The Outline of Communal 'Ars Moriendi' in Egalitarian Transhumanism



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Abstract: This paper outlines the proposal for an egalitarian, transhumanist, and communal version of *ars moriendi* that should be coherent and meet the consequentialist criteria of the principle of minimizing anti-values and maximizing values, especially the ethical values of freedom and happiness. Transhuman-ist augmented dying (AD) refers to the extended body-mind, free from harmful religious and political ideologies. At present, a feasible art of dying can be systematically supported by anesthetics and psy-chedelics (entheogens), computer games, virtual reality, and good death machines. Its egalitarian form requires a deeply democratic society, and its progress may need a transition to a type 1 society on the Kardashev scale.

Keywords: Transhumanism; *ars moriendi*; egalitarianism; psychedelics; freedom; happiness; the ideology of dying; the extended body-mind.

Introduction

Do not go gentle into that good night.

Rage, rage against the dying of the light.

Dylan Thomas

The dying, being the weakest, are abandoned to suffering, slavery and injustice by most philosophies and religions. There is a substantial disparity between what we can do for them in 21st century societies, and what we really do for them. Despite some positive practical changes connected to social and technical advances, like hospices, painkillers, etc., dying is not much different now than it was in Middle Ages. The problem is that it does not have to be this way.

Although Epicurean, Stoic, Zen and existentialist teachings can still help us to keep dignity and bravery in the face of death, a lot has to be done for those who depart. Most palliative care institutions are unable to apply all the available medical, chemical and technological means: some of them are too expensive or inaccessible, and others are illegal. Transhumanism usually focuses on conquering death, not on alleviating dying. I suggest its development toward the nearer and easier goal: changing dying for the

better. Transhumanist ars moriendi aims to overcome traditional painful, class-ridden, superstitious human dying and move toward something post-human, using modern knowledge, technology and art.My proposal for the transhumanist art of dying is based on the metaethical foundations I began developing in my previous articles (Polowczyk 2017, 2019): consequentialism, the matrix of three main ethical values, and the three principles of maximizing values. This pluralist version of consequentialism states that not only happiness (well-being or utility) should be taken into consideration, but also (at least) freedom and justice. According to this position, conscious beings ought to maximize values (happiness, freedom, justice) and minimize anti-values (misery, slavery, injustice). This is the maximalist version of this metaethics. The minimalist version advocates preserving values. The values and anti-values are conceived of as rooted in a web of social and natural relations. The consequentialist facet of the proposal concerns the realization of ethical values for as many sentient beings as possible: the amount of good must be as great as possible for as many human and non-human animals as possible. Ethics is a social science that aims to actualize values and check their actualization empirically. My proposed conception of egalitarian transhumanism actively supports providing equal augmentation opportunities at least in some respects to all. Humans should not be punished for having inferior natural features or for their involuntary social conditions (weaker bodies, lower intelligence, poorer parents, citizenship of poverty-stricken and less socially developed countries). They must not be rewarded for their undeserved natural and social conditions (stronger bodies, higher intelligence, rich parents, etc.) Those properties (1) are not chosen, not-culpable, not merited (Polowczyk 2017, 2019), (2) promoting equality can produce good social outcomes (Pickett, Wilkinson 2011), and (3) greater opportunities for the advantaged can create an enormous disparity of power, freedom, and happiness between humans and new augmented super-humans.

From the social justice perspective, the egalitarian society of augmented dying requires active egalitarianism in supporting equal opportunities, so it stands against oligarchic fake democracies and is in favor of deep democracy, participatory democracy, deliberative democracy, and direct democracy. These social institutions enable the existence of egalitarian good dying. The proposal assumes that elitist plutocratic capitalism and its possible successor – technologically advanced neo-feudalism – will not triumph. Egalitarian transhumanism develops similar arguments to egalitarianism in general, but the defense of egalitarianism is not the subject of this article. The general insights of egalitarian arguments and egalitarian conceptions of social justice form the premises of the article. The main topics are the dying of the extended body-mind, its freedom and happiness (in the narrow sense of pleasure), yet the maximization of freedom and pleasure are meant to aim at a just and egalitarian (proportional, impartial) society.

The paper outlines a project of ethical augmented dying for the possible near future, and puts forward preliminary arguments for its actualization. The author could not find this type of philosophical and practical project in the literature, although a lot of its elements are present here and there. To be feasible, this tentative project needs a great deal of philosophical investigation and empirical research, and it has to meet a lot of technological and social criteria.

I. The Subject of Good Dying

It is helpful to use the notion of the extended mind (the EM) to analyze the situations of dying and augmented dying. The significant contribution of the extended mind theory (the EMT) is that it shows that the mind is not restricted to the brain: it can be narrowed or extended, and distributed in the social and technological environment. We are increasingly becoming 'biotechnological hybrids' (Clark 2003), or developing a bio-technological mind (Clark 2002). The extended mind implies an extended self (Clark & Chalmers 1998, 18). The self is not reduced to consciousness or to "a mere bundle of occurrent states." Dispositional beliefs are not a part of the conscious mind, but they constitute the broader self. The self is "an extended system, a coupling of biological organism and external resources" (Clark & Chalmers 1998, 18) like notebooks, pens, slide rules, telescopes, computers, etc. As Clark puts it:

Much of what matters about human intelligence is hidden not in the brain, nor in the technology, but in the complex and iterated interactions and collaborations between the two (Clark 2001, 154).

EM does not depend on or apply only to our couplings with *new* technologies. We are cyborgs *by nature*, and the human mind has *never* been bound and restricted by the biological skin-bag, ... the ancient fortress of skin and skull (Clark 2003, 4–5).

