Killing and Letting Die: The Irrelevant Distinction

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KILLING AND LETTING DIE: THE IRRELEVANT DISTINCTION

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Abstract

The object of this essay is to explain why the distinctions made in euthanasia between killing vs. letting die and willingness to kill vs. unwillingness to kill are not relevant to real life euthanasia cases. The specific purpose of the research is to isolate the relevant factor for debate when discussing the morality of euthanasia. It begins with a brief examination of some vocabulary that is commonly used when discussing euthanasia. Following this is a quick overview of what the word euthanasia meant in the ancient Greco-Roman world compared to what it means in the modern vernacular. I use an article by James Rachels about the lack of distinction between killing and letting die (which is one possible relevant factor) and a reply by William Nesbitt which attempts to shift the focus onto willingness to kill (another possible relevant factor). I conclude that Rachels is correct that killing and letting die are morally equivalent when all other factors are the same, but that other factors are never the same and that Nesbitt is closer to the real morally relevant factor in his discussion of willingness to kill. However, Nesbitt is not entirely correct or clear about his ideas. Willingness to kill can, in a case of euthanasia, be equivalent to a willingness to help and is not always a negative thing. The more generalized intention of the person performing the euthanasia is the most relevant factor to the morality of the act.
I. Introduction

The moral distinction (or lack of distinction) between killing a person and letting a person die is an important part of the debate over the legalization of euthanasia. This distinction between killing and letting die gets at a common way that people often think about the issue of euthanasia. The line of thinking goes roughly like this: “killing a person is morally worse than letting a person die, therefore doctors should be allowed to cease treatment of a patient and ‘let them die’ but should not be able to act upon the patient to cause their death, or ‘kill them’”. I will argue that this way of thinking is flawed as it is based on the premise that killing a person is morally worse than letting a person die. I will discuss killing and letting die here, but more importantly I will attempt to decide if the lack of distinction is relevant to the morality of euthanasia at all. If it is not, I will try to find out what is the morally relevant factor we should be judging.

In the following sections I explain some basic concepts within the euthanasia debate and how euthanasia has been viewed throughout history. I then analyze two arguments about the distinction between killing and letting die. To do this analysis, I use an article by James Rachels (2010) who argues there is not a moral distinction between killing and letting die, and a response to this given by William Nesbitt (2010). Nesbitt argues that the more relevant factor to the morality of euthanasia is the actor’s willingness to kill. I think Nesbitt gets closer to the real morally relevant factor than Rachels but is also not very clear in his argument. I use the analysis of these two papers to assert that the distinction between killing and letting die is not relevant to the euthanasia debate as a whole. There is a factor that is more relevant than this and more relevant than ‘willingness to kill’ that should be considered.
II. Basic Concepts

In order to understand the issues being discussed in this paper, some basic concepts must be established. This helps to categorize which parts of the euthanasia discussion are important to the argument that will be made later. To do this properly, the terms “active euthanasia” and “passive euthanasia” must be defined, along with the different sorts of consent a patient can give regarding these types of euthanasia.

*Active euthanasia* is a term used to describe when a second party purposely acts upon a person who is suffering in a way that causes their death. Examples of this kind of euthanasia include giving the patient an overdose of pain medication or a lethal injection. These examples each have to be performed by one person on another and are meant to cause the death of the patient, thereby relieving that person of their suffering. In the case of *passive euthanasia* a second party withdraws treatment or life-sustaining measures from the suffering person allowing the natural sequence of events to unfold. It is still a form of euthanasia because in these cases the removal of life-sustaining measures from the person will certainly cause their death. Examples of passive euthanasia include removing the feeding tube or life support machine from a person who is in a coma and unable to perform the functions that the machine is doing to keep them alive. In certain cases death by passive euthanasia can be as slow and painful as whatever sickness or ailment the person was suffering from in the first place.

In situations of potential euthanasia there are three sorts of consent that a patient can have. The first is voluntary euthanasia, in which a patient is in a right state of mind and asks to be euthanized. The second is involuntary euthanasia, in which a patient does not have the ability to consent and the decision to euthanize or not is made by a responsible
party like the family or a doctor. An example of involuntary consent is where a person is in a coma and doesn’t have a living will. In this situation decisions about medical care (including euthanasia) are made by the responsible party. The final kind of consent state is non-voluntary, where a person expresses a clear wish not to be euthanized and it is done against that person’s will. Insofar as non-voluntary euthanasia involves killing a person against their will, it is generally regarded as deeply wrong.

