Should A Christian Endorse Suicide in Extreme Cases?

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I. Difficulties in Discussing This Question

It is surprising difficult to sustain a discussion of this question. Diversions, evasions, and confusions frequently sabotage attempts to do so. Identifying these problems will facilitate moving beyond them.

A. Diversion into Other Questions

To endorse something is to say that it is right, good, reasonable, or choice-worthy. This is not to say that it is mandatory; only that it is permissible under the conditions specified in the endorsement. If our question is to be addressed squarely we must avoid being diverted into a discussion of other ethical questions related to suicide. The question of a Christian endorsement of suicide is not to be confused with any of the following questions:

1) "Should we show compassion and understanding to those who have attempted suicide?"

2) "Should we provide a Christian burial for those who have completed suicide?"

3) "Should we refrain from making assumptions about the moral goodness, moral culpability (or eternal fate) of those who have attempted or completed suicide?"

4) "Should we be supportive of the survivors of a suicide?"

5) "Should we remove suicide as an offense under the criminal code?"

There is no serious debate within Christianity today that the answer to all of these questions should be: "Of course we should!" Admittedly, this was not always the case. Gradually however, a more supportive, understanding practice is emerging. Nonetheless, answering these questions affirmatively still leaves the question of the endorsement of suicide itself unanswered. This is noteworthy because of the frequency with which discussions of the endorsement question become side-tracked, sometimes unawares, into pronouncements on these other questions.
B. Evasion of Policy Formation and Analysis

When the discussion is not diverted, the question of endorsement is sometimes evaded by proposing, as if it were an answer, that "Each case ought to be judged individually." What this might mean is not so obvious as it first appears. To correctly assert that each case is to be judged individually is surely not to suggest that they are to be judged arbitrarily, i.e., without reference to some identifiable criteria, standard, policy, norm, etc. The issue is not whether each case is to be judged individually, but rather against what are they to be individually judged. If the judgment is not arbitrary, some norm is being applied, explicitly or implicitly, as the cases are individually judged. The impression is sometimes given that asserting the need for individual judgments makes the articulation and defense of norms or policies superfluous. Whether one gives an affirmative, negative, or qualified answer to the endorsement question, one is proposing a policy. It is not a matter of whether we will have policies, but which moral norm or policy we will have. The evasion of a policy discussion by insisting that each case must be judged individually usually implies that there may be factors or combinations of factors in some cases which would warrant an endorsement. One is frequently left with the impression that this type of factor cannot be identified, but that you will intuitively "know it when you see it." While I would agree that this kind of intuitive recognition of relevant factors is not to be simply dismissed out of hand, it skates dangerously close to accepting arbitrary decisions or decisions made on what would have to be acknowledged as morally irrelevant factors.

C. Confusion regarding what Morally Constitutes "Suicide."

It is altogether reasonable to begin a policy debate by raising examples of judgments which would implicitly favor the adoption of one policy over another. Thus it is that those who support the contention that Christians ought to endorse suicide under certain types of conditions point to cases where the act of suicide certainly seems to be morally commendable. If it is possible to identify at least a few such cases, then the generalization that suicide should sometimes be endorsed will be proved true. This is the approach most widely used in this debate among Christians. It contends that a policy which refused to admit that some suicides (albeit only in extreme cases) ought to be approved puts Christians in a position of having to disapprove actions which appear to us as not only unobjectionable but even heroic. If this can be shown to be the case, then clearly it is time to bring the policies we promulgate in line with the judgments we, in fact, see as being the correct ones.

If this approach to demonstrating that Christians ought to support at least a limited endorsement of suicide is to be successful it must avoid putting forth cases which while laudable, are not properly classified as "suicide." On the other hand, those who oppose such an endorsement must demonstrate that they are not


arbitrarily defining "suicide" in a way that excludes those cases which could be used as an argument for occasionally approving suicide. Given that a moral argument can stand or fall on how the moral category in question is defined, definitions must not only be articulated but also defended. The defense of a definition must show not only that its content is appropriate but also that it is adequate for use in the discipline (in our case, "ethics") in which the analysis is taking place. Definitions which are adequate given the object and methods of one discipline may not be suitable for use in a different discipline with a different objective and methods. To be more specific, I will argue in the next section that the definition of "suicide" required for the kind of investigation carried on in the social sciences is unsuitable for the kind of analysis done in ethics, (and vice-versa). I will then show that several of the cases put forward as examples of morally laudable, justifiable, or rational suicide may indeed be morally laudable, justifiable or rational but are not morally "suicide." After this we will discuss the argument from the cases which do constitute suicide.

A Moral vs. A Sociological Definition of "Suicide."

In what follows it may seem that I am being "unduly picky" about fine differences in the definitions of suicide. If we were dealing with the more "typical" cases of suicide, it is true that which definition was used would make little difference. The typical cases fall is the area where the definitions overlap. It is when you move away from the typical cases to the "extreme" cases on the fringe of the category that inclusion or exclusion may result from adopting a slightly different perspective on the category. It is precisely these extreme cases that are appealed to in arguing for an endorsement of suicide.

Unlike the social sciences, moral analysis is not concerned with producing a verifiable picture of an individual or society. The requirement that a study be able to be reproduced by others limits not only the methods but also the very concepts which are suitable for investigation within the social sciences.