I would rather opt for calling most contemporary humans 'proto-cyborgs' to differentiate between our flexible nature and a real post-human machine whose nervous system is physically hooked up with devices. The body can be also extended, e.g., by chips, bionic eyes, prostheses, artificial hearts, and exoskeletons, so it is justifiable to discuss the extended body-mind in the process of dying. The contemporary extended mind-body is the way to future cyborgs - some humans are already cyborgs (e.g., Neil Harbisson and Kevin Warwick) and are legally approved as such. As with any technology, the technologically extended mind-body offers more capacities and powers, as well as more dependency and new threats. The extended mind enables a profound interconnection between the mind and society. The extended body in the form of bionic eyes makes us both much stronger and more dependent. We are still bio-social processes, but with growing connections with our extensions. This gradual integration can be used for the benefit of all mankind, and – obviously – for the dying. Dependency is not necessary against freedom, above all when what you depend upon becomes a part of your body-mind and embodies ethical and aesthetic values. Strategically speaking, the system of positive dependence should be combined with relative independence securing the body-mind in the case of systemic problems. The extended body-mind is the subject of good dying in transhumanism, or more precisely part of it; some simpler elements of coupling exist after the death of a more complex body-mind. The extended body-mind seems to be the most suitable candidate for the subject because it does not determine what kind of bodily and mental features it represents, or how human or non-human it is. The subject is dynamic, processual, and can be reduced or enlarged, dismantled or augmented. Its limits are changeable and fuzzy. The notion of the extended body-mind explains the social and technological influences on the mind, their profoundness, their quickness, and reveals straightforward materialism which unduly separates ideas and matter, ideology and material practices. Simultaneously, the concept keeps us away from the philosophical and historical idealism.

The extended mind impacts society and technology and is also shaped by them. Certain forms of that impact are positive, cooperative, compassionate, cognitive, etc., while others are negative, addictive, humiliating, stupefying, etc. Subjection, idle talk, and ideologies are particularly relevant to the process of dying. I don't claim that these concepts are perfect, and that all their facets are accurate, true and coherent, but that they are worth developing in the context of transhumanist *ars moriendi*.

What views are responsible for keeping bad dying 'alive'? Societies of the 21st century are capable of bringing people augmented dying but they do not fulfill their potential. Must we die like people a thousand years ago, when our civilization provides powerful means to end bad traditional dying? Why do certain traditional communities experience better dying than the modern human race – by using currently illegal painkillers and psychedelics? Some critical thinkers can offer us a glimpse into the answer to that question.

II. The Project of Transhumanist Augmented Good Dying

Death is not a problem (Epicurus), as it is value-neutral, but a longer, good and creative life is of eminent value. Therefore, humanity should prolong mainly this type of life. Life is of relative value because it is valuable if values prevail over anti-values. Life is not an absolute value. An extremely bad life (anti-values or negative values) is worse than death (neither values nor anti-values). Life in hell is worse than non-existence.

Dying is a real problem. Dying ought to be made less painful, less unjust, and abundant in possibilities. Dying ought to actualize values and minimize anti-values as much as possible. Traditional dying is a terrifying process that can be mitigated in many ways. Epicurus disenchanted death, showing that it is nothing to the living, Aubrey de Grey did the same with aging, treating it as just a disease, and transhumanism de-ideologized the common acceptance of death, appreciating longer lives and physical immortality. Now it is time to do the same with dying. The dying of the extended body-mind. The extended mind is not necessarily the augmented mind. My mind can be extended by social relations and social thinking, but social relations can be harmful and thinking false. The augmented

mind demands positive changes, social, cognitive, emotional, aesthetic, etc. Its possibilities grow with the development of society, technology, art, and science. The same goes for the body. The mind has been extended and augmented with the onset of civilization by more complex social relations, basic technologies, and works of art. At present, the difference is in the pace of implementing extensions and augmentations in the modern, digital society (e.g., the exponential increase of the number of transistors on integrated circuits, the power and speed of computers (Roser, Ritchie & Mathieu 2013), and the role of computers and information technology, and successful attempts to connect the nervous system and the brain with devices. In short, we are living in the epoch of the transition from protocyborgs to cyborgs.Let us start with the prevalent opinions about good dying. What is good dying? "We identified 11 core themes of good death: preferences for a specific dying process, pain-free status, religiosity/spirituality, emotional well-being, life completion, treatment preferences, dignity, family, quality of life, relationship with HCP, and others. The top three themes across all stakeholder groups were preferences for dying process (94% of reports), pain-free status (81%), and emotional well-being (64%). However, some discrepancies among the respondent groups were noted in the core themes: Family perspectives included life completion (80%), quality of life (70%), dignity (70%), and presence of family (70%) more frequently than did patient perspectives regarding those items (35%-55% each). In contrast, religiosity/spirituality was reported somewhat more often in the patient perspectives (65%) than in family perspectives (50%)" (Meier 2016, 261).

The paper is mainly focused on the patient perspective because dying concerns directly her or him, and not on other stakeholders, such as family members and healthcare providers (HCPs). For patients, the most important are their preferences for the dying process (100%), pain-free status (85%), religiosity/spirituality (65%), emotional wellbeing (60%), life completion (55%), treatment preferences (55%), dignity (55%), family (55%), quality of life (35%), relationship with HCPs (20%), other (40%). Surprisingly, on average patients are less interested in pain-free status (85%), emotional well-being (60%), dignity (55%), and quality of life (35%) than their families (respectively, 90%, 70%, 70%). Although HCPs are less interested in the pain-free status (83%) and quality of life (22%) of their patients, they are more concerned with their emotional well-being (67%) and dignity (67%). Interestingly, religiosity/spirituality is more important for patients (65%) than for family members (50%) and HCPs (59%) (Meier 2016, 261).