These types of euthanasia and consent states can be mixed and matched to describe different ways euthanasia can take place. To do this, pick one type of euthanasia (passive or active) and one type on consent (voluntary, involuntary, non-voluntary) and put them together. For example, if I describe something as passive involuntary euthanasia it is clear that this involves a situation in which a patient doesn’t have the ability to express whether or not they want to be euthanized so a second party makes that decision and the individual is euthanized by removing some life-sustaining measure. For the purpose of discussing the moral distinction between killing and letting die, I will be focusing strictly on active voluntary euthanasia in this paper. These are situations in which the suffering patient is in a clear state of mind, wants to be euthanized, and it is done by a second party acting upon them to cause their death.

III. Historical Background

The word euthanasia literally translates to “the good death” (Carrick, 2001). In the ancient Greco-Roman world the term euthanasia didn’t mean the same thing that it does in our contemporary vernacular. The focus of the word then was on the psychological and spiritual aspects of the person who was euthanized, in contrast to our contemporary usage where euthanasia refers more to a method of dying. The question in antiquity was not
about how they died but what their state of mind was like when they died. According to Paul Carrick in his book *Medical Ethics in the Ancient World* (2001) “the pivotal ancient question regarding euthanasia in its broadest sense was, typically: Did the subject voluntarily meet death with peace of mind and minimal pain?” (Carrick, 2001, p. 149).

In further describing “the good death” Carrick also uses words such as “easy” and “efficient” (Carrick, 2001, p. 147-149).

Another difference between the Greco-Roman and contemporary use of the word euthanasia is the role of doctors. When the term euthanasia was used in the ancient Greco-Roman world there was no place for a doctor. Euthanasia during this time period was often spoken of as if it were equivalent to suicide, which means that the moral issues discussed basically revolved around the question “is it right to purposely cause your own death?” Although the majority of the Greco-Roman world did covet euthanasia and maintained hope that they would have the chance to choose how they would die, there were some prominent names that maintained moral qualms regarding euthanasia, including Aristotle and Pythagoras (Carrick, 2001, p. 153, 160).

The common sentiment that one had the right to take their own life is summed up by Carrick when he says “to have the capacity to willfully depart from life was viewed as the greatest boon to mankind; it constituted a real choice that epitomized moral freedom” (Carrick, 2001, p. 163). In the same book Carrick discusses a philosopher who lived during this time period that believed euthanasia to be “the good death.” Seneca, a philosopher in the stoic tradition, ended up dying by cutting his wrists in anticipation of his former student, Nero, executing him for treason. Seneca gave the analogy of life being a banquet and said of dying something like “only the fool would attempt to oppose
death; the wise man would arrange to meet it head on if he could, timing his exit from this world with the aplomb of a thoughtful dinner guest who seeks to avoid boring or detaining his hosts. Hence, the wise man withdraws from life’s banquet in just the right way, under just the right conditions” (Carrick, 2001, p. 162).

Euthanasia is a controversial subject in modern America, with many people taking the stance that active euthanasia is always immoral. One can clearly see the public opinion of active euthanasia vs. passive euthanasia by looking at the laws that have been passed regarding it. At this point in time active euthanasia is banned in 48 out of the 50 states. It was legalized by the Death and Dignity Act in Oregon in 1994 and in Washington State in 2008. It was put up for a vote in Massachusetts in 2012 but it didn’t pass, and remains illegal. On the other hand, in all 50 U.S. states passive euthanasia is legal. One way to explain this is the difference in how we use the term compared to the ancient Greco-Roman world. To modern Americans euthanasia is an *action*, it is an act that someone performs on another person and has very little to do with the state of mind of the suffering person. In fact, unless the person suffering is mentally ill and unable to make the decision to be euthanized law makers, judges, and other prominent figures in this debate rarely discuss the patient at all. Much of the text being written in this debate is about the doctors performing euthanasia and their Hippocratic Oath, the idea is similar to “a doctor should never cause harm and killing a person is harming them”. This is what allows the killing vs. letting die debate to be so prominent in the topic of euthanasia. Is it right to think that letting a person die is morally permissible while actively causing the person’s death, in the relevant circumstances, is morally wrong? The answers to this
question seem to focus on the doctor’s Hippocratic Oath more than the patient’s suffering.