What then is moral analysis attempting to achieve? Moral analysis is carried on in order to disclose an individual to him/herself. The objective is self-understanding or self-revelation. It attempts to determine which options are consistent with my understanding of the kind of individual I am trying to be and to become. Conversely, it attempts to reveal what my actual choices indicate about the sort of person I am (becoming). This objective will not only permit but also require that moral analysis employ concepts unsuitable for legal or social science research. This is most directly evident when we turn to the concept of "suicide" itself.

Definitions of suicide which have been carefully formulated by notable figures in the field of suicidology are not adequate for the purpose of moral analysis. This inadequacy is the result of avoiding the intention as the constitutive element in the concept of suicide. Erwin Stengel, in a discussion of
E. Durkheim's comments on the definition of suicide states:

"He [Durkheim] realized, of course, that every such definition had to include an inferential judgment. But he did not regard the ascertainment of the intention of self-destruction as the main requirement for a death to be classed as suicide. This, he argued, would define suicide by a characteristic not easily recognizable. 'Intent,' he wrote, 'is too intimate a thing to be more than approximately interpreted by another person. It even escapes self-observation.'"1

Durkheim designates an individual's knowledge as the critical element in defining suicide because knowledge could be more readily inferred than intention. Durkheim states: "The term suicide is applied to all cases of death resulting directly or indirectly from a positive or negative act of the victim himself which he knows will produce this result."2 Stengel, himself, is in basic agreement with Durkheim on the question of the intention:

"Having found ascertainment of intention as the main criterion of definition impracticable, I have proposed the following formulation: A suicidal act is any deliberate act of self-damage which the person committing the act cannot be sure to survive."3

This concession to practicality, while warranted in terms of social science methodology, comes at a considerable cost in terms of understanding suicide as a human reality. "Suicide," defined without decisive reference to the intention of the person acting, is not congruent with "suicide" as a "human action" capable of having a moral qualification (viz., right or wrong). One need not be an academic philosopher or theologian to recognize that what makes the impact on survivors of suicide different from other deaths is that the person "meant to kill him/herself." It is precisely the intention of self-destruction which creates some of the morally significant sequelae.

Why do moralists place such importance on the intention? Human beings are engaged in the creative process of self-formation when they exercise those distinctly human characteristics of "mind and will" or "understanding and freedom." In this, human beings act freely for an end, recognized as such. Human actions are "meaningful," or have meaning when they are understood to be "means" to ends judged to be worth pursuing. Now it is certainly true that not all actions of human beings are "intentional" or "characteristically human" in this sense. Those actions which are not characterized by this "pursuit of an end as such" are traditionally referred to as "acts of man" rather than as "human actions."

Actions performed, for example, in a panic, stupor, or delirium are acts of the individual but are not "human actions." In a humanly significant sense we can say that to the extent that the individual loses control in these states, to that extent "his" or "her" actions do not belong to him or her. To that extent they lack meaning or the potential for self-revelation. To that extent, it is even
appropriate to think of these uncontrolled activities as something which "happens to him/her," rather than as something he/she did. Thus the moralist can acknowledge in these cases that an act by which a person kills him/herself is most accurately understood as a tragedy which happened to him/her, albeit by their own hand. While this sort of action can obviously have significant effects on the individual and others, they are beyond the scope of moral analysis. Moral analysis of any activity (not just suicide) begins by inquiring into the end intended and then proceeds to an examination of the means chosen to that end.

At this point those accustomed to the verifiability characteristic of social or medical science may feel some exasperation at the inability of an observer, and possibly even the individual him/herself, to establish the intention. How can you know, particularly in an action with multiple intentions, "to what extent" the intention was one's own death? Durkheim has overstated the case when he says flatly of the intention that: "It even escapes self-observation." Nonetheless, we do encounter here is what might be called the "inherent indeterminacy of moral analysis." Rather than discrediting moral analysis, however, it merely reflects the "inherent indeterminacy of self-understanding." Admittedly self-knowledge is very likely to be partial, uncertain, gradual, and even resisted. Yet as an individual comes to a deeper understanding of their intentions and factors affecting their freedom and perceptions, they likewise come to a deeper understanding of the moral quality of their action. The moralist is there to point to the relevant criteria. Unlike the sociologist, she or he need not be in a position to apply them in the case of anyone except her/himself.

Definitions such as those of Durkheim or Stengel, or more commonly used shorthand definitions like "willful self-destruction" are too broad for moral analysis. To speak of suicide is to speak of a class of actions. If the class is defined broadly (or badly) enough, it is possible to support virtually any moral judgment regarding this class. I would propose, as a morally adequate definition of suicide, the following:

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\text{A suicide is a human action (whether an activity or inactivity) in which the end pursued is one's own death, employing means expected to be effective.}
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Like any end, it can be seen as a means to a yet further end. For example, I may intend to kill myself in order to relieve others of the burden I have become, or to stop experiencing this pain. Self-destruction is the operative end if it moves one to act (or to refrain from action) and to keep acting (or refraining) until it is achieved. This is to say that even if some other end, e.g. pain-relief, were reached short of death, the means would continue to be employed until the person also died. To concede that the intention cannot be known with complete certainty or clarity does not mean that an observer or the actor cannot acquire some significant understanding of the intention much of the time. One of the ways in which an intention is discerned or clarified is to answer certain hypothetical questions regarding the action. In the case of self-destruction, the hypothetical questions to be asked would include the following: "If, contrary to all expecta-
tions, the person were to survive the activity undertaken, would the person judge that their purpose in acting had been frustrated?" or "If, contrary to fact, a non-lethal means of achieving the same end were available, would it have been readily chosen?" Answering these questions can often help to determine whether the means was undertaken to the end or for the purpose of ending their own life. By applying these test questions it becomes apparent that certain types of actions which seem to meet at least some sociological definitions of suicide do not qualify under the moral definition of suicide. The debate over the moral justifiability of suicide is confused when the following types of actions are not recognized as being non-suicidal.

The first type is sometimes referred to as "heroic" or "self-sacrificial" suicide. Many of the examples provided under this category, however, are not suicidal at all. For example, in his highly regarded article, "The Morality and Rationality of Suicide," R. B. Brandt notes that the opponents of endorsing suicide may take one of two positions. The first position is that it is always wrong, everything considered. A second position is that, while suicide ought to be opposed, countervailing considerations might outweigh the limited obligation not to commit suicide. Brandt comments: "It is quite evident that the first position is absurd." His demonstration of this absurdity consists in presenting a single case:

"Suppose an army pilot's single-seater plane goes out of control over a heavily populated area; he has the choice of staying in the plane and bringing it down where it will do little damage but at the cost of certain death for himself, and of bailing out and letting the plane fall where it will, very possibly killing a good many civilians. Suppose he chooses to do the former, and so, by our definition commits suicide. Does anyone want to say that his action is morally wrong?"

Brandt had indicated his definition of suicide in a parenthetical comment: "(assuming that there is suicide if and only if there is intentional termination of one's own life)." The pilot's action would seem to meet both Durkheim's and Stengel's definitions of suicide. The death resulted from a negative act of the pilot himself which he knew would produce this result (Durkheim); it was a deliberate act of self-damage which the pilot certainly could not be sure to survive (Stengel). In response to Brandt's question, I would certainly not want to say that what the pilot did was morally wrong, but that is irrelevant since we are not dealing with a case of "suicide." While it is true that what the pilot did was "intentional" (as opposed to, say, accidential or instinctive) and it is also true that it led to the "termination of his own life," it does not follow that the action is correctly described as the "intentional termination of one's own life." The non-suicidal character of the action becomes evident when we hypothetically test the intention of the pilot. Did the pilot choose not to bail out in order to kill himself?" No. If, contrary to his quite realistic expectation of death, the pilot were to survive the crash, having done every thing he could to avoid killing others, would he feel that his purpose or intention had been frustrated? Not at
all. The intention is to steer the plane away from people, it is not to kill himself. To know a result of one's action cannot be immediately equated with intending it.

To be suicide one would have to contend that the pilot stayed with the plane in order to kill himself. In which case it certainly would become dubiously praiseworthy. This also explains why the parallel often-cited case of someone throwing himself on a live hand grenade in order to save his companions is also non-suicidal heroism. The reason why kamikazi pilots are not proposed as an instance of obviously laudable suicide is that while their self-destruction is more clearly suicidal it is also more dubiously virtuous.

A slightly different example proposed as a candidate for this category of "praise-worthy or self-sacrificial suicide" is that of an individual, who for some reason, imposed a particular burden on the other members of a group struggling to reach safety. Frequently cited as an actual instance of this type of "suicide" is the case of Captain Oates, a member of Scott's Antarctic expedition. Although his illness was jeopardizing the chances of his party to make it out of a severe blizzard, they would not leave him behind. To ensure that they went on without him, Oates separated himself from the party by walking out by himself into the blizzard and thereby to his death. This action was certainly "heroic and self-sacrificial," but is it properly regarded as "suicidal?" One approach that has been taken to challenging the suicidal character of Oates action is to define suicide in a way that makes "self-sacrificial suicide" a contradiction in terms. For example, Joseph Margolis contends that causing one's own death is not be reckoned as "suicide" if the "overriding characterization" of the action is the achieving of some "independent objective that, in principle, he might pursue in some other way." By contrast, "the suicide's overriding concern is to end his own life. . . ." If the death is "self-sacrificial" it is, by definition, chosen as instrumental to some independent objective, namely, saving others (and thereby not "suicidal"). I would agree with Tom L. Beauchamp, that Margolis' treatment of this issue is not without merit, but still oversimplified. For Beauchamp, the decisive feature is not whether the act is self-regarding or other-regarding, rather it is "whether death is caused by one's own arrangement of the life-threatening conditions causing death for the purpose of bringing about death . . . ." Beauchamp concludes, while admitting considerable difficulty, that the Oates case should be considered as a "suicide." Here I would disagree with Beauchamp. Oates action is best illuminated morally by recognizing it as a case of "refusing life-extending assistance" from his colleagues. Given the prospective costs both to himself and the others of his continuing with them, his continuing could easily be reckoned as an "extraordinary means of caring for his health." No one is required to accept assistance, (even potentially life-saving assistance) that poses a serious threat to the life of others. If the others in the party would not accept his right to refuse their assistance and be left behind, then the only way for Oates to refuse their too-costly assistance was to walk away from them and into the blizzard. It is Oates refusal to jeopardise his colleagues that we rightly praise as self-sacrificing love. It is his separation from them, not his death itself, that removed the liability which he posed. It is only when the others refuse to honor his right to refuse their further assistance that precipitating his own death
quickly becomes a practical necessity. This point may be further clarified by recalling the practice of the elderly Eskimo who judges that the continued support of their community has become too costly. Taking only a small quantity of food, they set out upon the ice where their death is foreseen as imminent and inevitable. Here they need not do something to immediately precipitate their death because the community acknowledges their right to refuse any further support from a community which is itself endangered by the hostile environment.