Opinions on good dying are usually not based on analyses of empirical data and do not necessarily grasp the most significant features of good dying from an ethical point of view. Not only do patients, their families, and HCPs differ in their characteristics, but for numerous reasons, people can wrongly identify the optimal dying: (a) most human beings usually do not think systematically about good dying; (b) and if they do think about it, their perspective may be distorted by public opinion, religious, economic and political ideologies, the media spectacle of dying, and other factors. Transhumanism

should identify the false opinions of good dying and the determinants behind them, and use relevant insights on dying from philosophy, psychology, and the social sciences. Let us discuss them briefly.

Heidegger does not properly distinguish between dying and death, and he believes death can belong to somebody. Dying is an event in life, but as Wittgenstein puts it, following Epicurean tradition, "Death is not an event in life" (Wittgenstein 2021, 6.4311). Death is not data, death is non-existence. My relative non-existence ('my' death) is not mine because nobody possesses their death since they do not exist anymore. Language is misleading here. However, it is interesting to use Heidegger's conceptualization and descriptions in the analysis of dying - the last event in life. "In Dasein's public way of interpreting, it is said that 'one dies', because everyone else and oneself can talk himself into saying that 'in no case is it I myself', for this 'one' is the 'nobody'" (Heidegger 2001, 297). The anonymization of dying hides the final process. "Death is spoken of as a 'case' which is constantly occurring - means that my dying is concealed as a social inconvenience, tactlessness, and *meditatio mortis* is condemned as cowardly fear" (Heidegger 2001, 298). Humans receive tranquilization for the price of a lack of understanding and inauthentic being. It is worth mentioning that Heidegger's notion of idle talk suits the perspective of the theory of psychological shadow put forward by C. G. Jung (1972). The shadow is what the ego does not identify itself with, but it is the part of the self, the unconscious part. Inauthentic being towards death is analogical to the shadow that is not integrated with the self. Both notions reveal the imperceptibility of dying and death. The imperceptibility of dying makes it very difficult to do anything for the dying: helping them could terrifyingly reveal their disappearing existence. Philosophical than atology (as any value-oriented discipline) must not be limited to descriptions or norms but should also be involved in building a better world. Dying can be augmented in the short-term (augmented dying), and long-term (radically augmented dying). From an ethical point of view, it should minimize suffering and maximize pleasure or happiness, minimize slavery and maximize freedom, minimize injustice and maximize justice. All the goals require specific social, technical, scientific and artistic conditions. The transhumanist art of dying is more a social art rather than an individual one it demands the efforts of large communities. Individual ars moriendi is extremely useful when society is dysfunctional and hostile towards an individual. It is also important to distinguish between defensive and offensive ars moriendi: the defensive one protects good, the offensive one multiplies it. The first is chiefly individual, the second communal.Transhumanist ars moriendi is like contemporary music or multimedia works that use a lot of technology. The transhumanist art of dying harmonizes technology with art, the old and the new, aesthetics with chemistry, information, and machines. Transhumanist dying means augmented dying, dying as painlessly as possible, as just as possible, as free as possible. As meaningful and beautiful as possible. Modern technologies, such as video games, virtual reality (VR), and augmented reality (AR) are able to make dying better. Games can empower patients, and role-playing games are useful "for training

in palliative care" (Fernandes et al. 2022, 1). Virtual reality has a great potential for augmented dying: "The majority of participants enjoyed the experience. Many expressed joy and delight at the process. VR holds possibilities for relieving symptoms such as pain and anxiety frequently experienced by people in hospices. Furthermore, the technology offers the capacity to reconnect with a previous sense of self and to allow respite through the capacity to transcend current reality and connect with another meaningful reality" (Lloyd & Haraldsdottir 2021, 344). Euthanasia is a liberty that is denied to the dying in most countries, but this possibility is essential for transhumanist augmented dying. Some modern technologies are able to support euthanasia, such as good death machines. For example, Sarco, a 3D Printed Death pod, was created by Philip Nitschke, an Australian humanist, and a Dutch industrial designer – Alexander Bannink. The machine is equipped with a flask of liquid nitrogen (Joshi 2019).

III. Minimizing Suffering and Maximizing Happiness

The first step in the battle against suffering is certainly to minimize it with more and more advanced painkillers, up to the point of painless dying. But bias against narcotics prevents medical personnel from administrating them. So even in the 21st century, it is necessary to encourage MHPs: "Physicians must overcome their own fears about using narcotics and allay similar fears in patients, families and communities. Drugs such as corticosteroids, antidepressants and anticonvulsants can also help to alleviate pain. Anticonvulsants can be especially useful in relieving neuropathic pain" (Whitecar et al. 2000, 381). The next step is to render dying pleasant, even ecstatic. Although psychedelic trips may be near-death experiences because our brains are filled with DMT (Dean et al. 2019; Timmermann et al. 2018), to maximize pleasure, we ought to ensure 'the zone' of happiness for those who depart. In the 21st century, we are witnessing a renaissance of research on psychedelics (entheogens). The hypothesis of the psychedelic cause of the evolutionary leap in early homo sapiens has been revived (Rodríguez & Winkelman 2021). Psilocybin was tested with end-stage cancer patients. The substance reduces their anxiety and depression about dying (Grob et al. 2011). "A radical innovation is psychedelic-assisted psychotherapy (PAP): professionally supervised use of ketamine, MDMA, psilocybin, LSD and ibogaine as part of elaborated psychotherapy programs. Clinical results so far have shown safety and efficacy, even for 'treatment resistant' conditions, and thus deserve increasing attention from medical, psychological and psychiatric professionals" (Schenberg 2018, 733). Yet psychedelics are illegal, and the dying are devoid of this chance for better final experiences. Easy access and legalization (or at least decriminalization) of psychedelic drugs plus further empirical and phenomenological research are some of the ways of maximizing happiness.

