finitude. The superficiality of this solution is obvious; to divorce bioethics from a comprehensive vision of life is to condemn bioethics to a poverty of vision. Confucianism or other worldviews are needed to guide our ethics.

9 Argument of Autonomy

For many contemporary proponents in Western societies, VE and PAS has more to do with individual autonomy than relief of pain. As an article in the *New York Times* puts it, “Pain management and hospice care are better than ever before. But for some people they are simply the trees. The forest is that they no longer want to live, and they believe the decision

¹⁸ Morrie did not see any indignity in his dependency at the end of life. “I felt a little ashamed, because our culture tells us we should be ashamed if we can’t wipe our own behind. But then I figured, *Forget what the culture says....* I began to *enjoy* my dependency.... It’s like going back to being a child again.... We all yearn in some way to return to those days when we were completely taken care of—unconditional love, unconditional attention. Most of us didn’t get enough” (Albom 1997: 115-116).

to die belongs to them alone” (quoted from New York State Task Force 1994: 87). As the Majority Opinion of the United States Court of Appeals for the Ninth Circuit states in *Compassion in Dying v. State of Washington* states, 586
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In *Casey*, the Court surveyed its prior decisions affording “constitutional protection to personal decisions relating to marriage, procreation, contraception, family relationships, child rearing, and education”, id. at 2807 and then said: “These matters, involving the most intimate and personal choices a person may make in a lifetime, choices central to personal dignity and autonomy, are central to the liberty protected by the Fourteenth Amendment...” Like the decision of whether or not to have an abortion, the decision how and when to die is one of “the most intimate and personal choices a person may make in a lifetime,” a choice “central to personal dignity and autonomy.” (United States Court of Appeals for the Ninth Circuit 1996: Section IV, subsection F)¹⁹ 590
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There are two noteworthy elements in this argument as well as in some arguments quoted below. For one thing, personal autonomy is deemed morally equivalent to personal dignity. For another, this autonomy includes at least a number of very personal and significant choices in one’s lifetime, including the time and circumstances of one’s death. 599
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In his book on this issue Ronald Dworkin first reports what some Americans think: 603

People who believe that competent patients should be permitted to arrange their own deaths, with the assistance of willing doctors if they wish, often appeal to the principle of autonomy. They say that it is crucial to people’s right to make central decisions for themselves that they should be allowed to end their lives when they wish, at least if their decision is not plainly irrational. (Dworkin 1994: 190) 604
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Toward the end of the book he concludes: 611

Freedom is the cardinal, absolute requirement of self-respect: no one treats his life as having any intrinsic, objective importance unless he insists on leading that life himself, not being ushered along it by others, no matter how much he loves or respects or fears them. Decisions about life and death are the most important, the most crucial for forming and expressing personality that anyone makes; we think it crucial to get these decisions right, but also crucial to make them in character, and for ourselves. (Dworkin 1994: 239) 613
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Instead of appealing to dignity, Dworkin here uses a different expression, “self-respect.” Besides, an autonomous choice for death is defended by appealing to “forming and expressing personality.” 620
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The Philosophers’ Brief, too, makes the issue of individual autonomy their central contention: 623
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[I]ndividuals have a constitutionally protected interest in making those grave judgments for themselves, free from the imposition of any religious or philosophical 625
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¹⁹ The background of this court case is as follows. In 1994 a US District Court agreed, in *Compassion in Dying v. Washington*, that the State of Washington’s ban on assisted suicide is unconstitutional on the grounds of *Planned Parenthood v. Casey* (1992), *Crusan v. Director, Missouri Dept. of Health* (1990), and the 14th Amendment of the US Constitution. In 1995, a three-judge panel of the Court of Appeals for the Ninth Circuit voted 2-1 to reverse the decision of the District Court. On March 6, 1996, the U.S. Ninth Circuit Court of Appeals reheard the case en banc, reversed the panel’s decision, affirmed the district court’s ruling on grounds of the liberty interest, and concluded that there is a constitutional “right to die.” This ruling, however, was eventually overturned by the US Supreme Court in 1997, *Washington, et al., Petitioners v. Harold Glucksberg et al.*

orthodoxy by court or legislature... Denying that opportunity to terminally ill patients who are in agonizing pain or otherwise doomed to an existence they regard as intolerable could only be justified on the basis of a religious or ethical conviction about the value or meaning of life itself. Our Constitution forbids government to impose such convictions on its citizens. (Battin, Rhodes, & Silvers 1998: 431)

