

Introduction

The title of this book is odd. Although ethical issues often take center stage in discussions of dying, particularly around actions to hasten, inflict, or prevent death, the idea of an “ethics of death” is peculiar. Ethics is to a large extent concerned with action, and death is not an action. It is more like a state, but to call it a state implies a state of being—namely, the state of being dead—and that is not quite right either.¹ Ethics is concerned with decision making, and while we can make decisions about what to do with someone who has died, treating the dead as an object of our deliberation, ethics is meant to help living human subjects decide what to do, who to be, and how to act: what can ethics possibly mean to a human subject who has died and is thus incapable of decision making? How can there be an ethics of death when death seems to cancel the possibility of all the things we associate with ethics: being an agent, a person who reasons, acts, exercises volition, experiences the world, and engages others through various forms of relationship. Even the idea of “being dead” seems odd. We can acknowledge “being toward death” with death a future prospect, but once death comes, the “being toward” appears to be canceled. Death obliterates the “being”—how can we have an ethics without being?²

We—the two authors of this book—have an answer to these questions, although it is tentative and may not satisfy all readers. Here goes: in focusing our attention on what we call the ethics of death, we are claiming that *death is an experience for the living*.

No doubt people go through the experience of dying, but whether those who die actually experience their own deaths is at least an unknown.³ What we do know is that the living experience death, but always the *deaths of others*. *Others* is a term important in ethics. The moral point of view would insist that

1. Death is considered by some philosophers as a process rather than an event.

2. The first-person past-tense linguistic utterance “to die” is odd as well. “I died” is grammatically correct but philosophically contradictory. No one can coherently utter the words “I died” or “I have died” meaningfully in a literal way, although we use such expressions as “I was so embarrassed that I just died” or “That joke just killed me” as linguistic intensifiers.

3. The claim that people who have near-death experiences actually die overlooks that the individuals who have these experiences are *near death*. Near-death experiences, whatever they are empirically—and there is no reason to doubt them as experiences people have—are well termed as “near death” and are best associated with peculiarities in the dying process rather than with “death” or “being dead.”

our decision making take into account others, and even principles in ethics like universalizability—that what is good for me to do is good for anyone to do—or utilitarian calculation—acting to achieve the greatest good for the greatest number—clearly center deliberation on our relationships to others. If there is, as Kierkegaard offered, a moral “sphere” or stage of life, it is a sphere that is concerned specifically with self-other relations. The relationship of the self to others is what defines the very context for moral thinking and ethical reflection.

So, in human experience, human beings we know—some we love—die. These “others” who are not me go through a dying process of various durations under various circumstances. When that dying process comes to an end—which it does—we, who have not gone through that process, speak about the death of others and what that death means and how it affects what we do, who we are, and how we act. In this sense, death is an experience for the living.

This book is written to think about how we, the living, experience death as we encounter it through our involvements and reflections with those others with whom we are in relationship, which is to say the whole moral community broadly speaking. Our effort in these pages is to deliberate on the moral meaning of death for the living. For we, the living, confront death in our own lives and in the lives of others, and we ask questions about what is good, right, and fitting as persons—even we ourselves—face death. When others die, the living are left with moral questions that reflect back on the movement toward death, which comes to have standing as a moral project in people’s lives whether we recognize it as such or not; we, the living, will even judge whether a particular death was a “good death,” or whether it was a tragic death, a justified death, a wrongful death, a terrifying death, or a peaceful death. Death looms before all and presents us with the prospect of losing what is most important—our own life and the lives of others, many of whom we love. Although death will one day include each of us, the experience of anyone’s actual death, even our own, will be someone else’s. Another way to put this is that my death—your death—will be experienced by someone other than me—or you.

Having opened the idea of an ethics of death to reflection on the deaths of others as experienced by the living, we have undertaken to examine the deaths that all of us witness and involve ourselves in as members of the moral community. Death takes many forms. It comes to us through natural processes, such as disease, and through human action, such as killing. But in the processes whereby human beings come to death, decision making and questions of moral meaning are constantly present. Heart disease and cancer, for instance, are

natural occurrences that can lead to death, but people make all kinds of decisions about what to do once they are handed a diagnosis: whether or not to treat, how aggressively to treat, and so on.⁴ These may look like purely scientific questions, but medical science is actually providing information for deliberation and interpretation as well as treatment options: what is to be done with that information is a moral question. The physician who says to a patient, “This is what we should do,” is acting as a member of the moral community hoping to persuade another person with whom the physician is in relationship to act in such a way that the good of life might be preserved. The physician wants to see the patient flourish, which is to say that by taking one course of action over another the physician believes that the patient might continue to enjoy life and the many goods of life—friendship, aesthetic experience, bodily and psychological integrity, and so on. Ordinarily, reasonable persons want to avoid death—not only their own but the death of others—for as long as possible, since life is good in and of itself. There are many intrinsically good things in life, and death puts an end to those and grieves us with the pain of loss, which can be devastating and even at times unendurable. The pain of loss, which is part of the experience of death for the living, leads often to the conclusion that death is itself a great evil, but death can be thought of more neutrally, say, as a terminus in the life process, and it is known throughout nature among all life forms. Human beings can do things that bring about death in ways that challenge moral sensibilities and upset the possibility of human flourishing. This book investigates an ethics of death by examining those challenges.