Easily accessible psychedelics and painkillers are able to maximize values and minimize anti-values. Suffering can be reduced or even transformed into happiness (well-

being). Instead of being focused on our suffering, we have more freedom to do something good: to talk to our beloved, listen to our favorite music, or write our last poem. Equality in accessibility minimizes the injustice of inborn, non-culpable circumstances. Happiness could be also multiplied nowadays by (a) a better aesthetic of dying and death for those willing: being turned into diamonds, interactive graves, compact VR or AR graveyards, (b) 'scientific hope': accessibility of cryopreservation, i.e., possibility of a new life in the future; and (c) postmortem software avatars. In the future happiness could be boosted by gene-editing to make dying less painful or even pleasant, digital immortality in the cloud, mind-uploading into an android or cyborg, merging the human mind with AI, etc. Happiness is here linked to positive freedom: more possibilities, and justice; possibilities for all those willing. The philosophical question is: how to justify pleasant dying as a part of augmented dying? The serious problem in justification does not lie in philosophy or logic, but in religious ideologies glorifying suffering and rejecting transhumanist thinking. Although an orthodox Christian, N. F. Fyodorov was one of the fathers of contemporary transhumanism, and transhumanist versions of big religions are mainly treated as something marginal or as downright heresies. Traditionally, most religious teachers didn't care about any possibility of pleasant dying: the Abrahamic religions are focused on pleasing their god or avoiding his wrath, in Hinduism and Buddhism it is believed that suffering in the process of dying is able to 'burn' bad karma.

Religious ideologies of dying sometimes boost anxiety and fear: to the distress of dying and death, they add the terror of meeting angry gods and demons. Religions usually do not support good dying, in the meaning of egalitarian transhumanist augmented dying, because (a) in the time they appeared there was almost no possibility to make dying better, e.g. less painful, unjust and forced; (b) religions usually want their followers to die in order to experience a kind of afterlife; (c) in some of them, suffering is regarded as a method of penance and imitation of their idols; and (d) priests are very interested in converting the dying by frightening them with hell, and by showing the victory of their institution over a weak, dying human being. The last two reasons make the dying of a devoted Christian the worst. To sum it up, traditional dying and death seem to be in the worldly interest of priests. F. Nietzsche came up with the ideas of Christian nihilism and 'preachers of death'. In his *Thus Spoke Zarathustra* he says:

They have not yet become men, those terrible ones: may they preach desistance from life, and pass away themselves! There are the spiritually consumptive ones: hardly are they born when they begin to die, and long for doctrines of lassitude and renunciation. They would fain be dead, and we should approve of their wish! Let us beware of awakening those dead ones, and of damaging those living coffins! (Nietzsche 2006, 40).

Other obstacles to the happiness of augmented good dying are state ideologies. Nietzsche is a state preacher of death although he fiercely criticizes its religious form. He glorifies the dying and death of warriors, violence, and wars. Hagakure is a Japanese model of the state cult of death and dying. The human race has revealed predatory,

murderous and suicidal tendencies throughout its history, and has produced a lot of rationalizations, myths, and false claims to justify the suffering they have been causing. Most or almost all states do not back up good dying due to: (a) their prejudices against drugs and psychedelics, (b) the influence of religions, (c) economic costs, (d) the attitude that one dies means nobody dies, (e) they glorify dying in wars making it an honor, (f) dying people are the worst voters and one of the weakest groups, they cannot strike, organize, or pressurize politicians. The ideology of the capitalist state overlaps with religious and economic ideologies. Dying subjects are not useful as employees, they are not productive, they are just costs, first and foremost - the poor dying cannot hand over their 'wealth', invest it in business operations, or appear in advertisements. Therefore, they are imperceptible. The rich dying can legally or illegally access additional painkillers and psychedelics, they have the psychological satisfaction that their death will be reported in the mass media, and at least some of them will not be as easily forgotten as the poor. Their advantage over the poor is temporary, but it exists. In Marxist and anarchist terms, the situation can be seen as a part of a class struggle, the final stage of the usually lost fight. The capitalist class mostly wins the class struggle in capitalist society, so the group also achieves victory in the process of dying. The thesis does not mean that the death of the working-class members is always worse: they can be more courageous, more generous, more artistic, and creative, but they do not have the economic privileges of the dominant class, the capacity to buy expensive or generally inaccessible drugs, fulfilling their last wishes so easily (e.g., the last journey), choosing their favorite place.