The emphasis here, though, is on the proper boundary between individuals and court or legislature, or between citizens and government.

One more champion for the augment of autonomy in VE and PAS should be considered because of the sophisticated nuance he introduces. Joel Feinberg discusses euthanasia in volume three of his four-volume work on *The Moral Limits of the Criminal Law* (Feinberg 1986). Like previous arguments, Feinberg endorses the right to autonomy in a broad range of personal choices, or, in his own words, “critical life-decisions.”²⁰ Besides, in commenting on the pro-euthanasia play, *Whose Life Is It Anyway*, Feinberg also agrees with the protagonist Harrison’s argument that “the chief reason for his choice...[is] his desire for dignity” and that for persons “dignity begins with their choice” (Feinberg 1986: 354). What is novel in Feinberg’s articulation of the augment is that he construes individual autonomy as “sovereign self-rule” (Feinberg 1986: 52).

Feinberg realizes that there are many conceptions of “personal autonomy” and he meticulously distinguishes among them (Feinberg 1986: 28–47). Feinberg himself embraces the strongest conception, *viz.*, “the *sovereign authority* to govern oneself, which is absolute within one’s own moral boundaries” (Feinberg 1986: 28; emphasis his). In so doing, he follows “the language of international law in which autonomous nation-states are said to have the sovereign right of self-determination” and follows the political discourse in which “sovereignty” has stronger claims than “autonomy” (Feinberg 1986: 47). For one thing, sovereignty designates “an ultimate source of authority.” For another, a sovereign state “is a territory under a kind of unconditional and absolute jurisdiction” (Feinberg 1986: 48–49). To construe individual autonomy as “sovereign self-rule” incorporates this component of absolute control into the concept, “for sovereignty is an all or nothing concept; one is entitled to absolute control of whatever is within one’s domain however trivial it may be” (Feinberg 1986: 55). In virtue of the claim of ultimate source of authority, this construal also makes claims of the ownership of one’s life, as “autonomy is even more important than personal well-being. The life that a person threatens by his own rashness is after all *his* life; it *belongs* to him and to no one else” (Feinberg 1986: 59; emphasis his). Hence, commenting on *Whose Life Is It Anyway*, Feinberg says, “the life at stake is Mr. Harrison’s life not ours. The person in sovereign control over it is precisely he” (Feinberg 1986: 354). Feinberg concludes in the last chapter of the book, “Why should a person be permitted to implement a ‘wrong’ or ‘unreasonable’ decision to die? The only answer possible is simply that it is *his* decision and *his* life, and that the choice falls within the domain of *his* morally inviolate personal sovereignty (Feinberg 1986: 361; emphasis his). This is one of the most forceful arguments of autonomy I am aware of.

In short, this argument of individual autonomy for VE and PAS argues that (1) one has the sovereign right to direct the course of one’s own life, including the right to control the time and circumstances of one’s own death; (2) whether or not, and when, life is not worth living is a personal issue, and there is much diversity of values on this issue. A tolerant and

²⁰ “Put compendiously, the most basic autonomy-right is the right to decide how one is to live one’s life, in particular how to make the critical life-decisions—what course of study to take, what skills and virtues to cultivate, what career to enter, whom or whether to marry, which church if any to join, whether to have children, and so on” (Feinberg 1986: 54).

pluralistic society should not impose one particular value on all members; (3) the state has no right of interference with a citizen's critical life-decisions; and (4) restrict such autonomy constitutes an affront to one's dignity, one's self-respect, or one's character expression; it violates one's absolute personal sovereignty.

