SUFFERING, DYING, AND DEATH
PALLIATIVE CARE ETHICS ‘AFTER GOD’

H. Tristram Engelhardt jr.*

Rice University, Department of Philosophy, P.O. Box 1892, Houston, Texas 77251-1892, USA
(Received 3 July 2012)

Abstract

Metaphysical commitments have important implications for moral choices. Suffering and dying are nested in a quite different context of meaning, if human existence is held to end with death rather than to go to judgment before God. In the West after the French Revolution, a culture marked by laïcité and a disengagement from the transcendent emerged. This led to a rupture of the dominant European culture from the traditional Christian Ethics and rituals that guided preparation for death so that a post-Christian and post-metaphysical palliative care ethics now exists that increasingly accepts physician-assisted suicide and euthanasia. For countries whose dominant culture is still traditionally Christian, entering the European Union involves an encounter with this secular culture and its ethics. This essay explores the geography of some of the differences separating a secular palliative care ethics, which accepts physician-assisted suicide and euthanasia, from the traditional Christian Ethics that had previously been dominant. This change in the character of the dominant Ethics is associated with a foundational change in the meaning of much of morality, especially a demoralization and deflation of the traditional morality of end-of-life decision-making into matters of life-style and death-style choices.

Keywords: palliative care, end-of-life decision-making, euthanasia, post-modern morality

1. ‘After Metaphysics’: an introduction to the contemporary dominant secular culture

Entering the European Union involves being joined to a culture that is ‘after Metaphysics’ and post-traditional. By ‘after Metaphysics’ I identify a culture that articulates its concerns fully within the horizon of the finite and the immanent. By a post-traditional European culture, I mean a culture that is no longer structured by the traditional Christian norms that up until recently had publicly governed decisions regarding sexuality, reproduction, and end-of-life decision-making. Choices regarding forms of sexual activity (e.g., fornication

* E-mail and additional contact info: htengelh@rice.edu, Tel. +1 (713) 660 7861, Fax +1 (713) 660 7861, Professor Emeritus at Baylor College of Medicine, Houston, Texas 77251-1892, USA
and homosexual acts) and the control of reproduction (e.g., the use of abortion), as well as end-of-life decision-making (e.g., physician-assisted suicide and euthanasia), which traditional Christianity recognized as prohibited, are within this dominant culture rendered into licit life-style and death-style choices. The result has been a change in normative public discourse, in that in the now-dominant secular culture it is socially, if not at times legally, forbidden publicly to condemn or decry as a moral issue much of what had traditionally been recognized as immoral. At stake is a thoroughgoing recasting of how end-of-life decision-making and the ethics of palliative care can be understood within the dominant secular culture. Secular morality and secular bioethics are ‘after God’ and ‘after Metaphysics’, that is, after any acknowledgement of a defining God’s-eye perspective that can supply secular morality and secular bioethics with an anchor in a reality beyond the sphere of the finite and the immanent, beyond the sphere of the socio-historically conditioned.

The character of secular moral choices is a function of the dominant culture’s stance regarding moral pluralism. The dominant secular culture at the very least accepts this pluralism, thus making space for celebrating this pluralism as a presentation of what is taken to be the rich diversity of human moral possibilities. The contrast of the now-dominant secular culture’s appreciation of moral pluralism with that of traditional Christianity is stark. On the one hand, traditional Christianity recognizes that the persistence of strident moral disagreements as to when it is forbidden, licit, or obligatory to have sex, reproduce, transfer property, and take human life reflects a failure to recognize and affirm the canonical morality that should guide. On the other hand, the dominant secular morality discounts the force of these disagreements while accepting or affirming moral pluralism. Although secular moral pluralism is intractable, the dominant secular morality discounts the stridency of the disagreements by re-interpreting the significance of what is morally at stake. The moral and political space of the secular, social-democratic state that has emerged is both nominalist and historicist, as Richard Rorty (1931-2007) rightly appreciates [1]. In summary, in a secular culture after metaphysics, moral pluralism is regarded as presenting moral possibilities, not as reflecting a moral failure. In contrast, for traditional Christians and traditional bioethicists, the contemporary moral pluralism is acknowledged as a failure adequately to appreciate the canonical content of morality, as well as the ultimate significance of life and reality.