IV. Smith and Jones

The first article I analyzed that is related to the difference between killing and letting die is “Active and Passive Euthanasia” by James Rachels (2010). Rachels wrote this as a response to the seemingly common idea that passive euthanasia is morally better than active euthanasia. In this essay Rachels attempted to make the case that active euthanasia is morally no worse than passive euthanasia if you are basing that difference on the grounds that passive euthanasia is an act of letting die while active euthanasia is an act of killing. He does this by giving two scenarios that attempt to show that there is no moral difference between killing a person and letting that person die if all other factors are the same. If Rachels is correct and shows that there isn’t a morally relevant distinction between killing and letting die then it is illogical for passive euthanasia to be legal and active euthanasia to be illegal based on the premise “killing someone is morally worse than letting them die”.

In order to prove that there isn’t a moral distinction between killing and letting die Rachels gives two nearly identical scenarios where the only difference between them is one is a case of killing and the other is a case of letting die (Fig. 1). In each case there is a man who stands to inherit a large sum of money should his six year old cousin die. One man is named Smith, and the other is named Jones. Both Smith and Jones want this money, and because of their greed plan to go into the bathroom and drown their nephew while he is taking a bath. Smith goes into the bathroom, holds the child under the water until he stops breathing and makes everything look like it was an accident. Jones goes
into the bathroom with the same plan, but by his own good luck as Jones is walking into
the bathroom the child slips, hits his head, and falls under the water of his own fault. In
this case, Jones stands above the bathtub to ensure that his cousin does not wake back up
and live, and Jones is perfectly willing should the child get back up to hold him under the water by force. However, force is not necessary as the child does not get back up and dies with Jones watching him.

After reading these cases, one is supposed to have the intuition that both Smith and Jones are equally reprehensible people. If they are equally reprehensible people, then we have to ask what is it about the story that is making us judge them in that way. In the story we are given that everything is exactly the same except that Smith killed the child and Jones simply let the child die. Because those are the only factors that are not the same, they are the factors we are isolating and judging in these scenarios. If it is the case that our intuitions are telling us that Smith and Jones are equally morally reprehensible, then our intuitions are telling us that killing is morally equivalent to letting die. Rachels claims that Jones cannot defend himself on the basis of the killing and letting die distinction. No one would accept his argument if his defense was something like this: “After all, I didn’t do anything

<table>
<thead>
<tr>
<th>Smith</th>
<th>Jones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inherits large sum of money should 6yr old cousin die</td>
<td>Inherits large sum of money should 6yr old cousin die</td>
</tr>
<tr>
<td>Plans to go into bathroom and drown the child</td>
<td>Plans to go into bathroom and drown the child</td>
</tr>
<tr>
<td>Motivated to this by greed</td>
<td>Motivated to this by greed</td>
</tr>
<tr>
<td>Drowns child- makes it look like accident</td>
<td>Child happens to be drowning- allows child to die</td>
</tr>
</tbody>
</table>

Figure 1. Comparison of the two scenarios related to euthanasia where the variable is clearly isolated as the only difference between them.
except just stand there and watch the child drown. I didn’t kill him: I only let him die” (Rachels, 2010).

V. Similarity Criterion

Before I move on to the reply to Rachels’ argument given by William Nesbitt, I want to discuss what makes Rachels’ argument work. It should be clear that by giving two identical scenarios, except that Smith kills and Jones lets die, that Rachels is attempting to isolate the factors in killing versus letting die. We are rarely, if ever, able to make a judgment about killing and letting die that is not influenced by other factors, like intentions, goals, etc. When Rachels takes away the differing other factors and gives us a situation in which the only difference is killing and letting die, much like in physical science, the isolated factors are what we should be measuring. This method of isolating the action we are morally evaluating has been called many different things, but here I refer to it as “The Similarity Criterion”.

Rachels is not the only author interested in the moral distinction between killing and letting die that uses this kind of criterion. He is in the company of other prominent (and not so prominent) names in philosophy that follow the same train of thought such as Judith Lichtenberg\(^1\), Peter Singer\(^2\), and Joachim Asscher\(^3\). Each of these people recognize this concept: that in order to measure killing and letting die in a way that will allow us to be able to tell if there is a moral distinction between them, killing and letting die

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die must be the only difference in any given scenario. In the same article, “Active and Passive Euthanasia”, Rachels says that we could not “be confident it is this difference and not some other that account for any variation in the assessment of the two cases” (p. 285) if multiple variables differed. The next article I discuss is William Nesbitt’s reply to James Rachels, and in his article Nesbitt initially seems to be denying the similarity criterion.