10 Confucian Consonance

As mentioned in Section 2, the Confucian teachings, "to die to achieve *ren* (*shashen chengren*)" and "to lay down one's life for a cause of *yi* (*shesheng quyì*)," in the course of Chinese history, have not only inspired many Chinese to risk and sacrifice their lives for noble causes, but also has motivated some of them to terminate their lives for noble causes. Hence, Confucian ethics insists that there are rare but real occasions on which one may or should choose death rather than just let nature take its course. On such unusual occasions, we can say that these people exercise their individual autonomy to choose death. "How one dies" is part of "how one lives." To take charge of one's life implies to take charge of one's dying.

There is one articulated exposition of Confucian Thesis I in ancient China that has been immensely influential. Though the person who expressed this view, SIMA Qian 司馬遷 (c.145 –190 BCE), the Grand Historian, is not known as a Confucian, his admiration of Confucius is obvious to those who know his monumental *Shiji* (*Records of the Historian*). In his famous "*Bao Ren An Shu* 報任安書 (*Letter in Reply to Ren An*)" (see Birch 1965: 95–102), which is a confession of someone tormented by the thought of suicide, he made this memorable and still famous statement, "Everyone has to die sooner or later. Whether the death is weightier than Mount Tai or lighter than swan's down depends on its circumstance."²¹ Put this guiding principle in today's idiom: Everyone has to die. The value of dying and death, however, is not the same. Some deaths are good whereas some are of no value or even bad. The degree of value depends on the circumstance of the death. If committing suicide in the present circumstance can be of significant value (i.e., weightier than Mount Tai), do it. Do not commit a suicide that will have little significance (i.e., lighter than swan's down). In other words, according to SIMA Qian, death is not a bare biological event, at least as far as human beings are concerned. The time and circumstance of one's death have ethical significance. The moral issue is not whether one can commit suicide or not; there is no strict prohibition against it, i.e., suicide is not intrinsically wrong. Rather, the issue is for what kind of reason (trivial or substantial) the suicide is committed, and what kind of impact it will produce on others. In Confucian terms, suicides committed for the sake of *ren* and *yi* will be deaths weightier than Mount Tai. Accordingly, when there are occasions on which one's choice for VE or PAS can be characterized as weightier than Mount Tai or for the sake of *ren* and *yi*, one should exercise one's autonomy to choose death. Such an autonomous choice should be honored by all without state intervention.

11 Limitation of this Consonance

Confucianism is not unsympathetic to the idea that a moral agent should have some control over the time and circumstance of his or her death. Confucian Theses I and II certainly grant, and even encourage, individual autonomy in deciding the time and circumstance of one's death when there is a moral need for it. But this encouragement does not stem from

²¹ Mount Tai was a sacred and famous mountain in ancient China (Shandong province).

individual autonomy per se or from individual dignity; rather, it stems from moral obligation. Confucian Theses I and II agree partly with Dworkin that decisions about death express personality or character. But rather than a matter of freedom, these two Confucian theses see it as a matter of duty. One's choice for death should be a manifestation of moral character; it should be a virtuous deed.²²

Regarding the liberal argument of individual autonomy, some preliminary Confucian responses are as follows. First, the various significant decisions in life, viz., marriage, procreation, contraception, family relationships, child rearing, and education are not just personal choices; they are also familial choices because the basic units of society are not Lockean individuals, but families. The Confucian social ideal is not asking for respect by sealing off part of one's life as sovereign domain, but caring for and supporting one another by virtue of communal solidarity. As some scholars point out, the underpinning worldview of liberalism is individualism, and one can distinguish between ontological individualism and ethical-political individualism. The former "involves seeing the individual as primary, as more 'real' or fundamental than human society and its institutions and structures," whereas the latter "involves attaching a higher moral value to the individual than to society or to any collective group" (Arblaster 1984: 15; see also Scruton 1982: 218–219). Hence, there is an emphasis on respecting individual autonomy. But both ontological individualism and ethical-political individualism are absent in mainstream Confucianism. In fact, John Stuart Mill's *On Liberty* was criticized by a Chinese philosopher several decades ago for neglecting that an individual or individuality is constituted by various social relationships (Hsieh 1973: 85–86).²³

