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EVALUATION OF THE BIO-ETHICAL PRINCIPLE: 'SANCTITY OF LIFE'

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In bioethics we study many situations related to health and health care. We also try to provide certain norms, abiding to which we can have a system of ethically acceptable medical practices. Some of the issues are concerned directly with life such as abortion and euthanasia. In such issues there is a strong position taken by those who are against these practices. It is called the sanctity of life position.

The phrase "sanctity of life" occurs frequently in modern discussion, yet is rarely explicated and understood.

To say that life has sanctity (or is sacred) is normally to say that life *per se* has sanctity. For the assertion is meant to be distinguished from the view that the value of a life may depend on its quality, condition, or circumstances. To the 'sanctity of life' proponent, lives have sanctity regardless of the degree or kind of suffering, deterioration, dependency, or development they manifest, and regardless of the imminence of death, the burden on others, and the wishes of the subject to live or die.

Therefore, the 'sanctity of life' position is opposed to any position that allows the value of a life to vary with its condition or circumstances. Such positions are usually collected under the name 'quality of life' theories. This view says that life in itself is not worth living. It is the quality of life that makes it liveable or non-liveable. Thus we can broadly say that there are two contrasting positions- sanctity of life and quality of life. (Hereafter referred to as SL and QL respectively)

What does it mean to attribute sanctity —as opposed to every great value— to a life? The answer seems to have these two parts:

- 1. The value of life exceeds all other values. No other value overrides the value of life except possibly more life.
- 2. All lives are of equal value. No single life deserves priority over another, not even the most fit, hopeful, and developed over the most vegetative, wretched, or immature. Possibly a plurality of lives may take priority over any single life, or a single life may take another in self-defense.

Many arguments proclaiming the sanctity of life are premised on the belief in a creator of life together with the belief that life is a gift, which this benevolent being has bestowed upon the living. Since it is a gift it must be preserved under any conditions is what SL says. But QL doesn't agree to it. It states that some gifts are not worth keeping. If the quality of life is deteriorating due to continual of life, it's better to die or to let die. But if we disregard this gift and allow voluntary death or abortion in genuine cases (where death is the only better solution) then there is a danger of going down the slippery slope.

Many people say that sanctity of life presupposes the existence of God. But what about those who are atheists? Why should they believe that life is a gift from God when they don't believe in God? It is a secular age and hence basing the moral worth of life on the premise that it is a gift from God doesn't seem to be a strong argument. Theological infrastructure to the SL is an inadequate brake for the slippery slope. Hence, though the slope argument is an integral feature of the sanctity of life principle, if it is to have any validity in a secular age, then arguments regarding the moral status of life must be shown to be independent of arguments about the nature and function of the creator of life Hence a better option is to replace the SL principle and all of its theological ramifications with a principle concerning the 'value of life'. We can say that this is another version of SL. There is no basic difference between this version and the earlier one i.e. one which believes in life as a gift from God. This latter version is expressed as "life is worth living". The reason why it is wrong to kill is that life is worth living. Thomas Nagel says that 'even if one is undergoing terrible experiences, it is good to be alive'. If 'life is worth living' is accepted as an absolute principle, there can be no watering down of the principle to accommodate the situations where killing is recognised to be justifiable. In some circumstances where killing is justified (e.g. Self defence), there is no breach of the principle that life is worth living. Also if its an absolute principle, it must be capable of providing moral justification for actions and it itself doesn't require any justification. Life is worthy in itself. To ask for certain features that make life worth living is itself a mistake. There will be diversity in the answer to the question 'what makes life worthy?' Once we settle down on specific criteria determining life's moral worth, we have stepped on the slippery slope. Looking at this from the other side, what would be the overall effect if it were generally accepted that life had no value at all? This would result in accepting the world without moral value, pity, compassion, hope and understanding, all of which depend on the presumption that life has a moral status.

Also, in a secular age, if we don't want to state the principle of sanctity of life as a general principle that says life is a gift from God, then we can state it, as life is a gift from nature. It is something given to us without we asking for it; without our

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deliberate choice. Hence it is appropriate to say that it is a gift. But those against SL view argue that some gifts are not worth keeping. I would say that life is not only a gift - something given once for all. It is a gift plus something. We have a duty towards it along with the enjoyment and happiness that we derive from it. It is like a mortgage, which has been given to us to take care of. We have a duty of preserving it until it is not taken back by nature itself.

The QL proponents argue that a life, which has 'quality', only is worth living. If it lacks that then it is better to die. But who is going to decide the quality? The concerned patient only. The doctor or the physician, in no way can judge it. From his external conditions we may think that he is living a poor quality life. But actually it may not be so. His definition of a 'quality life' can be confined to his mental state and he may be mentally very content though he has physical unwellness. Then should we give him euthanasia? And suppose the patient himself thinks that his quality of life is so bad that it is better to die then too should the doctor give him euthanasia? He might be demanding death because of unbearable pain. But if we try to find out the innermost instinct, any person wishes to be immortal and hence go on living. No one wants death. Also while the patient demands death, his psychological condition might not be stable. To the question that should each person determine the value of life subjectively or it should be an imperative that is universally accepted or made to accept? Harris claims that 'A person will be any being capable of valuing its own existence. A life that is valued should not be terminated and a life that is not valued should not be prolonged'. But there is a slippery slope objection. How do we know- for sure- that the life is not valued? Also how do we know in the borderline cases involving dementia, adolescence, Down's syndrome, over reaction to pain or disease, frustration in the love affairs and various forms of insanity- that the capacity to value life has been impaired by these states? In such cases paternalism takes order to save life or individuals. Harris says "To deny people the power of choice over their own destiny is to treat them as incompetent to run their lives." But paternalism doesn't always entail any significant loss of autonomy. Autonomy is an important factor when taking into consideration the moral status of other people, but there are many other moral requirements which can legitimately overrule it. Many of us do require others' help in situations where we lack experience or we have high regard for another person's competence in such matters. Paternalism is also recognised in law sometimes. E.g.: There are laws concerning crash helmets for motorcyclists and seatbelts for motorists and in Indian government's attempt to prevent women from practice of 'Sati'.