The first issue here is that we need more research on death – in respect of its natural or psychedelic pleasures. It is necessary to find out the time, the range and the content of the natural possible pleasures of dying, how frequent they are, what determinants they depend upon, and what groups of humans they concern. How long will the extended mind be with us in the process of dying? The findings could be decisive for what society can do to make dying better, with the communal art of dying. Artificial means to augment dying should not impair the natural benefits of dying (if they exist) but must improve and complement the process, otherwise the results may be counterproductive.Is pleasant dying, as a component of augmented dying, a compulsory element of designed transhumanist dying? No, it is not obligatory – masochistic behaviors (religious or non-religious) are still tolerable. (The question is how their prevalence affects maximizing general pleasure or happiness). Everybody can prefer a painful death to a pleasant death. Pleasant dying is just a new liberty, a novel, accessible possibility. Any type of dying, traditional or augmented, should be linked with freedom – more possibilities in this case provide more freedom.

Does pleasant dying go against conscious dying, knowledge of dying, and human curiosity? No. Knowledge, consciousness and curiosity are still accessible, but they are related to augmented dying. Why would the consciousness of suffering and torture be more valuable than the consciousness of pleasure? Hedonism of any kind is not a

necessary condition for the advocacy of pleasant dying. Pleasure could be seen as one of the values, not as the only value or the supreme value. What is assumed here is that in some situations pleasure is more desirable than pain, or that the global maximization of pleasure is ethically better than the global maximization of suffering. Does pleasant dying contrast with courageous dying, or with dying as a heroic act? If suffering by itself marked the quality or quantity of the courage of dying, more suffering would mean more courage. Hence agents ought to seek a higher level of torture. This attitude was characteristic of certain ascetics, more specifically in Jainism and Christianity. In their case, suffering was 'a currency' offered in exchange for redemption or liberation, or it was an imitation of a savior's suffering. This religious masochism is centered on egoistic interests (my salvation) or love for the suffering of 'a spiritual entity' (not on the pleasures of this 'entity'). The type of love is not ethical love due to its maximizing an anti-value: suffering - when other possibilities are accessible and the existence of 'the entity' is at least doubtful. A secular equivalent of the approach can be found in the samurai's cult of death. The question concerns ethical or moral courage. Moral courage can be defined as "the ability to act for a meaningful (noble, good, or practical) cause, despite experiencing the fear associated with perceived threat exceeding the available resources" (Rate et al. 2007, 84). In targetcentered virtue ethics, courage is defined as something that defends values (Hursthouse & Pettigrove 2018), although the description is also useful in consequentialist theories of values and virtues. When one chooses painful dying without the intention of protecting fundamental ethical values (love, justice, freedom, happiness), one selects suffering, and possibly consciousness and knowledge of suffering as a value. Moral philosophy is, on a fundamental level, not the choice of suffering for suffering's sake. Therefore, any masochistic goal is not its goal. Pleasant dying does not mean cowardly dying - because choosing a worse possibility is not an act of courage but a masochistic act. Ethical courage means the power to withstand suffering that cannot be avoided, for a good cause, and does not signify an irrational and masochistic preference for pain and torture.

IV. Minimizing Slavery and Maximizing Freedom

In terms of my suggested version of consequentialist metaethics, ethical augmented dying must maximize freedom or at least preserve this value in response to particular circumstances. I propose to differentiate the following philosophically significant (in relation to our topic) *types of freedom*: (1) existential (original freedom, the necessary condition of other types of freedom): the possibility of choice between one's own life and death; (2) proto-axiological freedom: the possibility to choose between values and antivalues; (3) proto-epistemic freedom: the possibility to choose between ethical values and ethical anti-values; (5) practical freedom: the possibility to choose means to ends; and (6) ethical freedom, implying the selection of values, rationality, and ethical values

as well as diverse practical methods to actualize them. In the context of augmented dying, it is necessary to consider all the aforementioned types of freedom. Existential freedom means that we can live and die when we want, and how we want. Augmented dying fortifies this with new (high-tech) possibilities, also linked to euthanasia and suicide. Axiological freedom provides humans with prospects of aesthetic, ethical and other values (or their respective anti-values). Epistemic freedom offers scientific, philosophical or strategic thinking, as well as their irrational counterparts. From a thanatological point of view, ethical freedom is particularly relevant: it entails the preferences for values and rationality, and gives a great number of options for creativity in the search for good and augmented dying. In this article, maximizing freedom is strictly and solely related to ethical freedom. In the proposed consequentialist perspective, ethical freedom is not against the choice of death if being alive maximizes suffering, slavery or injustice.

In the context of dying, freedom can be present: (1) in the choice of life or death (a) before dying or (b) during dying (e.g., to shorten the painful process); (2) in the methods of ending one's life (natural, artificial, etc.); and (3) in the means and content of one's experience of dying (e.g. psychedelic drugs plus psychedelic experience).

Officially, the most popular, organized religions (the Abrahamic religions) in their orthodox forms object to these three freedoms by stating that only one possibility is acceptable by God (priests, imams, etc.): life (not death), natural (not artificial), orthodox religious rituals (not psychedelic, gnostic experiences, etc.). Hypocritically, they offer 'the glory of death' in wars, holy wars, and martyrdom (Nietzsche regarded it as a pious sort of suicide), and they believe that eternal death in hell is not morally questionable (even when it is the punishment for somebody's opinions). In contrast to these views, the proposed transhumanist metaethics of dying perceives various alternatives as ethical whenever they maximize values and minimize anti-values, and knowledge and understanding of types of situations are crucial.

Is augmented dying ethically better than traditional dying? Do extended state-of-the-art technologies and the best psychedelic drugs give body-minds ethical freedom? Augmented dying offers more possibilities and fewer limits than traditional dying, so by definition, its freedom is greater. However, freedom of this kind is not yet ethical freedom. Possibilities can be used in morally different ways. In very general terms (the paper is an introductory sketch), the use of possibilities is ethically good whenever it maximizes values and minimizes anti-values. What if certain possibilities are bad by their very nature? Psychedelic drugs and modern technologies are not bad by their nature. The empirical studies I invoked earlier clearly showed this.