Second, Confucian ethics also has a hard time endorsing the link between individual autonomy and individual dignity. Since the Confucian person, as Michael Sandel puts it, is encumbered and constituted rather than unencumbered and separate (Sandel 1982: 53–62, 143–44), the liberal autonomy-heteronomy dichotomization is inapplicable. When one leads one's life in solidarity with one's family, such a life cannot be described as "being ushered along it by others" (Dworkin). The Confucian vision of the socially constituted self or self-in-relationships would not agree that "no one treats his life as having any intrinsic, objective importance unless he insists on leading that life himself" (Dworkin).²⁴ Besides, Confucian values through the ages seem to care more for family honor than for individual dignity; individual dignity just does not self-evidently trump other values. As a familiar phrase recorded in the 13th century *Three Character Classic* (*San Zi Jing* 三字經) puts it, "Make a name for yourselves, and glorify your father and mother" (*yang mingsheng, xian fumu* 揚名聲, 顯父母).²⁵ When one seeks honor or avoids dishonor in life, it is ultimately the

²² Joseph Chan puts it well when he explains the Confucian concept of freedom, "Confucians would justify freedom only on the ground that it allows people to pursue the good. That we should be free to do X is because X is good, and not because freedom expresses or realizes personal autonomy. The Confucian justification for the freedom to do X is always content-dependent; that is, it depends on whether X is valuable" (Chan 2002: 300).

²³ Within the confine of this essay I cannot fully articulate the Confucian social-political vision. Suffice it to say that some fine scholars agree that it is unfair to characterize Confucian social thought as collectivistic (see Yang 1993: 321–434; Jin 1992: 1–16). Some scholars prefer to use the term "holism" rather than "collectivism" as the self-community relationship is conceived in a part-whole manner (see Munro 1985).

²⁴ It seems that the moral equation between autonomy and dignity is prevalent only in the English-speaking world. Contemporary Germany has respecting the dignity of the human person written into the constitution, but the argument of individual autonomy is not that prevalent in that country.

²⁵ This saying is an abbreviation of a famous passage in the first chapter of the *Xiao Jing* 孝經, *The Classic of Filial Piety*: "When we have established our character by the practice of the (filial) course, so as to make our name famous in future ages, and thereby glorify our parents: this is the end of filial piety" (*Hsiao King* 1966: 466).

effect on the family that one cares about the most. Any honor or dishonor a person receives is equally an honor or dishonor for the immediate family, the extended families, and the clan.²⁶ Hence, both individual autonomy and individual dignity are not *basic* values in Confucian social-political thought.

Third, I am not suggesting that Confucian political thought has nothing in common with liberal political thought. Confucianism certainly shares the liberal vigilance against tyranny. Mencius is well known for his very vocal opposition to tyrants. In *Tangong*, part B, of *Li Ji*, Confucius was recorded noticing that near Mount Tai residents would rather risk their lives by living in an area where tigers were active than risk their lives by living in an area ruled by a tyrant. “The master then said (to the disciples), ‘remember this, my little children. Oppressive government is more terrible than tigers’” (*Li Ki* 1964:191). But Confucianism does not pit government against Lockean individuals (as in *The Philosophers’ Brief*); rather, it is government against society, whose building blocks are families.²⁷ To put things in perspective, it is important to note that the Confucian way of life is family-centered. It is commonplace to say that filial piety has a prominent role in Confucian ethics, but such a simple description does not go deep enough. As an example of the Confucian way of life, I shall make use of the 12th century neo-Confucian Great Master ZHU Xi’s *Family Rituals*, especially the part “Miscellaneous Etiquette for Family Life” (*jiaju zayi* 家居雜儀). Many of the materials there are derived from the chapter “Domestic Regulations” (*Nei Ze* 內則) of the 1st century *Li Ji*.²⁸ Hence, I shall provide relevant passages of the latter in the footnotes to show the consistency of more than twelve centuries of Confucian family ethics.