At this point, it may be worth saying a word about the more typical cases of refusing treatment which are also, at times, proposed as justifiable suicide. In this instance, the intention may or may not be to end one's life. If it is, then by our criterion it is rightly regarded as suicide. However, the intention need not be to end one's life. In this latter case, there is a recognition that only goals more modest than extending one's lifespan are achievable at a cost proportionate to the benefit. To accept the reality of our mortality and the fact that at some point the means at our disposal to extend our conscious presence to others become counter-productive is not the same as pursuing one's death. It is worth noting the morally non-suicidal character of refusing extraordinary means of medical care. Opposition to suicide among the terminally ill is sometimes mistakenly identified with supporting an "aggressive treatment" policy of medical care. A particularly clear example of how this mistaken identification is assumed and becomes an apparent basis for endorsing suicide is found in the following statement of an organization called "Concern for Dying" which describes the type of case where suicide ought to be endorsed:

We can imagine that an individual faced with debilitating, irreversible illness, who would have to endure intractable pain, mutilating surgery or demeaning treatments with the added concern with the burden being placed on family and friends might conclude that suicide was a reasonable even generous resolution to a process already moving towards death.9 (Emphasis added)10

Only an "aggressive treatment" policy would assert that a dying patient would "have to endure" "mutilating surgery or demeaning treatments." This is a large part of the reason why the Christian ethical tradition (and virtually all secular medical ethics as well) has rejected an "aggressive treatment" policy and endorsed instead an "extraordinary means-as-optional" policy. For the dying person, anything other than symptom relief will be "extraordinary" unless the benefits experienced by the patient clearly outweigh the costs borne by the patient. Many means which may be customary or standard medical practice, given a particular diagnosis, are morally extraordinary in the case of a dying patient. What the "Concern for Dying" statement does, therefore, is to lead the reader to assume that one is obligated to an unreasonable standard of medical intervention and then to hold out suicide as the only way of escaping that unreasonable obligation. This tactic, which plays to the casual reader's fears of suffering the "rack" of all the possible intrusive interventions of modern medicine before being allowed to "escape" into eternal rest, may be rhetorically effective in making
suicide look like the better choice. This may account for the frequency with which this tactic is encountered, but it does not redeem the intellectual carelessness or dishonesty one may suspect when it is used by professional philosophers or theologians. The same is true regarding the second argument, viz., that the dying person would have to endure "intractable pain." This argument either ignores the success of current approaches to making pain tractable by addressing the "total pain" of the patient, or it places a limit on the amount of pain-relief morally permissible. Presumably this limit could be reached before the pain was controlled. As I shall discuss shortly, no such moral limit exists. It would be dishonest for me to imply that modern means of pain control can offer a dying that is without any discomfort or pain. This uncomfortable reality, however, is far from the spectre of writhing in "intractable pain." Finally, there is the "reasonable even generous" unburdening of family and friends of that burden which is ourself. The appeal of this argument is rooted in the conceit of our youth, progress and productivity oriented culture that "maturity," whether of the culture as a whole or the individual within it, is an indefatigably expandable process of increasing productivity. Becoming increasingly "burdensome" (returning less and less while requiring more and more) is the very antithesis of the youth-to-adult increase in net-productivity that we have made normative for what is "human." While this is not the place to attempt a full reflection on this phenomenon, let me suggest that when our self-estimation is reduced to a subtle application of the economic categories of "cost/benefit" analysis then our appreciation of personhood has been tragically truncated. Of course, I am at times more of a "benefit" or more of a "burden" to those whom I love. I would prefer the former to the latter, but "source of benefit" and/or "cause of burden" is never capable of expressing all that I am. While weighing the costs and benefits may rightly make certain means of dealing with our infirmities dispensable, i.e., "extraordinary," it does not follow that when we become more of a "burden" than a "benefit" to others that we become dispensable.

Regarding the cases we have considered thus far, we can see that in the cases of Oates, the elderly Eskimo, the dying person refusing extraordinary care, (or, for that matter, the person slipping out of an overloaded lifeboat on the verge of being swamped), the non-suicidal character of their intention can be demonstrated by pointing to the fact that they would be delighted if they were rescued, saved, or healed by some unanticipated assistance that did not entail the kind of costs involved in the forms of assistance they have just refused. This is not to say that they need to be naively holding out hope for this sort of "miracle." Their deaths are fully expected. Their intention is revealed, however, by asking whether they would welcome such assistance if it were available.