Entheogens can be improved, safer and more powerful, or they can be specially adjusted to the dying process and its possible psychedelic nature. Conventional and ideological discourses of psychedelics see them as tools of mental slavery, losing control, and addiction. However, empirical studies do not support this point of view. Psychedelic drugs are not highly addictive, and do not usually cause premature death, although they

can be dangerous in some situations (driving a car, etc.), and so-called bad trips, i.e., painful, terrifying, psychotic psychedelic experiences, can happen. Humans must be prepared to use entheogens properly and safely, also in the case of dying. The next problem is ego death. If we are more than ego, we can experience a broader, larger self. The ego can lose full control as a part of the psyche, and a more powerful psychic structure can take control: the self. Apart from that, it is confirmed they are very beneficial for dying patients. Highquality entheogens, with specialists administrating them and well-prepared patients, give more hope for the communal freedom of the dying self. Augmented dying can be honed by computer games, as well as virtual and augmented reality. In the near future, it may be better due to integration with software avatars, genetic modifications of human beings, nanotechnology, or integration with AI, etc. These improvements seem to be easier than making humans immortal, and they provide us with an augmented and extended bodymind. Do they take away our freedom? Because the freedom we are talking about is communal (it depends on highly advanced society and its institutions), if our society can use our augmented and extended body-mind against us, it will destroy freedom and turn dying into hell. Thus communal freedom can be the greatest freedom for social beings, or it can become the most terrifying experience. That will be determined by the social system we live under, and its peculiar local characteristics, plus specific institutions, and sometimes even some individuals. Maximization of freedom of the dying as a communal effort is risky and affected by social factors, just like our computers and internet, but without higher goals and creativity we have no chance to make this world a better place. Without this kind of risk, even liberal democracy would be only a dream, a utopia. The trouble with powerful tools is that somebody may abuse them against society. Modern technology belongs to this category. Augmented dying is in accordance with existential freedom: it does not deny the original freedom and offers new opportunities - dying without suffering, a pleasant process of death, powers of the extended body-mind, suicide, and euthanasia. Augmented dying can be in accordance with ethical freedom if it minimizes ethical anti-values and maximizes ethical values. However, augmented dying could also be an aggressive display of somebody's status and disdain for those who cannot afford it, to make oneself happy and proud and others unsatisfied and humiliated. The question of freedom is also strictly connected with the issue of justice. If someone has fewer limits and more possibilities, the situation can be just or unjust. In other terms, if one has a better body-mind, and one does not deserve it (e.g., his or her augmentation is a product of political tyranny or economic exploitation, and is used to make dictatorship or slavery more efficient), augmented dying can be unethical. Some sets of determinants limit freedom in their content or range, others offer new content and range. Ideologies belong to the first group, while entheogens and new technologies - under specific ethical conditions - belong to the second. Ideologies usually block existential freedom ('to be or not to be' is forbidden) and suppress knowledge about important means of good or augmented dying ('forbidden knowledge' replaced by 'terrifying nonsense').

The freedom of ethical augmented dying conflicts with a large group of religious and state ideologies. In some religions, humans are openly regarded as slaves of God, so they have no existential freedom: your life was given so you must live as long as your master wants. "Because life is a gift divinely given to man, and subject to the power of Him 'who kills and makes to live'. Therefore, he who deprives himself of life sins against God, just as he who kills another's slave sins against the slave's master, and just as he sins who arrogates to himself power over something not committed to him. To God alone belongs the power over death and life, according to Deuteronomy xxxii: "I kill and I make to live" (Thomas Aquinas 1968, 318). Similarly, Islam means 'submission to God', and many Islamic sources describe men as slaves of Allah. The symbolic culmination of this kind of thinking was a demonstration where radical Islamists carried banners with the slogan: 'Freedom go to hell'. This is not the place to consider all arguments for and against freedom of life and death, however, the problem with these religious views is that they assumed that God exists despite the lack of any conclusive arguments in favor of 'his' existence. The next counterargument is that God is a bad or evil donor. Even human benefactors can be far more magnanimous: they do not force you to have something you do not enjoy and do not punish you if you reject their gift, especially with something worse than death - eternal death. No earthly tyrant could be as evil as that 'merciful' God. Even without that, the very idea of God as a slave master is outrageous enough. Nietzsche's idea of slave morality is not astonishing since some religious people and saints themselves call themselves slaves. St. Maximilian Kolbe called himself a slave of Holy Mary.

The freedom to possess and buy psychedelics, and consequently to have a psychedelic experience, is denied by a UN resolution and a lot of capitalist states. This worldwide prohibition is based on ideologies and false images of reality that serve the interests of privileged social classes. Psychedelics were strictly linked with the 1960s counterculture, alternative social projects, and anti-war protests. So the capitalist superpower (USA) banned them. Recently, some important capitalists from Silicon Valley have been promoting 'psychedelic capitalism'. The problem is that capitalism may be an inherently anti-egalitarian, class-ridden system, where the state or private capitalists have more resources, money, and power than non-capitalists. If this is true, and better social systems are possible, egalitarian, democratic transhumanism should reject capitalism. In capitalism, dying signifies a better death for those who can afford it. High-tech capitalism means a better body-mind and drugs for the rich and powerful. Under capitalism, capitalists have more freedom than non-capitalists, and if critics of capitalism are right, this is not just, it does not maximize happiness (or well-being), and it minimizes freedom - real freedom in dying is restricted to the dominant social classes. Authoritarian state capitalism, in the form of fascism and Stalinism, is also ethically unacceptable: freedom is reserved for dictators, parties or the secret police. Egalitarian transhumanism is open to ethically better social systems because their viability is not disproved.