According to these instructions for domestic life, all married children continue to live with their parents (for males) or parents-in-law (for females) in a big family compound. Adult children are to serve their parents in daily routines. They get up earlier to get ready for the parents’ waking, breakfast, and medicine. They serve the parents the two other meals of the day and prepare them to go to bed. During the entire day, “whenever one has nothing to do, he or she should go to wherever the parents are to attend them” (Chu 1991: 27). Furthermore, for our purpose here, there are three noteworthy features in these instructions. First, decision-making of adult children is not by individual autonomy, but by permission of their parents: “Younger [i.e., junior in ranking] members of the family should always obtain permission from the family head for anything they do, large or small, and at no time act on their own” (Chu 1991: 25). Second, private property is owned by families rather than by individuals: “Sons and daughters-in-law must never keep private property. All income, whether from salary or landed property, should be handed over to their parents. When they have expenses, they

²⁶ The morally praiseworthy suicides discussed earlier in this essay should also be so understood. They are not considered heroic acts of lonely individuals; rather, they are deemed virtuous deeds that bring honor and glory to their parents. Hence such suicides are not considered going against filial piety; nay, they manifest filial piety (see Luo 2001: 42-43).

²⁷ Confucianism historically has less to say on value pluralism. China never experienced the systematic wiping out of “heresies” and heathenism as in Christian Europe. Without the haunting memory of religious persecutions and religious wars, it is understandable that the safeguarding of value pluralism has not been a Confucian priority. Present day Confucian philosophers, however, have to deal with this issue. A family-based society can be almost as pluralistic in values as an individual-based one. I cannot deal with this issue within the confine of this essay.

²⁸ “*Nei Ze* 內則” (domestic regulations) is chapter 12 in the standard Chinese edition of *Li Ji*, but appears as chapter 10 of Part III of Legge’s translation quoted below.

ask the parents for money. At no time should they lend or give money to anyone without the knowledge of their parents” (Chu 1991: 25).²⁹ Third, marriage and divorce are also family decisions: “Even if the son likes his wife very much, if his parents are displeased with her, he should divorce her. On the other hand, if the son dislikes his wife, yet his parents say she is good at serving them, then the son should fulfill his duty as husband for the rest of his life” (Chu 1991: 29).³⁰ In these three sets of instructions, one cannot find any trace of the cherished liberal value of individual autonomy.³¹ These Confucian instructions, when abused, certainly can lead (and have led) to parental authoritarianism in the big family. But the spirit of these instructions and innumerable similar writings is plain. The Confucian way of life is entirely family-centered and thus parent-oriented. It is my parents’ life entrusted to me, not a life that belongs to me, that I am leading. Regarding what Feinberg calls “the critical life-decisions—what course of study to take, what skills and virtues to cultivate, what career to enter, whom or whether to marry, which church if any to join, whether to have children, and so on,” these are all family decisions and the parents’ wishes and preferences are crucial considerations.

In modern Chinese society, big, extended families are replaced by nuclear families. But the emphasis on family is the same. With the disappearance of dozens of close relatives living together, the urgent need for a central authority for each big household disappears. In a nuclear family, the bonding of family members is strong and many decisions can be made at the dinner table or bedside. A family-centered life was also parent-centered in the past, but is not so in modern times for nuclear families. Many “critical life-decisions” are family decisions made in deliberation with one’s spouse and children. The rejection of the principle of individual self-determination is the same, but parent-determination is replaced by family co-determination. Accordingly, Feinberg’s ideas of individual “sovereign self-rule,” the individual’s “sovereign authority to govern oneself,” the idea that “one is entitled to absolute control of whatever is within one’s domain however trivial it may be,” “the domain of his morally inviolate personal sovereignty,” and the view that one’s life “belongs to him and to no one else” are still utterly inconceivable in this modern Confucian family-oriented way of life. The liberal “sacred space” of individual sovereignty just does not exist in this Confucian account of the family-constituted self. For modern liberals, this Confucian way of life is heteronomy because they can think of only Lockean unencumbered individuals. But for Confucian family-constituted selves this way of life is not heteronomy because they still exercise self-determination, but this self-determination is always co-determination