2. From morality to life-style and death-style choices

The secular moral-philosophical project cannot in principle establish a canonical moral perspective, because there is no non-controversial standard to guide [2]. This state of affairs involves not just the increasing dominance of a secular morality of end-of-life decision-making, but a change in the meaning and force of morality [3, 4]. Because there is in principle no one secular moral rationality, nor one account of the secularly politically reasonable, there is a
plurality of accounts of secular Ethics and of the secular Ethics of palliative care. Again, this is the case because one needs a background moral standard in order to identify a particular morality, along with its palliative ethics, as canonical. So, for example, if one were to ask within secular bioethics what end-of-life decisions an impartial rational decision-maker or a disinterested moral observer would or should make, no principled answer can be given. One must first supply the impartial rational decision-maker, disinterested moral observer, or account of moral rationality with a particular canonical thin theory of the good, a particular canonical moral sense, or a particular canonical understanding of moral rationality from which to draw guidance. For example, within the dominant secular morality, one needs such a standard in order to know whether in secular moral terms it is best to determine the appropriate scope of one’s life through physician-assisted suicide or voluntary active euthanasia, when death is imminent and one can no longer pursue the goods one celebrates, and in addition one is experiencing pain and various forms of suffering. The difficulty is that, if there is no such secular moral standard, no such secular canonical moral perspective, then the choice is no longer a moral choice in the traditional sense of a universal norm.

Moral disagreements regarding the norms for sexual behavior, reproduction, and end-of-life decision-making are intensified by profoundly different views regarding the significance of life and reality. In particular, the various Ethics of end-of-life decision-making and of palliative care diverge in their force, depending on whether they are framed by an atheistic methodological postulate, which as Habermas notes invites one to act as if God did not exist [5], or instead by a theistic methodological postulate, such as that forwarded by Immanuel Kant (1724-1804). Kant attempted to embed within the requirements of reason all the moral prescriptions and proscriptions of traditional Western Christianity. However, he recognized that this rational defence of morality was impossible, if one lost all reference to the transcendent, because one lacked a canonical point of reference, as well as an assurance that the right and the good would be in harmony. Although with regard to theoretical knowledge Kant had cut himself off from the transcendent, in the pursuit of empirical knowledge Kant still engaged the idea of God as a regulative principle (A675=B703). In addition, Kant recognized that morality as a practice cannot retain its traditional force without embracing the practical postulates of God, freedom, and immortality.

These postulates are those of immortality, of freedom affirmatively regarded (as the causality of a being so far as he belongs to the intelligible world), and of the existence of God. … The prospect of the highest good, necessary through respect for the moral law and the consequence supposition of its objective reality, thus leads through postulates of practical reason to concepts which the speculative reason only exhibited as problems which it could not solve [6, AK V.129-30].
Kant appreciated the gulf separating those who live in conformity with the practical postulates of God’s existence and immorality from those who live after God.

Despite this depth of disagreement, or more precisely in reaction to it, the now-dominant secular morality seeks to discount the depth of the gulf separating the disagreeing parties and to discount the force of the disagreements. As already indicated, the dominant secular culture functions as a meta-normative perspective that seeks to relocate, re-interpret, and transform large areas of traditional moralities so as to downgrade the force of claims about a wide range of issues rendering them into life- and death-style choices. In particular, the dominant secular morality of the dominant culture of the European Union seeks to re-locate traditional moral norms of sexuality, reproduction, marriage, and end-of-life decision-making within a moral perspective that would transform traditional moral norms into quasi-aesthetic norms shaping alternative life-style or death-style choices. The dominant secular morality of the West invites the demoralization and deflation of traditional Western morality, Bioethics, and palliative care ethics.