One final candidate for the category of rational or heroic "suicides" is the somewhat more subtle case of a soldier captured in war, having vital information which he knows he will divulge under the information-extracting tactics of the enemy. Here the soldier needs to effectively silence himself in a way that the enemy cannot overcome in the period during which his information could jeopardize the lives of others. The only effective means at his disposal is a
cyanide capsule, which he takes. It would clearly seem that the person has killed himself for his comrades and country. Yet here again a careful reflection on the intention indicates that the lethal means were chosen only because some effective, non-lethal means of silencing himself was not available. If, contrary to fact, some pill were available which affected the language centers of the brain rendering the soldier aphasic for an extended period of time (and thus unable to either comprehend or use even his own language), this non-lethal pill would certainly be chosen over the lethal one. Or again, if having taken the cyanide the soldier is left for dead but later is revived by his own troops he would hardly consider his purposes to have been frustrated.

This same observation applies to the allegedly "suicidal" behavior of dying patients in taking pain-killing drugs which are known to be potentially life-shortening. Even at the point where the dose of the pain-killer sufficient to be effective is expected to be lethal, the act does not morally constitute suicide if the intention is to kill the pain rather than the patient. The hypothetical "test question" to be used here in discerning which intention is operative is: If, contrary to fact, an effective but non-lethal pain killer were available, would it be chosen over the lethal one. To the extent that a person can confidently answer that they would have taken the effective non-lethal alternative, they can be certain that the intention is only to kill the pain while knowing that they are also killing him/herself. When the difference between suicide and the use of necessary (even though lethal) pain killers is not recognized, opposition to suicide is wrongly identified with a callous "let them suffer" attitude.

Finally, if, or to the extent that, life-threatening behavior is intended to communicate a call for help, or to demonstrate the depth of one's pain in the hope of being taken more seriously, or to frighten or manipulate others into acting in a way that they have heretofore refused, the act is not suicidal. The intention is to evoke a response beginning with the intervention to save the person from dying. The behavior remains morally non-suicidal even if the behavior, contrary to expectation (perhaps due to miscalculation), turns out to be lethal. Conversely, the individual who did intend to end their life but, contrary to expectation, is rescued or survives has morally completed suicide.

To anticipate our later argument, it can be noted here that when the intention of the deceased is recognized as not having been suicidal, the impact of the death on the survivors is substantially altered. Although, the person freely and knowingly did something which caused their own death, they did not choose the lethal means in order to cause their death. This significantly changes the human meaning of the action and thus what is communicated to significant others and the community at large. To say that many of these "heroic" actions are non-suicidal is not to claim that all the proposed cases of heroic suicide can be shown to be non-suicidal. For example, the case of an individual who publicly burned himself to death in order to protest the U.S. involvement in Vietnam was clearly a case of a morally suicidal action. In cases such as this, where the intention is to kill oneself, the morally laudability is far from self-evident and is, in fact, widely
debated.

These various examples of **morally** non-suicidal behaviors contain many, although certainly not all, of the types of "suicide" pointed to in arguing that suicide is at least sometimes morally justifiable or rational. Their exclusion from the category of "suicide" for purposes of moral evaluation has not been arbitrary, nor is it merely what some have called a "linguistic maneuver" to avoid having to condemn sacrificial actions. It is based on the ethical significance of the intention in moral analysis, i.e., in considering the action as an expression of a self possessing mind and will. Moral arguments which do not give due attention to the intention are, by virtue of that, essentially flawed.

One final comment, having defined suicide in a morally precise way with decisive reference to the intention, it will become necessary to likewise define and evaluate similar, yet distinguishable, categories of non-suicidal actions. The most notable instance of this would be those actions where the person is not acting in order to kill him/herself, but is nonetheless indifferent to whether or not they survive the action. We do not have a single-word label in English for this type of action. The vocabulary available in a language reflects the history of the cultures reflections. For the sake of convenience, we might dub this class of actions "zoeapathies" as expressing a sort of "life indifference." This class would stand between suicide (where the intention is *not* to survive) and risk-taking (where the intention is to survive notwithstanding the danger, e.g., "dare-devils," heart-patients who ignore diets and continue to smoke and drink, etc.). Thus, depending on the intention the same external behavior, (e.g. engaging in homosexual acts of anal intercourse with multiple partners when AIDS is known to be present within the community) could be either "suicidal," "zoeapathetic," or "risk-taking." The difference between these is morally significant, that is, a case for or against one does not necessarily apply to the others. One may end up disapproving all, approving all, or approving some while disapproving the other(s), but the difference in intention will need to be acknowledged and reflected in the arguments.