²⁹ Cf. this instruction about 1,200 years earlier: “A son and his wife should have no private goods, nor animals, nor vessels; they should not presume to borrow from, or give anything to, another person. If anyone gives the wife an article of food or dress, a piece of cloth or silk, a handkerchief for her girdle, an iris or orchid, she should receive and offer it to her parents-in-law” (*Li Ki* 1964: 458).

³⁰ Cf. this instruction about 1,200 years earlier: “If he very much approves of his wife, and his parents do not like her, he should divorce her. If he does not approve of his wife, and his parents say, ‘she serves us well,’ he should behave to her in all respects as his wife—without fail even to the end of her life” (*Li Ki* 1964: 457).

³¹ Joseph Chan helpfully distinguishes between moral autonomy and personal autonomy and argues persuasively that classical Confucianism’s concern is with the former. “The ideal of moral autonomy is that moral agents can make moral decisions that they reflectively endorse, and be able to act on this basis. Conceptually, it is possible to be morally autonomous without having valuable options concerning career, marriage, and so forth. Moral autonomy is compatible with a narrow range of life choices” (Chan 2002: 299).

with family members.³² They see no trampling of their human dignity in this way of life as human dignity should be grounded in moral autonomy rather than in individual autonomy (see Chan 2002 for the distinction).³³

Since this Confucian account does not endorse individual autonomy or morally inviolate sovereignty in making important decisions in life, how much more it will reject individual autonomy or morally inviolate sovereignty in deciding to terminate life! As a famous line from Chapter One of *Xiaojing* 孝經 (*The Classic of Filial Piety*; a Confucian text that was composed in the 1st century BCE) goes, “Our bodies—to every hair and bit of skin—are received by us from our parents, and we must not presume to injure or wound them: this is the beginning of filial piety” (*Hsiao King* 1966: 466). This view is a firm rejection of Feinberg’s thesis of inviolate personal sovereignty in treating my body. A modern Confucian way of life, as explained before, is family-centered without being parent-centered. It no longer claims that my life belongs to my parents as the *Xiaojing* passage suggests. But if pressed to answer the question, “Whose life is it anyway?” a modern Confucian can answer that, *pace* Feinberg, my life does not belong to me alone; it also belongs to my family.

There has been intense discussion on euthanasia in mainland China during the last two decades. Judged by the literature, the pro-euthanasia side seems to have a larger voice. It is a mind-opening experience when we compare Chinese pro-euthanasia arguments with Western ones. For our purpose here, I shall just enumerate two major differences. First, many Chinese supporters of euthanasia explicitly state that they are arguing for self-determination only in the circumstance of dying, not in the timing of death. For them the thesis that one has the civil right to euthanasia does not imply that one has the civil right to die (see Xu 1997: 432–433; Zou 1998: 489–491; Zhu 1998: 342–345). One professor of medicine plainly states that one’s life belongs not only to oneself, but also to society (Liu 1996: 490–491). Some lingering influence of Confucianism can be detected here. Second, it is quite commonplace to find many contemporary Chinese endorsing the idea that social interests matter more than individual interests. Consequently, in the arguments advanced for the legalization of euthanasia in the literature, the constant refrains are that the legal practice of euthanasia can relieve the financial and emotional burdens of the family, save money for the country, and save medical resources for other productive purposes of the nation (see Zhao 1994: 44–45; Li 1994: 52–53). Such arguments can lend support to the idea that euthanasia is not only one’s right, but also one’s obligation, as such deaths are weightier than Mount Tai. Again, the Confucian influence in this way of thinking is unmistakable.