VI. Nesbitt’s Rebuttal

Nesbitt seems to deny the similarity criterion in his article “Is Killing No Worse than Letting Die?” (2010) when he states that the reason we judge the cases like we do is because the cases are “too similar”. In fact, “not only do Rachels Smith and Jones, for example, have identical motives, but both are guilty of the same moral offence” (p. 289). Nesbitt contends here that we are confused about what we are judging in the cases and that we are not actually looking at merely the difference between killing vs. letting die alone. He argues that we are also taking into account their willingness to kill. The willingness to kill the child is something that each one had and was motivated out of personal gain. This shared willingness to kill is what generates the moral intuition that Jones is as bad as Smith.

Rachels makes a very clear and compelling case for why killing and letting die are morally equivalent and Nesbitt would have a hard time (as anyone would) trying to deny that point. This is one good reason to believe he is not trying to deny Rachels’ claims or the similarity criterion. Nesbitt agrees with the idea that, all other factors being equal, there is no moral distinction between killing and letting die. Nesbitt is trying to say that what is relevant when we are judging the act is the intention, and in the case Rachels
provided their intentions are equal. What is relevant to the moral decision we make about the case are the intentions of the actors. Smith and Jones have the same willingness to kill and this is why we judge them similarly.

In order to help illustrate his point Nesbitt gives us a modified case where Jones does not have the willingness to kill. In this case all other factors remain the same, Smith and Jones still have a young nephew who they stand to inherit a large sum of money from should he die and Smith does the same thing he did in the original case, kills the child by drowning him and leaves the room making it look like an accident. Jones on the other hand, has a moral reluctance to kill in this case. So Jones is just walking by and sees the child slip and start to drown. Jones goes over to the water, delighted at his good fortune and watches the boy drown. If he should get back up Jones would not hold him back down because Jones will not kill, but he does let the child die and then goes on about his day. Nesbitt says that in this case our intuitions should tell us that Smith is much worse for killing the child than Jones is for letting him die.

Nesbitt seems to suggest that the most important part in these scenarios is the fact that both Smith and Jones had a willingness to kill. This is the specific intention that Nesbitt wants to point out, that if in fact Jones had not had a willingness to kill that we would not have judged Smith and Jones the same. Nesbitt points out that when Rachels says that Jones “let the child drown” he is neglecting the crucial fact that Jones would have killed the child had it become necessary- he was simply lucky that it did not become necessary.

The problem with this case is that Nesbitt does not make it clear why the similarity criterion doesn’t apply. Why shouldn’t we just accept Rachels point that killing and letting die are morally equivalent and move on? In fact, the entire article written by
Nesbitt is confusing and he never makes the point of what he is trying to do clear enough. This is why people have different ideas about what he is saying. If he still believes that there is a morally relevant distinction between killing and letting die he is clearly wrong because Rachels case against that was excellent. It seems that what Nesbitt is trying to communicate is the distinction between killing and letting die alone is not the main moral distinction in euthanasia cases. So what is? Nesbitt thinks that it is a willingness to kill, which gets him closer to the real distinction. However, because he isn’t clear with what he is trying to do he still misses the mark.

VII. Willingness to Kill vs. No Willingness to Kill

From Rachels argument it is clear that killing and letting die (when no other factors are involved) are morally equivalent. This idea has major implications in the realm of medical euthanasia. If one believes the only real reason to make active voluntary euthanasia illegal is that it is killing (which I suspect is a common view), then if we prove that killing is morally equivalent to letting die it may follow that it doesn’t make any sense for active euthanasia to be illegal while passive is legal. Given that passive voluntary euthanasia is already legal it would easily follow that active voluntary euthanasia should be legalized.