By demoralization I mean that what had been held to be moral choices can no longer be established in terms of secular norms as choices that persons must make in order to be held by all rational observers to be praiseworthy, to be held to have acted appropriately in pursuit of the good, or to be held to be virtuous. In particular, the term ‘demoralization’ identifies the circumstance that a wide range of end-of-life decision-making can no longer on secular normative grounds be recognized as involving moral choices in the sense of choices that are the basis for universal moral judgments. In particular, the dominant secular norms do not allow one to recognize that the decision to request physician-assisted suicide or euthanasia necessarily involves the breech of a right-making condition, or for that matter necessarily impedes the pursuit of that which is morally good or virtuous. There is no definitive canonical moral or metaphysical perspective (i.e., the moral-philosophical equivalent of a God’s-eye perspective) from which to establish canonical content for a secular morality, nor ground the obligation to make particular decisions regarding how one should end one’s life. The result is that, within the now-dominant secular morality and Bioethics, end-of-life decisions become merely death-style choices on analogy with matters of taste and/or of aesthetics.

By the deflation of morality I mean to identify the circumstance that the moral point of view can no longer be shown rationally to trump considerations of prudence. Secular morality, and end-of-life decision-making in particular, are deflated because secular morality does not necessarily trump concerns about oneself, one’s family, and one’s close associates. To appreciate the point, consider how one ought in secular terms to understand what would be a rational choice on the part of a person who does not acknowledge God’s existence and who is confronted with the following two options. Either he may painlessly kill a person totally unassociated with him and regarding whom he has no particular interest, for which killing he will be securely and significantly rewarded. Or, he
Suffering, dying, and death: Palliative care ethics ‘after God’

can refuse to kill that person, in which case he, his family, his friends, and his close associates will be painfully tortured for a year and then subjected to a miserable, slow, and very painful death. In what sense would it be irrational for that person, apart from God, apart from a reference to enduring, ultimate meaning, to secure his advantage and that of his family, friends, and close associates to the disadvantage of the stranger with whom he has no relationship? Absent reference to the God Who enforces morality, the prudent choice is the reasonable choice. ‘After God’, moral rationality is radically recast.

Once morality is set fully within the horizon of the finite and the immanent, morality and the bioethics of end-of-life decision-making are sensu stricto ultimately meaningless. If there is no final meaning to morality or to one’s moral decisions beyond the transient life of humans and human history, if one does not recognize the existence of God, then one has embraced the view that the acts of the virtuous and the vicious will in the end be equally forgotten and in the long run of no enduring significance. Regarding this deflation, Immanuel Kant (1724-1804) and later Elizabeth Anscombe (1919-2001) appreciated that, absent a recognition of God’s existence and of immortality, all moral decisions are radically changed in their force. The consequences of acting immorally are radically deflated, not just because there is no longer a recognition of God as the ultimate and reliable enforcer of rewards and punishments, but because God is denied as the guarantor of enduring meaning.

The absence of a transcendent point of reference has important implications. Already in the first edition of The Critique of Pure Reason, Kant acknowledged that an affirmation of God and of immortality is a necessary condition for the possibility of the coherence of morality, and of morality's trumping interests of prudence. “Reason finds itself compelled either to assume such a being, along with life in such a world, which we must regard as a future world; or to regard the moral laws as idle chimeras, because without this presupposition the necessary result that reason connects with these laws would have to vanish” [7, A811=B839]. So, too, Anscombe understood that without God the person who acts immorally would by default be like the person who would be termed a criminal, “if the notion ‘criminal’ were to remain when criminal law and criminal courts had been abolished and forgotten” [8]. In the absence of a point of ultimate reference, the dominant secular culture radically discounts, indeed demoralizes and deflates, large areas of traditional morality.