To reiterate a point made at the beginning of this paper, when someone steps forward to offer a judgment on the morality of suicide it is necessary to distinguish which of the questions of morality they are addressing. We take up here an assessment of the rationality of suicide, and not the responsibility, nor the moral character of the person suiciding. While it is appropriate to remain "non-judgmental" regarding the latter two, this is not the case with the former. To ask whether Christians should endorse suicide is to ask the question of its "rationality," viz., whether or not suicide is seen as "making good sense," being an "appropriate," "wise," or "desirable," choice, given a Christian understanding of life? If the answer proposed is "never!" then reasons must be given; if it is "hardly ever!" then the type of conditions under which it would make sense need to be identified and reasons given; if the answer is "whenever!" then here too reasons are required. Regardless of which position is taken, the articulation of reasons will appeal explicitly or implicitly to some understanding of the meaning
or purpose of human life. This in turn will be grounded in some more general convictions about the nature of reality. What distinguishes a religious ethic is not that it is free from the requirement of being rational. It is distinguished by its reliance on a revelation to disclose or confirm its understanding of the meaning of life. It must still reason to determine what is consistent or inconsistent with that vision of the meaning of life.

Is it possible and/or desirable to remain "non-judgmental" regarding the morality, i.e., rationality of suicide? I contend that it is neither possible nor desirable. It is impossible to rationally decide whether or not to commit suicide without implicitly making some judgment on when, if ever, it makes sense. It is similarly impossible to decide whether or not to intervene or whether to convey encouragement, discouragement, or indifference to the person contemplating suicide. To point out that none of us are non-judgmental regarding the reasonableness of suicide is not to ignore that the quality of answers to this "make sense" question may vary enormously. The answer may be carefully considered, tested through dialogue, and rigorously examined in light of the best available information. Alternatively, it may be hasty, illogical, impulsive, intuitive, or based on a very selective or distorted perception of the relevant information. Another difficulty is that people who may have the intellectual sophistication to be leaders in their own areas of specialization are nonetheless operating with a distressingly immature level of development in matters of moral discourse. Given the fact that we do operate on the basis of some answer to the "does-it-make-sense" question, it is preferable that they be expressed and honestly reflected upon.

The Morality of Suicide within a Christian Understanding of Reality

Having carefully identified just what, morally speaking, "suicide" does and does not include, and having distinguished evaluating the "sense" of an action from assessing the responsibility or character of the actor, we may now turn directly to a consideration of the morality of suicide. Does it make sense, for someone who tries to understand life as Christ understood it, to do (or refrain from doing) something with the intention of ending their life on earth? I wish to contend that the answer to this question is "no." This is to disagree with those who contend that suicide is sometimes "appropriate," "desirable," "wise," or "rationally defensible." This argument is addressed explicitly to those who identify themselves as Christians and thus share that vision of reality, a couple features of which I will draw on shortly. I will leave it to those who share a different vision of life and reality to decide whether these features are also found within their own vision. No one is without some vision of reality; moral problems in a pluralistic society force us to reflect on and articulate them. Within a Christian vision of life, I am contending that suicide is incompatible with the way in which we are called to relate to one another. This is an inter-personal argument against suicide. Moral opposition to suicide, or indeed to anything else for that matter, will be predicated on its being an offense against
God, self, and/or others. In the case of suicide, all three arguments have been made. In this article I will base my case against suicide on the third. What is presented here is thus not so much a new argument as a new appreciation of an old argument against suicide. The argument against suicide based on our obligations to others goes back to Aristotle, St. Augustine and St. Thomas Aquinas. This argument is usually recounted, however, in a way that is most unattractive to the modern ear. Usually the argument is presented as a demand that someone keep on living and **working** because they have not completed the contribution they owe to others (as society, the King or the State). This argument which, seems to be saying to the person in pain: "You can't die yet, you still owe us!" conjures up visions of an Orwellian 1984, if not worse. Understood in this way, the argument is not difficult to rebut as David Hume demonstrated over two centuries ago in his essay "On Suicide." Hume states:

> A man who retires from life does no harm to society; He only ceases to do good; which, if it is an injury, is of the lowest kind. . . . I am not obliged to do a small good to society at the expense of a great harm to myself; why then should I prolong a miserable existence, because of some frivolous advantage which the public may perhaps receive from me? If I may lawfully resign any office, and employ my time altogether in fencing against these calamities, and alleviating as much as possible the miseries of my future life: Why may I not cut short these miseries at once by an action which is no more prejudicial to society? But suppose that it is no longer in my power to promote the interest of society; suppose that I am a burden to it; suppose that my life hinders some person from being much more useful to society. In such cases my resignation of life must not only be innocent but laudable.13

R. B. Brandt, following Hume, notes that only in extraordinary cases will society be deprived of some significant good by the early demise of an individual. In terms of the societal good, the contrary is as likely, for "there have been many suicides whose demise was not a noticeable loss to society; an honest man could only say that in some instances society was better off without them."14 Others have suggested that perhaps a national leader in a time of crisis, a researcher on the verge of some momentous discovery, a artist in the middle of a masterpiece, and so on, would have some obligation to endure the pain of continuing life for the good of others, but for the ordinary individual no such obligation would exist.

