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Book Reviews

Suicide and Euthanasia: The Rights of Personhood

Samuel E. Wallace and Albin Eser, Editors

The University of Tennessee, Knoxville, 1981, ix + 150 pp., \$12.50.

This volume sets out to develop a general perspective for examining suicide and euthanasia and their relationship to one another. The perspective is termed "the rights of personhood." A number of different viewpoints are offered which throw light on the significance of these acts. For example, death is "social," that is, there is a sundering or profound transformation of role-expectations and relationships which precedes actual, physical death. But an unfortunate ambiguity enters in when it is suggested that it is at such a point that personhood may be lost (p. 8), or that the body lives on in a new person. The awareness of the social, relational dimensions of death can illuminate significant elements of responsibility, for example, of the dying person for the survivors.

How are ethical choices to be made in regard to these acts? This question is addressed in an article by Joseph Fletcher who brings to the problem his well-known situation ethics. The main features of this are familiar and need not be discussed again here. At one point, Fletcher argues that the right to die cannot be justified when it invades the well-being of others, but when it is truly and only a personal choice, it is right. To deny this, according to Fletcher, is to reduce persons to functions of an extrinsic system. It is noteworthy that, as the argument proceeds, the social dimension fades from view and the completely autonomous, isolated individual becomes the sole referent.

A more tightly argued ethical treatment by Glen C. Garber ultimately comes to a similar, fundamentally consequentialistic conclusion. The option to kill oneself is rationally justified if it is likely to produce a greater total value than the other option. The situation may reveal that a person is better off dead. Again the social dimension is set aside.

A following article returns to the social aspect and assesses the rights of the survivors. What is called for in many cases is rehabilitation, rather than arguments to justify suicide. However, there are different kinds of suicide and a suicide may be justified when one has set in order his/her relationships with others. Justifications would be, for example, to obtain surcease of pain, to avoid loss of honor. Correspondingly, voluntary euthanasia would be allowable in some cases.

This leads to a discussion by Robert Twycross of euthanasia as assisted suicide (p. 87). Here the focus moves from somewhat abstract ethical arguments to the realities of pain management. Persons who request euthanasia may frequently be seeking care or responding to fear of pain which can, in fact, be alleviated by proper treatment. Twycross argues that to pursue legislation to allow voluntary euthanasia would be unwise (p. 97). This more realistic perspective is, unfortunately, obscured when the ambiguous notion of personhood is reintroduced by the editors. It is argued that if one has already died socially, it is only right that the physical body should follow where the social self has already gone (p. 101). We would seem to have here a new version of an older dualism. The dualism of soul/body is replaced by the dualism of social self/body.

In an interesting discussion of sanctity of life and quality of life arguments, co-editor Albin Eser presents a historical account of the evolution of (Germanic) law, showing how Christian influence led to a stronger legal protection for all

human life. The same article argues for a legal position where it is recognized that such a supreme good as life can neither be exclusively protected by sanctity commands nor be given over to quality of life aspects. The warnings, sharpened by the experience of Nazism, might well be noted by some of the earlier authors.

The articles on the social, medical and legal aspects of the question are valuable contributions to the discussion. The more specifically ethical articles are marred by the ambiguous notion of personhood which veers between the social self and an individualistic, isolated self. But at least this points to where the real issue lies: an adequate understanding of the human person.

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Health/Medicine and the Faith Traditions: An Inquiry into Religion and Medicine

Martin E. Marty and Kenneth L. Vaux, Editors

Fortress Press, Philadelphia, 1982, xii + 350 pp., paper, \$6.95.

This volume is an invitation to an inquiry involving both medicine and theology. It is a timely project. As the eminent philosopher, Alasdair MacIntyre, has argued, there is a need for a more explicit theological witness in contemporary biomedical ethics. What is needed is a clear statement of the difference it makes to be a Jew or a Christian or a Moslem rather than a secular thinker, a theological critique of secular morality, and indications of how a theologically-based ethics relates to specific questions (p. 216). Prof. James M. Gustafson has criticized the abandonment of theological perspectives by many theologically trained writers. The studies contained in this book are the beginning of a concerted endeavor to supply for these deficiencies.

In the current literature there is an abundance of articles on particular ethical questions, but a scarcity of systematic study of different fundamental value systems and their implications. The work reviewed here is an introduction to such a study. The volume introduces what is called "Project Ten" or "Health/Medicine and the Faith Traditions" which aims to investigate 10 "life themes" common to both medicine and religion and to explore them in the light of 10 world faith traditions. The project is based at Lutheran General Hospital, Park Ridge, Ill. The themes will be well-being, sexuality, passages, morality, dignity, madness, healing, caring, suffering, and dying. These will be confronted with the world religious traditions: Judaism, Eastern religions, Roman Catholicism, Eastern Christianity, Islam, Lutheran Christianity, the mainline Reformation traditions, the Evangelical communions, 19th century religions, and native traditions.

This volume introduces the project and, while it can stand on its own merits, is expected to serve as an introduction to future volumes where the topics will be dealt with in greater depth.

Those engaged in medicine at the practical level may encounter the intertwining of religion and medicine in responding to the particular beliefs of sick human beings and their relations. This delicate and often difficult question is dealt with in valuable articles in the section on medical perspectives. The socio-cultural and historical studies of the relationship between religion and medicine provide a