To conclude this part of the discussion, I want to point out that, *pace* *The Philosophers’ Brief* and Dworkin, VE and PAS is not only an issue of individual vs. state; *pace* Feinberg, this is not only an issue of law vs. morality; it is an issue in a medical setting which

³² The mechanism of family co-determination is not neat and tidy. “Family meeting” after dinner or before bed time is usually an occasion for deliberation and decision together. There is no strict mechanism of one family member, one vote. Family co-determination of course includes self-determination, but the weight of one’s voice varies in different stages of life. In general, we can say that as a small child one’s voice carries a small weight. Family co-determination in this stage is largely, but not entirely, parent-determination. As a teenager and young adult, one’s voice in family deliberation grows much stronger. Family co-determination in this stage is largely individual self-determination. When one is married, and especially after having children, one’s individual autonomy decreases again. Family co-determination is largely deliberation with one’s spouse, taking seriously the opinions of one’s children. Joseph Chan also says it well regarding Confucianism and personal autonomy, “Personal autonomy admits of degree—one can be more or less autonomous, and its value need not be absolute” (Chan 2002: 301).

³³ This modern version of Confucian thought is certainly my re-construction, and I cannot elaborate and give a full justification for it within the confine of this essay.

involves a therapeutic relationship. The doctors' role is unfortunately reduced to a minimum in these arguments of autonomy. Daniel Callahan perceptively observes,

Euthanasia is mistakenly understood as only a personal matter of self-determination, the control of our bodies, just a small step beyond our already available legal right to commit suicide. But, unlike suicide, an act carried out by the person herself, euthanasia should be understood as of its nature a social act. It requires the assistance of someone else and could not take place without it.... [T]he moral situation is radically changed once our self-determination requires the participation and assistance of a doctor. It is no longer a solitary act, but a two-person, social, act. That doctor's moral life and integrity are also, and no less, encompassed in the act of euthanasia. (Callahan 1993: 103–104, 110)

Well-established principles of medical ethics concur that a patient can autonomously refuse treatments, even life-sustaining ones. But a patient cannot autonomously demand a particular treatment from doctors. For giving out treatments, the established medical-ethical guideline is the principle of informed consent. A patient cannot just autonomously demand VE or PAS from a doctor; he needs to get the doctor's medical opinion and approval. What if both the patient and the doctor agree on euthanasia as the best treatment for the patient? Even in this case, there is an important missing stake-holder from the Confucian perspective, viz., the family. Family co-determination, rather than individual patient self-determination, is the norm of medical ethics in mainland China and Hong Kong public hospitals today.³⁴ This is certainly in continuity with the Confucian family-oriented ethics I analyzed above.

In short, Confucian ethics has different degrees of consonance and dissonance with the three arguments for VE and PAS. None of them is deemed fully convincing, and the dissonance is the greatest with the argument of individual autonomy.³⁵

12 Further Thoughts

“Euthanasia” in the etymological sense of “good death” is agreeable with Confucian Thesis I. SIMA Qian’s point in distinguishing deaths that are weightier than Mount Tai from deaths lighter than swan’s down is, precisely, to distinguish good deaths from bad or valueless deaths. Confucianism never had a doctrine of the sanctity of human life, and so never deemed suicide intrinsically wrong. In some circumstances, death by suicide is a better death than a “natural” death. However, we should also note that “good death” in Confucianism does not mean a dying process which is swift, peaceful, and free of pain, but a death for the sake of *ren* and *yi*, a death that can render service to others, or a death that expresses abiding dedication to others.

³⁴ For a wonderful discussion on family co-determination in Chinese medical ethics, see Fan 1997: 309-322. Fan’s phrase is “family-determination,” but I think “family co-determination” is a more accurate description. Fan’s essay uses Chinese as well as Japanese sources for his argument. Family co-determination certainly includes the patient himself or herself. When there is disagreement within the family concerning whether or not to consent to a proposed treatment, Hong Kong public hospital doctors will hold family meetings to resolve the disagreement.