The inadequacy of this rebuttal lies is rooted in the inadequacy of its appreciation of the structure of human interrelatedness. What do I mean by the "structure of human interrelatedness?" Human beings are interrelated in two distinguishable, although not separable, ways. Only the first of these two ways is implicitly acknowledged in the type of rebuttal presented Hume or Brandt. As conscious, material beings we relate to one another as producers of effects, i.e., by an action we produce some change in the world (of which our bodies are a part) which has a positive or negative impact on another. Mores imply, we do things that help or hurt one another. This all too familiar dimension of human activity we can refer to as "productivity." When one sees only this productive dimension
of human actions, Hume's rebuttal works. Brandt is right, some individual "consume" more of the goods of this life than they "produce." This line of argument, however, overlooks what is ultimately the more important dimension of human interrelatedness. When we act, we not only produce some effect, we also thereby relate ourself to the other in identifiable ways. Establishing or maintaining a given "relationality," i.e., a mode of relating to another, is done through the producing of some effect but transcends in significance the effect produced. Whether another relates themself to me in a relationality of "acceptance" or "rejection" is of more importance than can be discerned by weighing the impact of those actions which communicate that relationality. The importance, for example, of "token gestures" is not to be found in the benefit or harm they cause (for these are often trivial); rather, it is in the way of being related to that they bespeak. To overlook the fact that we are actively relating ourself to one another in one way rather than another way as we go about producing valuable contributions to "society" is to overlook what is distinctly human. The character of my relationality toward you is not reducable to the quality or quantity of the benefits or harms I produce. The human significance of being valued by another does not lie solely, or even primarily, in the expectation of deriving some benefit from what the other is capable of producing. Of course, a positive relationality toward another inclines me to want to produce what good I can for that person, but my relationality is not merely an epiphénomén of that productivity. Goods can also be produced by non-subjects, e.g., robots, animals, or natural forces. A person is not just distinguished by his/her superior productivity, they are distinguished by being "subjects." What I am calling "relationality" is the relationship of subjects, as subjects, to one another. Regardless of their productive capability, any conscious person is equally capable of relating him/her to others. Indeed, they cannot avoid relating him/her to others in some way, although their means of expressing this relationality are restricted as their productive capacity is diminished. In the death of a friend, for example, our loss is not just of someone who did things for and with me, important as that may have been. It is also the loss of being related to by someone who valued my presence in their world. That "being related to as a valued presence" is, I would suggest, the best and most important of what human life has to offer. To be lacking this is the worst of all fates. In short, given the fact of human self-consciousness, when we act we not only produce some effect we also relate ourself to those whom the effect touches. The character of the relatedness communicated, be it "affirmation or negation," "acceptance or rejection," "valuing or negating," etc., cannot be overlooked if an adequate evaluation of the action is to be made. Let us now relate this to a Christian evaluation of suicide.

A central feature of the Christian understanding of life is to see the meaning of life in the fact that it is a necessary (although obviously not sufficient) condition for enhancing the lives of others and being enriched by others. The "goodness" of life is affirmed preeminently because of this opportunity, not because of some calculation that the pleasures and fulfillsments out weight the pains and frustrations. In multiple and various ways our lives can be enhanced
by contact with others directly and indirectly, both present and past. To be open to the possibility that another may enrich my life is the most fundamental affirmation of their value or goodness. The attempts of others to express their valuing of us sometimes makes our life easier, sometimes harder, but always better. To deny another the opportunity to love me in some appropriate way is to assert that in "my world" they are literally "worthless." This openness to being loved rarely comes without some cost. The value of the other, and the realization that their fulfillment can only come through loving others, makes the acceptance of the costs worthwhile. In this context of our neighbor's need not only for our love but also for an opportunity to love us, we can see why suicide constitutes an "assault" on others, notwithstanding the fact that it may be relieving them of the "burden" of the person suiciding. When a person, in the full possession of their faculties, chooses to suicide, that choice not only eliminates their productive potential from the world (which may or may not be a "net loss" to the societies productiveness), it also established irrevocably the final relatedness of the individual to all those to whom he or she were or might have been related. The character of this relatedness is often obscured by the abstract, sanitized, innocuous language of rejecting continued "life." It is not life in the abstract that one is rejecting, it is their particular life. That particular life entails the present and possible relationships with the identifiable persons that the suicide knew. It is not "life" that is left behind, it is particular people. To all of these people the relationality established (which is not to say consciously desired by the suicide) is one of fundamental rejection. Where the intention is in fact to end one's life, that is, to end all relatedness to everyone and everything that was possible, the message to each individual is that quite literally "nothing" is to be preferred to anything that you and I could have been to and with each other. This entails a radical "devaluation" of the other. So devastating is it to the survivor to realize that they were so de-valued that they readily conclude that the suicide was not in full possession of their faculties and therefore that the act was not an accurate expression of the relationality of the deceased to them. Yet the consolation that the suicide was distraught, depressed, or otherwise "not themself," is at best partially effective. The experience of guilt and shame so often found among the survivors of a suicide is not unrelated to the same feelings found in the battered or abused child or wife. All have been assaulted by loved ones. Time and again we are told by survivors that the guilt goes beyond what we are likely to feel after any other kind of death. What they are experiencing is not just the normal loss but also the inescapable intimation of rejection. Thus it is that those involved in suicide bereavement counseling encounter not only the emptiness of loss, the guilt and shame of rejection, but also hostility toward the suicide for the impact that this has had on themself and other survivors.

Sometimes the hostile motivation of the suicide is explicit as in the suicide note mentioned by Dr. A. Leenaars of the husband to his wife which simply said: "You win!" The hostile responses of survivors to being "assaulted" by a suicide are hardly surprising.