Abrahamic religions can be against high-tech and psychedelic deaths. Against

high-tech dying, because it is unnatural, has nothing to do with the soul and God, and has not, as yet, been colonized by religions. They are against psychedelics because they viewed as pagan, shamanistic, gnostic and heretic, and are able to divert attention from recommended prayers and rituals controlled by churches. The spirituality of psychedelics is usually beyond the power of the church. The cyberpunk spirituality of augmented dying is something totally different than religious ceremonies, bloody crucifixes, and fear of damnation.

The state is against existential freedom too; it wants people to pay taxes, participate in the economy, take part in wars, etc. Attempted suicides are sometimes punished, but not eternally. From Aristotle onwards, anti-suicide arguments assert that suicides hurt the state. But it is dubious to maintain that unhappy individuals are really capable of hurting the state: if we take into consideration larger groups this is possible, otherwise it is just a far-fetched argument. When the state is evil, the reluctance to participate in its wrongdoing is not reprehensible. Suicide or euthanasia could be proper methods of radical defiance.

In most countries, psychedelics are illegal, with the exception of the USA (Oregon and Colorado only) the Netherlands, Jamaica, the Bahamas, Brazil, Nepal, Mexico, Peru, and Portugal. Even if capitalist states accepted or legalized any psychedelic augmented dying, due to their class-ridden nature its distribution and quality would be dependent on economic, political, and cultural power. It would be uneven: better psychedelics for the rich and the powerful. The threat is much stronger when it comes to high-tech goods, like expensive body-mind modification, which may give rise to not only deeper class divisions but also to the onset of a new post-human or super-human class that can dominate inferior classes in an unprecedented matter and severely destroy their freedom. This situation could lead to the greatest victory of the ruling classes in the history of class struggles.

Abrahamic religions and modern states are against the freedom of life and death, and against the choice of good dying also in its augmented form. Therefore, they create ideologies to disparage augmented dying, psychedelic dying, and high-tech dying. The egalitarian version of augmented dying is also too costly for GDP-oriented capitalist states. By its logic, they favor inequality and reserve certain opportunities for the rich.

If high-tech and psychedelic body-mind extensions are illegal, condemned and punished by states and religions, can their use be ethical, or can it damage ethical integrity? The difference between morality and legal systems is well-known in ethics: the law can be bad or evil. Morality can be bad or evil from an ethical and philosophical point of view – even Nazis had their specific morality. If we accept the possibility of rational and critical ethics, we should take into consideration that some laws, legal systems, or moralities are irrational, wrong, bad or evil. One of the definitions of material integrity states that "Material ethical integrity is a) relatively consistent, b) relatively permanent, freely chosen and deliberate commitment to c) moral life in general and d) for the sake of morality e) if its central values are freedom, justice, happiness, and love and f) if the

morality is rational" (Polowczyk 2017). The use of entheogens and high-tech body-mind extensions in the process of dying is not necessarily in contradiction with material moral integrity. One can be deeply committed to rational morality and the central values, and simultaneously use psychedelics and modern technologies to make one's dying less painful and less restricted in its possibilities. Material ethical integrity is in harmony with illusions and appearances. False moral integrity (e.g., the illusion of the Nazi moral integrity) as a defensive camouflage is able to help real ethical integrity (the story of Irena Sendler) (see Polowczyk 2017). Illegal or condemned entheogens or high-tech tools (let's say made by hackers or biohackers) are ethically acceptable in (the alternative) communal art of dying whenever they bring more freedom to those who pass away and do not harm the freedom of the living. Arguments against psychedelic drugs and state-of-the-art (maybe even bleeding-edge) technologies are particularly weak when applied to the dying, because (1) the process is usually short, (2) addiction (slavery) is unlikely and insignificant due to its shortness, (3) by experiencing better-dying conditions the dying do not damage or destroy the liberty of the living, and (4) death less limited in its possibilities may be a source of consolation for the living, and an incentive to develop more instruments for the maximization of freedom. The dying can hide their body-mind extensions from the eyes of intrusive religions and states who deny them 'the last ministry' before they die. If they refuse to make their death better, they are real enemies of the dying.

Communal freedom is a communal enterprise and individual freedom conflicts with communal slavery. Social freedom requires a free society, and material conditions of freedom, because "social liberty is inherently bound up with material liberty, and that freedom is ultimately a matter of expanding our capacity and opportunities to engage with the world around you" (Gillis 2012). The institutional support of augmented dying requires more energy than we have now: new technologies harness additional energy. Renewable sources of energy combined with thermonuclear power plants may be a part of the solution. But to make their benefits stable, the global society must turn into a type I civilization on the Kardashev scale, a planetary civilization. Otherwise, the communities of augmented dying might be just local and fleeting.

V. Conclusions

The project of the egalitarian transhumanist art of dying is consistent with the consequentialist metaethics of maximizing freedom and happiness. Its arguments seem to be better than religious and state ideologies. However, this is only an introductory presentation of its merits, and a lot of gaps in the argumentation must be filled. The problem is typical if researchers want to take a more global perspective, and 'see the forest beyond the trees'.

