

## DAVID VELLEMAN ON PHYSICIAN-ASSISTED SUICIDE & SUICIDE NOTES FOR PHILOSOPHY 162

“That’s what I miss in so many discussions of euthanasia and assisted suicide: a sense of something in each of us that is larger than any of us, something that makes human life more than just an exchange of costs for benefits, more than just a job or a trip to the mall. I miss the sense of a value in us that makes a claim on us—a value we must *live up to*” (p. 612).

**Velleman in a nutshell; an interpretation.** The numbered points interpret Velleman’s position in “A Right to Self-Termination?”. Arneson’s comments and questions appear in wavy brackets—like this {}.

1. Satisfying your interests is not unconditionally valuable; it is only valuable if you are valuable.
2. Being a rational agent (a person), you are valuable. Every person is unconditionally valuable.
3. Personhood, rational agency capacity, commands respect. This is the fundamental moral command.
4. Destroying your rational agency capacity to satisfy some of your interests fails to respect your rational agency capacity and is therefore morally wrong. (Giving up what is unconditionally valuable in exchange for what is only conditionally valuable is incoherent and morally wrong.)
5. Suicide for pain relief is morally wrong. Doing what you know will kill you for pain relief is also wrong. Smoking—seriously (risking) shortening your life just for pleasure—is wrong. {Further questions: Drunkenness for conviviality? Any recreational mind-altering drug for fun? Naps for contentment? Lying on the beach when you could be developing your mental capacity? Participation in any dangerous sport? In any nondangerous sport that still involves some risk to mental capacity? Taking painkillers that dull your mind just for pain relief? On what basis do we draw lines between what is permitted and not on this view?}
6. Rational agency is not a value to be promoted and maximized, rather a value to be respected where it exists. So for example, there is no obligation to make as many babies as possible, to create more rational agents. {Is it permissible or not on this view to sacrifice your life to save the lives of several others?}
7. Respecting rational agency in yourself and others is compatible with choosing death in some circumstances. Choosing one’s death when one’s rational agency is becoming severely compromised may be respectful of rational agency, like destroying a tattered national flag rather than letting it become a rag. Possible scenarios fitting this description include advanced dementia and unbearable pain that precludes thinking, choosing, and agency. In these cases, helping someone to die will not be straightforwardly respecting the person’s rational autonomous choice to die, because the person’s lack of capacity for rational autonomous choice is a condition for the choice being permissible, one a rationally autonomous person who respected rational agency could make. We are in a gray area—the person must be choosing to die, welcoming death, but the person’s rational capacity must be fading, so the choice of that person cannot be fully rational and autonomous. Velleman denies we are in a Catch-22 situation here—only a choice to die made by a rational, autonomous, rationality-respecting person could make bringing about the death of the person legitimate, but unless one is NOT a rational, autonomous, rationality-respecting person, the choice to die could not be rational, autonomous, and rationality-respecting and could not make bringing about the death of the person legitimate.

\*\*\*\*\*

Consider these suicides and choices to kill a person (or risk killing, or risk dulling the mind of a person): Which, if any, might be morally permissible? What verdicts do you think you would arrive at, following the Velleman approach? Does the Velleman approach yield intuitively acceptable verdicts about cases or not, in your view? Why or why not?

1. Suicide for pain relief.
2. Suicide chosen by the pouting young man (his rational, autonomous fully voluntary choice is to spite the world for a minor disappointment by killing himself).
3. Acts that bring some gains and that also involve some cost or risk of death or temporary or permanent decrease in rational agency capacity.
4. Suicide by a 20 year old person in the face of cancer, treatment for which would be painful, and chances for recovery so-so. The same choice, except that the person is 60 years old. The same choice, except that the person is 90 years old.
5. Giving all of your savings to charity relief, which might leave you without resources needed to purchase medical care necessary to save your life in some possible scenario. Giving any of your savings to charity relief, which might leave you without resources needed to purchase medical care necessary to save your life in some possible scenario.
6. Risking your life by plunging in the raging river to save the baby child of your beloved. Risking your life by plunging in the raging river to save the handkerchief of your beloved. (He has accidentally dropped his handkerchief, of which he is very fond, in the raging river.) Risking your life by plunging in the raging river for a swim upstream; this will be the most excellent athletic performance of the year (decade, century, millenium), if you succeed.
7. Suicide by an old person, beset by life-threatening illness treatment for which is painful, extremely expensive, and not very likely to effect a cure, in order to reduce financial and personal care-giving costs to close relatives.
8. You have signed an advance directive stipulating you want to be killed painlessly if you become demented. Now you are demented. Imagine two versions of the case: (a) you are confused and seem to be in considerable mental anguish. (b) You seem contented in an animal-like way. You enjoy lying in the sun and eating peanut butter.

\*\*\*\*\*

One could agree with at least part of the quoted statement by Velleman at the top of the previous page without agreeing with his full position (as stated in “Velleman in a nutshell” or in your own construal. One might take the line that except in unusual tragic circumstances, having the opportunity to live a human life is a great chance to do good for self and others, and one is obligated to make something good of that opportunity, not waste it or squander it. There is then a value in us that makes a claim on us—a value that we must live up to. This vague obligation leaves each individual enormous freedom to live as she chooses, but there are limits. Some suicides, such as the pouting young man suicide, exceed the limit. Others do not. This line of thought is compatible with holding that rational agency capacity, though a great good, is finite, does not trump all other goods. So exchanging loss or risk of some loss of rational agency capacity for other goods can be acceptable, contrary to Velleman’s no-exchange thesis.

The view that each person has a right to live as she chooses provided she does not harm others in certain ways yields the judgment that each person has a right to commit suicide for any reason she chooses (so long as the suicide does not involve wrongful harm to others—e.g. breach of contract). In particular, both (a) the pouting young man suicide and (b) suicide for pain relief of a person facing terminal illness are suicides the person has a moral right to perform. Velleman’s view would have it that both a and b are morally wrong and for essentially the same reason. The view lightly sketched in the previous paragraph can hold that a is wrong and b is morally acceptable. More generally, one might look for a view that divides the cases in intuitively acceptable ways.