In summary, if one does not acknowledge a final unconditioned God’s-eye perspective, one is left with regarding all as if it came from nowhere, went nowhere, and for no ultimate purpose. Morality is not just demoralized to a matter of life-style or death-style choices, or deflated in no longer enjoying reliable enforcement, but ‘moral’ choices, including end-of-life choices, are also evacuated of any ultimate or enduring significance. Reality and morality fully prescinded from God render the virtuous and the vicious, the good and the evil in the end equally forever forgotten in a universe considered to be ultimately surd. In this context, the secular Ethics of palliative care becomes at best a collage of quasi-aesthetic norms to guide end-of-life choices, which are
evacuated of any strong moral force. In the context of the dominant secular culture, physician-assisted suicide and voluntary active euthanasia become possible last opportunities to achieve self-determination and to preserve elements of one's own fully immanent ideal of human dignity. Within the horizon of the finite and the immanent, the Ethics of palliative care is immanently directed, not directed to a reality beyond this life, namely, to judgment before God. A secular Ethics of palliative care will as a result in great measure be shaped by an immanent aesthetic of dying well, with dignity, self-affirmation, and comfort. This is all starkly incompatible with the traditional Christian Ethics of end-of-life care with its transcendent focus and anchor, which looks beyond the horizon of the finite and the immanent, so that the emphasis is on repentance, not on dignity.

3. Why secular morality is after foundations

Secular morality and secular bioethics have always been without foundations. However, the project of secular moral-philosophical reflection initiated by the ancient Greeks, especially by Plato and Aristotle, created the false expectation that an anchor for secular morality could be secured in being through sound rational argument, or in rationality itself. Moral Philosophy was taken to promise what philosophical argument cannot secure, but which was nevertheless sought as tradition in Greece of the 5th century before Christ weakened in its social force: a rationally grounded canonical secular ethics. The hope emerged that one could vindicate the rationalist horn of the dilemma offered by Plato in his dialogue, Euthyphro, so that the good, the right, and the virtuous could be shown to be such independently of an appeal to the Divine. Moral Philosophy promised the rational, philosophical equivalent of a secular God’s-eye perspective by appeal to which one could identify through reason and rationally justify a particular morality as canonical. The promise could not be kept.

In the first millennium after the establishment of Christendom, this philosophical project was, if not largely abandoned, at least robustly contained. The Christianity of the first centuries employed philosophical distinctions and concepts, but it did not produce or engage a moral Theology embedded in moral-philosophical arguments. See [9, chapter 4]. However, in Western Europe at the beginning of the second millennium, the project of grounding morality in sound rational argument once again gained salience, particularly after the translation of Aristotle into Latin in Paris in 1210. Around the assumption that one could through moral-philosophical reflection justify a canonical account of proper moral and bioethical choices independently of faith, both Roman Catholicism and Western culture took shape. Siger of Brabant’s (ca. 1240-1280) view that there is a double truth, one philosophical and one theological, became recast into a presumed harmony of faith and reason, of fides et ratio. The result is that it once more seemed plausible that moral-philosophical reflection through sound
argument could secure the equivalent of the normative canons for behavior that Christian faith had brought to Western Europe and its culture.

Nevertheless, the impossibility of this project was already well appreciated by Protagoras (490-420 B.C.). Protagoras recognized that the death of the gods was the death of metaphysics, which state of affairs undermined the moral-philosophical project, which ironically had arisen as a substitute for traditional religious conviction. Absent a recognition of the divine final perspective, a God's-eye perspective, humans in a secular culture become the only criterion of truth, leading to a plurality of perspectives, all of which possess a diminished force because there is no guaranteed enforcement of morality. At the beginning of the 3rd century, Agrippa articulated this state of affairs in terms of five grounds as to why secular moral controversies (as well as other philosophical controversies) cannot be resolved by sound rational argument. His pente tropoi, summarized by Diogenes Laertius in Lives of Eminent Philosophers, Pyrrho 9, 88-89, as well as by Sextus Empiricus in ‘Outlines of Pyrrhonism’ I.15.164-169, show that to resolve a moral dispute by sound rational argument, the disputants must affirm the same basic premises, as well as rules of evidence. Absent such commonality, those in disagreement in attempting to resolve their disagreement by sound rational argument beg the question, argue in a circle, or engage an infinite regress. As a consequence, secular morality is intractably plural and without foundations.

This state of affairs has had once more to be recognized and appreciated. Richard Rorty (1931-2007) like Protagoras understood that in a culture without God, truth becomes a socio-historical construct.