The egalitarian transhumanist *ars moriendi* is communal. The application of entheogens and high-tech technologies to dying is immensely affected by legal systems

and productive forces. Communal *ars moriendi* is offensive. The defensive arts of dying defend values, and the offensive arts of dying develop them and their scope. The egalitarian transhumanist *ars moriendi* is just one part of the project of a better society of the near future, and as a project, it has its significant ethical facets and practical limitations. The development of egalitarian transhumanism is strictly connected with the global political and economic situation and changes in planetary social systems. It is impossible under oligarchic capitalism, authoritarian regimes, and on an Earth devastated by wars and environmental destruction. The project is not elaborated enough, but it provides a preliminary theoretical structure for further discussions.

References

- Clark A. 2001. *Mindware: An Introduction to the Philosophy of Cognitive Science.* Oxford: Oxford University Press.
- Clark A. 2003. Natural-Born Cyborgs. Oxford: Oxford University Press.
- Clark A. & Chalmers D. 1998. "The Extended Mind," Analysis 58(1):7–19.
- Fernandes C., Vale M. & Lourenço M. 2022. "Exploring the Use of Games in Palliative Care: A Scoping Review," *Palliative and Supportive Care* Jan 20:1–21. https://doi.org/10.1017/S1478951521001929.
- Gillis W. 2012. *What is Anarcho-Transhumanism*. https://theanarchistlibrary.org/library/william-gillis-what-is-anarcho-transhumanism.
- Grob C. S., Danforth A. L., Chopra G. S., Hagerty M., McKay C. R., Halberstadt A. L. & Greer G. R. 2011. "Pilot Study of Psilocybin Treatment For Anxiety In Patients With Advanced-stage Cancer," *Archives of general psychiatry* 68(1):71–78. https://doi.org/10.1001/archgenpsychiatry.2010.116
- Heidegger M. 2001. *Being and Time.* Oxford: Blackwell Publishers Ltd.Hursthouse R. & Pettigrove G. "Virtue Ethics," The Stanford Encyclopaedia of Philosophy (Winter 2018 Edition), E. N. Zalta (Ed.), URL: https://plato.stanford.edu/archives/win2018/entries/ethics-virtue/.
- Joshi E. 2019. "This 3D Printed Death Pod Lets the User Die in a High Tech and Luxe Way," *Luxury Launches*. Retrieved on 28 May, 2022, URL: https://luxurylaunches.com/other_stuff/this-3d-printed-death-pod-lets-the-user-die-in-a-high-tech-and-luxe-way.php.
- Jung C. G. 1972. *The Collected Works of C. G. Jung,* Vol. 7: *Two Essays on Analytical Psychology,* trans. G. Adler & R. F. C. Hull. Princeton: Princeton University Press.
- Lloyd A. & Haraldsdottir E. 2021. "Virtual Reality in Hospice: Improved Patient Well-Being," *BMJ Supportive & Palliative Care* 11:344–350.

- Meier E. A., Gallegos J. V., Thomas L. P., Depp C. A., Irwin S. A., & Jeste D. V. 2016. "Defining a Good Death (Successful Dying): Literature Review and a Call for Research and Public Dialogue," *American Association for Geriatric Psychiatry* 24(4):261–271. https://doi.org/10.1016/j.jagp.2016.01.135.
- Nietzsche F. 2006. *Thus Spoke Zarathustra. A Book for All and None.* Cambridge: Cambridge University Press.
- Pickett K., Wilkinson R. 2011. *The Spirit Level: Why Greater Equality Makes Societies Stronger*. Bloomsbury Publishing.
- Polowczyk P. Ł. 2017. "Organizational Ethical Integrity: Good and Bad Illusions," *Palgrave Communication* 3:46.
- Polowczyk P. Ł. 2019. Rzeczywista natura polskiej transformacji ustrojowej a kwestia maksymalizacji wolności [The real nature of the Polish systemic transformation and the issue of maximizing freedom]. In R. Michalski (Ed.), *Trzydziestolecie restytucji kapitalizmu w Polsce* [30th anniversary of capitalism restitution in Poland] (pp. 203–224). Warszawa: Akademia Finansów i Biznesu Vistula.
- Rate C. R., Clarke J. A., Sternberg L., & Robert J. 2007. "Implicit Theories of Courage," *The Journal of Positive Psychology* 2(2):80–98.
- Rodríguez A. J. M. & Winkelman M. J. 2021. "Psychedelics, Sociality, and Human Evolution," *Frontiers in Psychology* 12:729425. https://doi.org/10.3389/fpsyg.2021.729425.
- Roser M., Ritchie H., & Mathieu E. 2013. "Technological Change," published online at *OurWorldInData.org*, retrieved on 30 June, 2022 from https://ourworldindata.org/technological-change.
- Schenberg E. E. 2018. "Psychedelic-Assisted Psychotherapy: A Paradigm Shift in Psychiatric Research and Development," *Frontiers in Pharmacology* 9:733. https://doi.org/10.3389/fphar.2018.00733.
- Thomas Aquinas. 1968. *Summa Theologiae* IIa-IIae, q. 64, a. 5, trans. M. Rudick. Alba: Edizioni domenicane.
- Timmermann C., Roseman L., Williams L. et al. 2018. "DMT Models the Near-Death Experience," *Frontier in Psychology* 9:1424. https://doi.org/10.3389/fpsyg.2018.01424.
- Whitecar P. S., Jonas P. & Clasen M. E. 2000. "Managing Pain in the Dying Patient," *American Family Physician* 61(3):755–764.
- Wittgenstein L. 2021. Tractatus Logico-Philosophicus. eBook Edition, Project Gutenberg.