The point I think Nesbitt it trying to make now becomes important in the discussion. He claims that even if it were the case that killing and letting die are morally equivalent actual euthanasia cases have a more relevant factor to analyze- this is the willingness to kill of the doctor. By responding to Rachels through bringing in the willingness to kill distinction Nesbitt is trying to say that this is the distinction that matters in cases of euthanasia. If he is correct, Rachels could be right that killing is morally the same as
letting die and yet still not be right that active euthanasia is no worse than passive euthanasia. Nesbitt is saying that there is a moral difference between being willing to kill someone and being willing to let someone die, and this is the really morally relevant factor we should be discussing when comparing active and passive euthanasia. We should not be using the killing and letting die distinction at all, but rather this one which gets closer to what an actual case of euthanasia would be like.

In cases of real life euthanasia neither the intentions of the actors nor the circumstances of the cases are the same. If we think back to Smith and Jones, the single act that we are judging is the one which would allow them to kill their young nephew in order to gain his wealth. It is this complete isolation of the variables that gives Rachels’ the ability to win this argument and say there isn’t a moral difference. In real life cases this doesn’t happen, typically the intentions of someone performing active euthanasia are different than a person performing passive euthanasia. Because Nesbitt makes the point that no real life cases can follow this type of analysis to decide the morality of the practice he believes we need to judge euthanasia on a different factor. This is why Nesbitt is closer to a real answer in the euthanasia debate, he is bringing in factors that can be analyzed (aka intentions) with all the other relevant information where Rachels’ takes away all the information to analyze his two variables.

In cases of active voluntary euthanasia a doctor has to have a willingness to kill, whereas in cases of passive voluntary euthanasia a doctor only has to have a willingness to let die. A huge flaw in the response Nesbitt gives is the confusion with which he leaves the reader. He needs to be clearer in his argument and make it obvious to the reader that this is why the former should be illegal while the latter can remain legal. Active
euthanasia requires us to have doctors in hospitals that have a willingness to kill and this is what Nesbitt thinks is the morally damning factor, and the one that should be focused on when making decisions about the legality of euthanasia as a whole.

The distinction that Nesbitt really makes (about the morality of willingness to kill vs. unwillingness to kill) is one through which the current debate can be furthered. Nesbitt may, to his critics, say something like ‘killing and letting die are morally equivalent. However, there aren’t real life cases of euthanasia where killing and letting die are the real factors we are judging. It is more relevant in these real life cases to make the distinction between a doctor who is willing to kill and one who is not’. I believe that this is closer to what the really relevant factor in the morality of euthanasia is, but I believe it is still flawed. Nesbitt takes for granted that our intuition or immediate reasoning will tell us that willingness to kill in a person is always worse than willingness to let die. But is it?

The problem with all of the aforementioned cases lies in the framing of them as a way to harm people. Everything seems to shift, especially in regard to having a willingness to kill, when you make a case where killing would be with the intention to help a person. This is where all the other cases are confused, they can’t correspond to euthanasia correctly because the cases are always framed by asking if there is a distinction between killing and letting die or willingness to kill and unwillingness to kill when the object is to harm. In euthanasia, the object is to help the patient; the cases we are considering should be framed by this idea. Take for example, the scenario of a police officer trying to stop the probable suffering of hostages in a stand-off situation. In order to end the situation quickly, with as little violence as possible, I think most people would agree that the cop who is willing to kill the hostage taker is morally correct in his decision. More than that, I
think we could further agree that the cop who is willing to kill the hostage taker in an effort to save the hostages is morally better than a cop who in the same situation would merely be willing to let the hostage taker die. Here we have a scenario in which we can more clearly see how a willingness to kill (when akin to a willingness to help) is morally better than a willingness to let die. The intention is to help, not to harm, and the cases we should look at need to reflect that.

VIII. The Real Distinction

Although willingness to kill vs. unwillingness to kill seems to be closer to the moral distinction we should be focusing on in euthanasia cases, it has the fatal flaw of assuming that a willingness to kill is always a bad thing. Nesbitt at certain points in his paper paints the world as if we would all be in significantly less danger should everyone only have a willingness to let die rather than a willingness to kill. However, in most legal euthanasia cases willingness to kill can stem from a desire to help those in need. We shouldn’t have the quick response that people with a willingness to kill are “obviously dangerous”. In the case that Nesbitt established where willingness to kill was worse than willingness to let die it was because someone was being harmed. In cases of euthanasia the goal is to assist a person. No one is being harmed, even though there is a willingness to kill. In real cases willingness to kill is the same thing as the doctor being willing to assist.