³⁵ George Khushf has correctly pointed out that it is contemporary liberalism that Confucian ethics has more trouble with. For classical liberal thought such as that of *The Second Treatise of Government*, in which individual autonomy to suicide is ruled out, there will be less dissonance between the two. See Khushf 1999: 112-118.

That being the case, one might wonder if, as Confucian Thesis I justifies altruistic suicides, we can infer that it also justifies altruistic euthanasia, i.e., requesting euthanasia for the sake of relieving the burden (emotional, financial, and otherwise) to others (family and society)? It is not clear to me that Confucian Thesis I does this work. Most altruistic suicides in ancient China were in the form of rendering a positive benefit to others. Altruistic suicides in the form of negatively removing a “burden” to family and to society were not encouraged (see Battin 1996: 84–93). This is because according to the Confucian social vision, the good society is known as “Grand Union” (*datong* 大同), which occurred in the Golden Past: “They showed kindness and compassion to widows, orphans, childless men, and those who were disabled by disease, so that they were all sufficiently maintained” (see *Li Ki* 1992: 365). Furthermore, the elderly were highly esteemed in ancient China; they were considered “senior citizens” in the literal and positive sense. Hence, the sick elderly were not allowed to be seen as “burdens” to anybody at all. If altruistic suicide for the sake of relieving others’ “burden” was to be discouraged, altruistic euthanasia for the same reason would be discouraged as well.³⁶ This essay is limited to a Confucian moral evaluation of euthanasia and physician-assisted suicide and does not touch on public policy issues. Hence, the *moral* conclusions above do not have a direct bearing on *legal* issues such as the legalization of euthanasia and of physician-assisted suicide, which involve issues not examined in this article, viz., probable societal consequences (intended and unintended) of such changes of law, the potential for abuse, etc.³⁷ These factual issues vary from society to society and there is no single solution that fits all societies.

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³⁶ Callahan observes that “there is a peculiar irony in the contention that, in cases of severe suffering, our human dignity can only be achieved by having another person kill us, or by providing us with the means to kill ourselves. It is a way of saying that we cannot achieve dignity on our own in some circumstances, but must turn to the community to make it possible.... Yet it is a strange kind of community that would require consensual homicide to realize its members’ individual dignity” (Callahan 1993: 115).

³⁷ For example, the Executive Summary of a study by New York State concludes, “The Task Force unanimously concluded that the dangers of such a dramatic change in public policy would far outweigh any possible benefits. In light of the pervasive failure of our health care system to treat pain and diagnose and treat depression, legalizing assisted suicide and euthanasia would be profoundly dangerous for many individuals who are ill and vulnerable. The risks would be most severe for those who are elderly, poor, socially disadvantaged, or without access to good medical care.... Some Task Force members do not believe that assisted suicide is inherently unethical or incompatible with medical practice. On the contrary, they believe that providing a quick, less prolonged death for some patients can respect the autonomy of patients and demonstrate care and commitment on the part of physicians or other health care professionals. Nonetheless, these members have concluded that legalizing assisted suicide would be unwise and dangerous public policy” (New York State Task Force 1994: ix, xiii).

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AUTHOR QUERIES

AUTHOR PLEASE ANSWER ALL QUERIES.

- Q1. The citations “Lo Ping-cheung 1999” found in footnotes 2, 3 and 11 was changed to “Lo Ping-cheung 1999a, b”. Please check if appropriate.
- Q2. “Li Ki 1992” was cited here but not found in the Reference list. Please provide complete bibliographic information. Alternatively, delete the citation in the text.
- Q3. “Analects 1992; Ping-cheung 2005; Mencius 1984 and Songshi 1977” were not cited anywhere in the text. Please provide a citation. Alternatively, delete the item from the list.