Truth cannot be out there — cannot exist independently of the human mind — because sentences cannot so exist, or be out there. The world is out there, but descriptions of the world are not. Only descriptions of the world can be true or false. The world on its own — unaided by the describing activities of human beings — cannot [1, p. 5].

A canonical secular moral standard or standpoint is not available in the absence of a non-socio-historically-conditioned standpoint, the equivalent of a God's-eye perspective. As Rorty puts the matter, “there is no way to step outside the various vocabularies we have employed and find a metavocabulary which somehow takes account of all possible vocabularies, all possible ways of judging and feeling” [1, p. xvi]. Rorty also understands that the recognition of this state of affairs leads to a wide-ranging and substantive recasting of the significance of secular morality and human life. However, Rorty does not sufficiently appreciate the full implications of what has occurred, though he acknowledges that “[t]he German idealists, the French revolutionaries, and the Romantic poets had in common a dim sense that human beings whose language changed so that they no longer spoke of themselves as responsible to nonhuman powers would thereby become a new kind of human beings [sic]” [1, p. 7]. Rorty does not adequately confront the consequences, seen by Dostoevsky, of living after God, many of which became reality through Hitler’s National Socialism and the international Socialisms of Vladimir Lenin, Josef Stalin, Mao Zedong, Nicolae Ceausescu,
and Pol Pot. In any event, secular morality cannot deliver claims with the force that had in the past been expected.

4. Looking to the future: the conflicts will continue

Traditional Christian understandings remain. Their contrast with the demoralized and deflated morality of the dominant secular culture is profound and provocative. The differences involved constitute the substance of the culture wars [10]. How can it then be the case that the dominant secular morality can hope to discount the differences and disagreements between the dominant secular culture and the commitments of traditional Christians? The answer lies in the momentous turn of the dominant secular culture from morality to politics. For example, although some [11] read the early Rawls in *A Theory of Justice* [12] as making moral claims, the later Rawls eschews morality, moral rationality, and metaphysics and instead appeals to an account of the politically reasonable [13]. In his account of political liberalism, Rawls does not advance a comprehensive doctrine, not even a “comprehensive liberalism” [13, p. xxvii]. Still, sans a comprehensive moral defense of liberalism, Rawls expects that his notion of the politically reasonable can give him grounds for holding wrong-headed those who do not affirm the presence of what he takes to be a reasonable moral pluralism. His account gives grounds for not excluding from the realm of a reasonable secular pluralism peaceable choices in matters regarding sexual relations, reproduction, and end-of-life decision-making. In contrast, traditional Christians condemn as immoral a range of peaceable sexual, reproductive, and end-of-life choices, thus denying Rawls' account of reasonable pluralism. Instead, they recognize the public acceptance of such behaviour as a disaster [12, p. xxiv].

Disputes associated with the Ethics of palliative care, and especially those that separate the traditional Christian bioethics of palliative care from the emerging secular ethics, are deep, substantive, enduring, and threaten to divide societies. While the current dominant secular culture regards death as the end of personal life, traditional Christians know that death is the door to final judgment. These substantively different framing visions of the meaning of life and death are not simply set within irreconcilably different views of the bioethics of end-of-life decision-making and palliative care, but within disparate views of the deep character of morality and reality. The dominant secular morality’s attempted demoralization and deflation of traditional moralities compound the points of conflict. Traditional Christianity will remain as a source of continued, substantive disagreement. Traditionally, Christians have prayed, ‘A subitanea et improvisa morte, libera nos, Domine’ [from a sudden and unanticipated death, deliver us, Lord], hoping to have at least a final opportunity for repentance before death. Secularists instead hope that they may die peacefully without warning in their sleep (but with sufficient prior estate planning). It is this last view that frames the dominant secular culture of the West, of the European Union, and of the Americas. These two views reflect foundationally disparate
moral and metaphysical understandings. Contemporary palliative care is a place of encounter between persons and communities with incompatible and conflicting moral life-worlds. The disputes will not go away [14-16].

References