This is where both Nesbitt and Rachels are misleading. In Rachels’ example both men are motivated to kill/let die by personal gain, which would obviously go against our moral intuitions. Nesbitt says we need to get closer to real life cases of euthanasia and claims that in Rachels’ case what we are really judging is the actors’ willingness to kill. Nesbitt is correct in that we should get closer to real life cases of euthanasia, but he is
equally misleading in his counter-example because the *malice of the actor* is still present. Real life cases of euthanasia almost always stem from a desire to help the person that is suffering. In fact, in real life cases a willingness to kill can often be seen as morally better than a willingness to let die because it prevents the pain and suffering of “allowing” the patient to die of natural causes that is passive euthanasia.

So, killing and letting die are morally equivalent acts when they are only measured against one another with no other relevant factors in the cases. However, euthanasia in real life is never the kind of decision that can be done without many morally relevant factors being examined. Nesbitt, in order to get closer to how morality would be decided in real life cases, makes a distinction between a person who is willing to kill and one who is only willing to let die. While Rachels is correct about killing and letting die, Nesbitt comes much closer to the moral distinction that should be considered in real life cases with his argument about willingness. But, if it is the case that a willingness to kill is equivalent to a willingness to help (in most euthanasia cases it is) then Nesbitt cannot use this distinction to argue against active euthanasia.

So, neither Rachels nor Nesbitt have currently described a completely relevant argument. The killing and letting die distinction doesn’t seem relevant because real life cases aren’t judged on the basis of killing and letting die. When Nesbitt brings up willingness to kill he seems to get closer to what we are trying to judge in real life cases, but doesn’t exactly hit the nail on the head because he doesn’t discuss how willingness to kill can stem from a deeper desire to help the patient and end needless suffering. So we have to go a little further than both of these ideas and say that the real morally relevant factor is the intentions of the doctor in each case. As mentioned earlier, much of the
discussion around euthanasia is asking whether it is moral or not for the doctor to perform euthanasia. When we ask about euthanasia we are often asking if it is okay for a doctor to kill a person under certain conditions. Those conditions greatly vary, and the intentions of the doctor should be judged on a case by case basis.

What this means for the legality of euthanasia is complicated. Due to the fact that the morality individually rests within the doctors’ intentions, it wouldn’t make sense to make any type of euthanasia illegal. You can’t judge whether a case of euthanasia should be morally permitted or not if active euthanasia is illegal before the case is even made. In this “case by case basis” way of judging morality of euthanasia each case would have to be individually looked at, and one relevant factor would be that you would need a doctor who is willing to kill because of the fact that it is helpful to the patient to relieve his or her pain and suffering.

The distinction we need to look at to decide the morality of any euthanasia case is the specific information about that specific case as analyzed each time. Killing vs. letting die or willingness to kill vs. unwillingness to kill alone are not able to account for all the contingencies of a euthanasia request. Far reaching laws that generalize active voluntary euthanasia as “always right” or “always wrong” will never be able to get to the intricacies present in each case. A huge benefit of taking this view about the legality of euthanasia is that it relates to our current common sense views about the practice. If we analyze the morality on a case by case basis we are able to take things into consideration like the level and speed of deterioration in the patient, the history and intentions of the doctor in considering euthanasia, and the wishes and reasoning of the loved ones of the patients beforehand.
A popular view on passive versus active euthanasia is that the morality of each lies in the distinction between killing and letting die. However, Rachels has shown quite effectively that there is not a moral difference between killing and letting die when all other factors are equivalent and fixed (this is based on something like the Similarity Criterion). We then saw how unrealistic it is to fix all other factors in real life cases of euthanasia where there is more than just a difference between killing and letting die in play. Nesbitt has shown that there is a need for willingness to kill in active euthanasia, while there is only a need for willingness to let die in passive euthanasia. Here Nesbitt argues that we tend to think it is worse to be willing to kill someone rather than to just let them die, and that it is this difference which gives justification to the idea passive euthanasia is morally better than active euthanasia. Yet, when we realize that in real life cases of euthanasia this willingness to kill comes from the desire to help a person and end their needless suffering, we see that active euthanasia stems not only from honorable motives but may in fact be the most moral way to act in that situation. The examples given by Rachels and Nesbitt are both misleading, and therefore irrelevant to deciding the legality of euthanasia, because they are cases where the actors intentions are to harm another person. If this analysis is correct, then what we should be asking is if it is reasonable to put restrictions on how far a doctor can go to help a person.
References