In the pages ahead we examine such issues as suicide, physician-assisted suicide, euthanasia, capital punishment, abortion, and war—all areas of life where death poses moral challenge. Each author comes at the issue of deciphering moral meaning in a different way. Dennis Cooley, a professor of philosophy and ethics at North Dakota State University (NDSU) and associate director of the Northern Plains Ethics Institute, has written on ethical issues at the end of life from the perspective of a philosopher. Lloyd Steffen, a professor of religion studies at Lehigh University, has also written on end-of-life issues, and he does so as an ethicist concerned about philosophical issues but also as a religion scholar who refers ethical issues to religious values and frameworks. We actually met in Salzburg, Austria, in 2008 at the sixth global Making Sense of Dying and Death conference, agreed to coedit the proceedings of that conference, which was published as *Re-Imaging Death and Dying: Global Interdisciplinary Perspectives*, and then decided to pursue a new

4. Although the idea of such diseases as “natural” is made more complicated when they are caused by human action such as smoking or eating imprudently.

project—an interdisciplinary and dialogical inquiry into the ethics of death.⁵ This book is the product of a two-year dialogue between a philosopher whose discipline is well defined and a religion scholar who works in a “field” rather than a discipline and who brings the perspectives of a philosopher of religion and ethicist to bear on a topic of importance in the study of religion: death.

From the beginning, dialogic engagement motivated this project. Both of us were committed to the idea that the book would be an exchange, a give-and-take, around ethical ideas involving the meaning of death for the living. Each author would provide background by laying out the ethical perspective to which he was committed, then address in an essay each of the topics taken up in individual chapters in the volume. At the close of the essays, each author would ask of the other person questions provoked by the essay, then each would respond and offer questions back. Much of what is found in this volume is a dialogue in which two scholars interrogate one another on topics of common interest but through different perspectives. The questions we ask of each other reflect differences in training and methodological commitment.

We undertook this project believing that scholars and students as well as more general readers would find this a valuable contribution to a cross-disciplinary discussion of issues related to the ethics of death. In the pages ahead, readers will encounter authors who are concerned to lay out how they go about analyzing ethical problems in light of theoretical commitments, and readers will discover quickly that different approaches are used in the examination of the moral questions at issue. The authors at times disagree with one another, sometimes over questions of analysis, sometimes in ethical outcomes. We ourselves found challenge in the other’s perspectives, essays, questions, and remarks. Readers may be interested to see what a philosopher wanted to know about religious attitudes and what sustains those attitudes in questions of life and death (and afterlife), as well as how a religion scholar presents a diversity of views from different religious traditions that may or may not provide clarity on particular philosophical questions. As we exchanged files via e-mail (and tried not to mix up or lose the latest version of a chapter), we found the ongoing conversation engaging, even fun at times, and both of us hope that in these pages readers will find a model for how to engage and inquire, push and disagree with civility and good will. There is no rancor in these pages, and neither of us engaged in critical inquiry of the other’s

5. Here is the full publication information for the conference proceedings: Dennis R. Cooley and Lloyd Steffen, eds., *Re-Imaging Death and Dying: Global Interdisciplinary Perspectives* (Oxford, UK: Inter-Disciplinary, 2009). This e-book may be found at <http://www.inter-disciplinary.net/publishing/id-press/ebooks/re-imaging-death-and-dying>.

perspective with an eye toward criticizing for the sake of criticizing, as if that were the hallmark of “critical thinking.” Some ideas put forward in the pages ahead may surprise readers, but even controversial ideas are given a fair hearing and not rejected out of hand—we have tried to clarify issues and perspectives through the process of analysis and back-and-forth deliberation.

As a word of thanks, we want to express our gratitude for the global dying and death conference mentioned above that turns out to have been the true origin of this volume. This conference still meets yearly and is sponsored by Inter-Disciplinary.Net, with Dr. Rob Fisher and Dr. Nate Hinerman the primary organizers. We are also grateful for the support of Fortress Press throughout this project and to readers who offered helpful comments and suggestions that have improved what is offered in these pages.

Dennis Cooley would like to thank his department colleagues in the philosophy-humanities and the religious studies programs at NDSU and Catherine Cater, NDSU professor emeritus, who spent so much time discussing various positions and arguments with him and then kept him from making too many mistakes.

Lloyd Steffen would like to thank friends and scholars at Lehigh University, especially Kenneth Kraft, who provided a helpful assist on ethical issues in Buddhism, Dena Davis, who introduced him to the Jain practice of *sallekhana*, which finds its way into the suicide chapter, and Barbara Pavlock, for her instructive Latin lesson; and members of the ethics committee at St. Luke’s University Hospital in Fountain Hill, Pennsylvania and colleagues at various conferences with whom he has discussed dying and death issues. He is, as always, grateful for the support of his spouse, Emmajane Finney, and his sons Nathan, Sam, and Will.