In many instances, however, the rejection may not be explicit or even,
strictly speaking, intended. In such a case, the harm to others may be seen as being morally akin to the kind of "collateral damage" of which the military speaks. Yet even within military ethics, the possibility and probable extent of unintended collateral damage must be weighed in any justification of the attack. So too in the case of suicide. When hearing the devastating effects of a suicide on the rest of the lives of the survivors--so painful at times that the survivors themselves become a high risk group for suicide--it is easy to conclude that one would be hard pressed to find something which could cause more pain to more people. While suicide may be successful in quickly ending the anguish of the one who suicides, it is likely to leave many more people in anguish for many years. It is feckless for the suicide to say "I don't want anyone to feel guilty or inadequate or to be distressed by my suicide} I don't mean to hurt anyone" When "life" is found to be intolerable, it is not some abstract concept, rather it is "my particular life" which includes my relationship to you. A person who commits suicide may be relatively certain that this or that significant other understands and sympathizes with their desire to be "done with it all." It is certainly true that some suicides inflict a far greater blow to the survivors than other suicides. Nonetheless, no one contemplating suicide in the full possession of their faculties could ever be certain that no one else would suffer significantly because of their suicide. Suicide in those rare cases where it is a genuinely "human action" is so fundamental and absolute a rejection of every possible relationship with everyone, that it is impossible to exclude what may seem like relatively peripheral relationships from among the possible casualties of a suicide. The basic Christian identification with promoting the well being of others, including those who have hurt us, precludes choosing suicide as a way of ending our own pain, weariness with life, or frustration over the loss of some cherished capacity.

Ethical arguments which conclude that suicide can be a rational choice inevitably involve a myopia in which the only consequences considered are those on the person committing suicide. This sort of exclusion or discounting of the probable and possible effect on others is endorsed only by an approach to ethical reasoning known as "ethical egoism." It has very few supporters today even among non-Christian ethicists. A good example of this sort of truncated vision of the relevant consequences is found in a recent article which argues that we are never justified in intervening to prevent a suicide. This is based on the contention that the basis for intervention in preventing a bad choice of another is that we are preventing the unnecessary suffering that would later befall that person as a result of that choice. In the choice of suicide, however, no matter how far it is from what the person "really wants" or what misperceptions it is based on, the person's death eliminates the possibility of any suffering, regrets, etc. Since there is no future harm to be prevented, there is no basis for intervention. This incredible myopia which sees suicide as having a significant effect only on the person committing suicide is oblivious to what is known to anyone who has worked with the survivors of a suicide. Suicide is not a "victimless" act.
A second significant feature of a Christian view of life, based on its convictions regarding our sinfulness and redeemability, is the necessity of being open to extending and receiving forgiveness from one another. Suicide is sometimes meant (and even more often read) as an indictment and conviction of a survivor for inflicting some unbearable pain on the person who suicides. The suicide not only leaves the survivor feeling that the suicide was driven to pay with their life for the cruelty, indifference, etc. of the survivor, they are also left with the fact that their "offense" is beyond what the suicide could ever forgive. If fact, several survivors may be left with the conviction that they have committed an "unforgivable sin." It is difficult enough to forgive ourselves when we have been forgiven by those we have harmed, it may well be impossible when the person harmed insures by their death that they will never extend a forgiveness for the alleged offense.

Review Questions

Difficulties in Discussing This Question
1. With what questions should the justifiability of suicide not be confused?
2. How is the question of what policy should guide the decision on suicide evaded?
3. Give an example of a definition of suicide that is adequate for sociological analysis but not moral analysis.
4. What is essential for an definition of suicide that would be adequate for moral analysis and why?
5. Why are actions sometimes called "heroic suicides" not suicides, morally speaking, at all? Give one example.
6. Why is the refusal to adopt an "aggressive treatment" policy when dying not suicide?

The Morality of Suicide within a Christian Understanding of Reality
1. What is the traditional inter-personal argument against suicide?
2. What is rebuttal of David Hume, R.B. Brant, etc., to this argument?
3. What does Brodie identify as the root of the inadequacy of this rebuttal?
4. What is the distinction between the "productivity" and "relationality" as dimensions of human actions?
5. What is identified as a central feature of a Christian understanding of the meaning of life?
6. What is the basic argument proposed by Brodie against Christians endorsing suicide as something that can be morally right?

Footnotes

1Erwin Stengel, Suicide and Attempted Suicide, (New York: Jason Aronson, 1974), p. XX.

2Ibid. p. XXI.

3Ibid. p. XXIV.


7Brandt does note that Immanuel Kant would not consider this "suicide" and that Thomas Aquinas would have seen it as justified by the "basic intention of saving the lives of others. Brandt however continues to treat this as a case of justified suicide.

12. For example, Dr. Christiaan Bernard says of suicide:
I believe it is a fundamental right of any person who is capable of making a clear assessment of his situation to take how own life. It is a right because no one can stop him and no one can punish him for this action. (Good Life/Good Death: A Doctor's Case for Euthanasia and Suicide 'Englewood Cliffs, N.J.: Prentice-Hall, 1980{, p. 105).