Sometimes the prevailing attitudes of a society can affect an individual's self evaluation. An individual may have no value for his life because the surrounding culture doesn't place any value on that individual's life. In such cases, can we say that the desire for death is completely autonomous? Therapists who deny death requests of the patients do not wish to disregard their autonomy; but are optimistic about the recovery of patients.

Suppose we find out that the patient really is not able to tolerate the pain and really wishes to die and hence if we allow his death then we are in a way taking the first step of the slippery slope. Death, once allowed, is likely to become a trend, even if the pain is bearable or in cases of minor reasons which otherwise would have been unacceptable. No SL position can allow extremities of pain, cost, indignity, insentience, or hopelessness to override the value of life.

In case of abortion, why should we allow a fetus to be killed? The QL proponents would say that if all precautions of contraception have been taken care of and yet the mother conceives a baby, then she has the right to abort it if her quality of life is going to be deteriorated by his birth. She might have planned her career to which this child would be an obstacle. The body belongs to her and she has the right to decide whether to allow a baby to grow inside it or not. But wouldn't this be a selfish reason to kill a life? Can career or money have greater importance than life? If yes then some day if the lady's husband is an obstacle to her progress in her career, then why not kill him too? If the same principle is applied everywhere, who is to be excluded from killing if they act as a barrier in our progress? Can we allow killing in case of fetuses, only because they can't claim their rights and they are not fully grown humans? But they do have the potential to grow and develop into complete persons. And to respect and protect their rights is the duty of those who are full-grown persons. And again there is a danger of slipping down the slippery slope once QL position is accepted and killing is allowed on the basis of it.

There can be an argument of quality of life of the baby too. What if while scanning a pregnant woman it is found out that the baby is deformed or has extreme inabilities or is handicapped? In such a case the baby will not be able to life a normal life and will have to suffer throughout his life. He will not be leading a quality life. So it is better to abort him to save him of his pains and low-quality life and also to lessen his burden to the society. But again here too we have the risk of slippery slope. Most physicians would say that the commitment to the preservation of life is essential to the Hippocratic tradition. In case of mercy killing- it might be necessary to kill, on occasions, out of a sense of mercy, but that very motive might be corrupted by those with an interest in a more extended program of killing.

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During the World War II when Hitler allowed a deformed boy to be euthanised no one knew that this overtly simple looking act would turn out to be the cause of so many deaths of Jews later on. Even if we find out that the baby is a deformed baby, we do have many institutions in our society to look after such people. Is death only the solution to such persons? Can't they still live as much good life as is possible within their limitations?

The QL proponents say that in actual life we have some values, which we value more than life itself. E.g. The soldiers value dying for country more than their life. Patriotism is placed higher than life. Yes, this is true. But why is patriotism valued more? It is because the soldiers die in the war that the civilians are safe and can live. That means the soldiers accept death for the sake of life- not of oneself but of others. So in this case too ultimately life is given the highest priority.

There have been attempts to put forth alternatives to the SL theory.

If we use utilitarian argument to provide an alternative to sanctity of life principle, the same argument can be used to provide premises supporting killing of lives. Using utilitarian doctrine, one may say it is wrong to kill because of the consequences are such sorrow of relatives or horror suffered by the witnesses. But under appropriate circumstances, they can always be eliminated thus leaving the belief in the wrongness of killing without any support.

The religious standpoint towards these issues also supports the SL position. They state that all sufferings are only the results of our deeds and hence to put an end to them is going against the natural order of actions and their fruits. (*Karma* theory) One can't actually go against it. Even if we think we have put an end to it, it is not really so. We will have to face them after death or in the next birth. So it is always better not to try to put an end by intervening in the natural order. The QL proponents would obviously not agree to this view as for them only living a good quality life is important. They state that it is better to die with dignity than to live in suffering and dependence.

What the QL proponents say is not totally incorrect. It happens many times that the patient is a burden-financially or in any other way, to the relatives or family members. In such cases it is obvious that the patient feels the need of euthanasia. Also sometimes the life of the mother is in danger due to the fetus. Then the preference is given to the mother and the fetus is aborted. The SL proponents also agree that the life of the mother is more valuable as she is a full-grown person. There is also the question whether one life may be sacrificed to save many. Many SL proponents support the death penalty, self-defense in excuse of homicide, and certain wars on the theory that more lives are saved than lost. But they resist generalizing the principle to an arithmetic formula. In some cases we have to opt for killing of life but that too is out of the view that life has sanctity.

The greatest danger of accepting QL instead of SL in medical practices is that of slippery slope. Also as said above it will lead to a chaotic world without any emotions like compassion, mercy and respect for life. Considering these consequences SL is a plausible position. Also from the point of view of deontological ethics SL is the only acceptable position.