
Moral Of Physician Assisted Suicides

The topic of suicide and physician-assisted suicide has been one of the most polarized and debated topics in philosophy for hundreds of years. Suicide is such an important subject of philosophy because of how it can reveal the most important differences in similar moral systems. A philosophical examination of suicide is extremely important to conduct due to how negatively physician-assisted suicide is seen in the United States. In America, only nine states have legalized physician-assisted suicide. By examining the moral acceptability of suicide from different branches of philosophy, a moral framework for why PAS should be legal will be established and will show why PAS being illegal is antithetical to the inalienable rights that American's are granted. Despite the common belief that any suicide is a choice, only an irrational mind can make, studies done by libertarian philosophers have noted that the ownership over one's body gives the patient a claim right to exercise physician-assisted suicide.

In order to establish the foundations for whether or not a PAS is morally acceptable, we must first establish the right assertion for exercising a PAS. Checking the validity and soundness of the right-assertion using the Hohfeldian analytical system of rights will verify whether the right to a PAS can be grounded from a person's axiomatic rights. The Hohfeldian analytical system of rights defines four components of rights, "Power, immunity, claim, and privilege" rights (Stanford). These categories are known as the Hohfeldian incidents. To create a systematic analysis of any right, one must assert how the right corresponds with one of these components or a combination of more than one to create a molecular right. The right to commit suicide can be broken down into power, immunity, and claim rights. The first of these, a power right, can be illustrated as such, "A has a power if and only if A has the ability to alter her own or another's Hohfeldian incidents" (Stanford). This connects to the right to commit suicide by demonstrating one's power over one's life as follows, a patient has the power-right to take his or her life due to the right of non-interference, allowing a patient to choose to have a PAS if he or she so wished. The next component of the right to have a PAS is the immunity right. The immunity right states that "B has an immunity if and only if A lacks the ability to alter B's Hohfeldian incidents" (Stanford). The immunity right is especially important in this analysis because it concerns whether or not the United States government has the right to stop a patient from having a PAS. The immunity right shows that because the US government lacks the power to alter any citizen's Hohfeldian incidents, it also does not have the power to prevent a patient from having a PAS. The last of these categories, the claim right, is the most important, as it is classified as a first-order right as opposed to the other two rights which are second-order rights. A first-order right gives one a direct claim over his or her's property and must be backed up through the establishment of second-order rights which in turn concern the alteration of first-order rights. The claim right for a PAS can be established as follows, A patient has a claim for a physician to provide them a PAS because physicians have a duty to patients to maximize the patient's well-being. This means that not only is it morally acceptable for patients to have physician-assisted suicide but doctors may be morally obligated to assist. By combining the three "atomic" incidents the molecular right for a PAS is produced. This proves that patients who wish to seek a PAS not only have a sound right-assertion to do but that doctors are obligated to perform one.

Moreover, under a utilitarian framework, the act of suicide can be shown to be morally justified

from a reversal of the rule that in order to act morally one must provide all the benefit to society as he can because of society's benefit to him, that is: once you have committed suicide society can no longer provide a benefit to you, so you are no longer under a moral obligation to continue living and provide benefit to society. Hume writes on the subject of utilitarianism and suicide that, "All our obligations to do good to society seem to imply something reciprocal. I receive the benefits of society, and therefore ought to promote its interests; but when I withdraw myself altogether from society, can I be bound any longer?". This view presents a person and his or her duty to society in a contractual way: in exchange for the goods and services the society provides, a person provides society with labor. By committing suicide, a person would effectively break the contract and thus both parties would no longer have an obligation to the other to provide support. This line of thinking lends more credence to an elderly person who may seek a PAS as they have already provided significant contributions to society and maybe morally permitted to have a PAS (Cholbi). One can also apply this logic to a person under significant pain, as for them, society has not been able to provide the person with support and thus the person is no longer morally obligated to stay alive and help support society. (ending sentence)

A common critique of the right to have a PAS holds that the need to keep oneself alive is *A posteriori* and therefore the desire to have a PAS must be irrational. This view supposes that a person contemplating suicide is making a decision to either stay in an alive state of being or to move to a dead state of being. Because one can not know what life is like once dead, then suicide must be an irrational choice. However, this view is incorrect because it supposes an incorrect view of the decision-making process of someone contemplating suicide. A person contemplating suicide is not making the choice to move to a different state of being but is instead choosing how long they wish to remain in his or her current state of being.

The best proof of a person's right to have a PAS comes from libertarian philosophers and their assertion of the right of noninterference. The right of noninterference, as asserted by libertarian philosophers, shows that one's ownership over their body and life gives one the final say and control over whether or not one should be allowed to have a PAS. This means that individuals enjoy an inalienable right to suicide that cannot be taken away from any other person or government. Under this view, any law that disallows having PAS can be seen as a coercive pathologization of exercises of free will that a person can take part in (Stanford). Because the right of noninterference stems directly from a general right to decide those matters that are most intimately connected to our well-being, then the right to have a PAS can be seen as *A posteriori* from this statement due to how general well-being is directly correlated with how one would want to change the duration of their life and the circumstances of their death. This shows that government bodies who prevent people from having PAS's may be violating basic tenets of how liberty and rights are viewed in America.

In conclusion, physician-assisted suicide is not only morally acceptable under any standard ethical system but maybe morally obligated for doctors to perform given their commitment to ensuring a patient's well-being. In America only nine states have allowed for physician-assisted suicide, leaving thousands of end-of-life patients suffering without the ability to take any action (CNN). The American congress must reconsider their views on this subject and take into account the fundamental liberties that afford every American control over their lives and bodies.