

Laying the Groundwork

This book is about understanding and responding to the choices to die made by persons to whom one is close. Unlike previous books and articles I have written about elective death, or choosing to die rather than continue living in a hopeless and pointlessly punishing manner, this book's main focus is not the reasoning that must be done by individuals for their own choices to die to be rational, though such assessment does figure prominently in what follows.¹ Rather, this book is about the reasoning that needs to be done by the spouses, partners, relatives, and close friends of those who choose to die and how they must adjust their own thinking, perspectives, and attitudes to cope with those choices.

People closely involved with those opting for elective death need to determine on the soundest bases possible if their spouses', partners', relatives', and friends' choices to die should be accepted and if enactment of those choices, whether by negative means such as forgoing

¹ Prado, C. G., 1990, *The Last Choice: Preemptive Suicide in Advanced Age*, Westport, CT, and New York: Greenwood Group; 1998, *The Last Choice: Preemptive Suicide in Advanced Age*, 2nd edition, Westport, CT, and London: Greenwood and Praeger Presses; 1999, *Assisted Suicide: Theory and Practice in Elective Death*, with S. J. Taylor, Amherst, NY: Humanity Books; 2000a, *Assisted Suicide: Canadian Perspectives*, ed., Ottawa: University of Ottawa Press; 2000b, "Ambiguity and Synergism in 'Assisted Suicide,'" in Prado 2000a, 203–11; 2003, "Foucauldian Ethics and Elective Death," *Journal of Medical Humanities*, special issue, Vol. 24, No. 3–4; 2005, "Suicide and Power," *Symposium*, Vol. 9, No. 1; 2008, *Choosing to Die: Elective Death and Multiculturalism*, Cambridge and New York: Cambridge University Press.

medical treatment or by more proactive methods, should be facilitated or at least not impeded. The other side of the coin is that if their spouses', partners', relatives', or friends' elective-death choices are deemed to be unsoundly reasoned or unacceptably motivated, then there is need to determine whether enactment of the choices should only be discouraged or actively obstructed for the presumed good of those choosing to die.

Determining how one or others should best deal with spouses', partners', relatives', or friends' choices to die has two aspects: one centers on assessment of the elective-death reasoning and motivation of those themselves choosing to die; the other centers on assessment of the reasoning and emotional responses of oneself or others close to the persons choosing to die. To proceed, it is clearly necessary for brevity's sake to shorten references to the people involved on both sides of elective-death decisions, so in what follows I will refer to those individuals themselves choosing to die as "elective-death electors" or more simply as *electors*; I will refer to the spouses, partners, relatives, and friends of electors as "elective-death survivors" or more simply as *survivors*.

Reference to elective-death survivors calls for two qualifications. First, the persons in question will be only potential survivors before electors enacting their choices to die. Also, some may remain potential survivors if electors close to them decide against or postpone enacting their elective-death decisions long enough that they come to be unable to enact them without help, which may take considerable time to obtain because of legal and other obstacles. Nonetheless, potential as well as actual survivors need to deal with electors' decisions, whether those decisions are enacted or not. This is primarily because once they are made, those decisions significantly change the relationships between electors and their spouses, partners, relatives, and close friends.

The second qualification is that it is important that references to elective-death survivors not be taken to include persons involved with electors in a professional role, such as physicians, counselors, and other health-care workers caring for those electors or serving as consultants advising them or assessing their decisions in some expert capacity. The term "survivors," then, will be limited to lay persons having cherished, intimate, or at least very close involvement with electors.

FEELINGS AND EMOTIONS

My last book on elective death, *Choosing to Die: Elective Death and Multiculturalism*, is about the rationality of individuals opting to die in order to curtail the devastating process of drawn-out, tormenting, and often demeaning natural deaths from terminal illness.² The focus in that book is on electors' own decisions to die and the reasoning and motivation involved in the making of their decisions. The moment that we consider those close to individuals choosing to die, their survivors, the focus shifts from electors' own reasoning and motivation to how their reasoning, motivation, and decisions are perceived, evaluated, and responded to by their survivors. This shift of focus raises issues that somewhat surprisingly are often more complex than those posed by assessment of electors' own thinking and choices, obviously because the issues involve both electors and survivors rather than only electors. But aside from this obvious fact, the greater complexity is a result of two major factors affecting how elective-death survivors perceive and reason about the choices to die of those close to them and how they deal with anticipated and actual enactment of the choices.

The first of the two factors involves the affective element and is how survivors' feelings and emotions influence their perception of and reasoning about the elective-death decisions of their spouses, partners, relatives, and friends. Survivors cannot deal with even evidently rational choices to die by electors independently of their own feelings and emotions because of the closeness between survivors and electors and the affective element's role in and importance to their relationships with electors. Our feelings and emotions regarding those for whom we care deeply are too integral a part of who we are and how we see things for those feelings and emotions to be successfully set aside in dealing with so momentous an event as a spouse, partner, family member, or close friend willingly choosing to abandon life. There is, then, a pressing need to understand the role of feelings and emotions in how survivors perceive and reason about the choices of electors to embrace death over continuing to live as they are living or expect to continue living. This is why whereas in my

² Prado 2008.

previous treatments of elective death the primary concern was with rationality and reasoning, here the primary concern must be with the affective aspect and why there also is need to prioritize – to a point – the affective aspect’s role in reasoning.

The feelings and emotions that most notably influence how survivors deal with electors’ decisions are of two sorts. The first sort is feelings and emotions centering on electors: particularly survivors’ affection for electors and apprehension regarding their best interests and well-being. The second sort of feelings and emotions center on survivors themselves: particularly dread at the loss of someone close and fear that they are not doing enough to help electors or to dissuade them from opting for death. Both sorts of feelings and emotions color every aspect of survivors’ consideration of spouses’, partners’, relatives’, or friends’ choices to die, and the danger is that they may obstruct understanding of rational and properly motivated decisions or, conversely, may prompt encouragement of ill-reasoned or ill-motivated ones.

Clarity is of the utmost importance in what follows, so it is necessary to make clear how I construe feelings and emotions. Feelings, and especially what Peter Goldie calls “feeling towards,” are central to my discussion of survivors’ dealing with electors’ choices to die and need to be differentiated from emotions in the manner that they are differentiated in Wesley Boston’s Foreword.³ Feelings are what we consciously experience of the bodily goings-on that are the emotions we have and that are diversely stimulated in us and that in turn prompt what we actually feel. This differentiation of feelings and emotions as outlined in the Foreword is crucial to what follows and represents a great deal of work and research, perhaps most notably that of Antonio Damasio.⁴

My references to feelings and emotions, then, are based on the distinction between emotions as bodily goings-on and feelings as conscious awareness of some of those bodily goings-on. However, also

³ Goldie, Peter, 2000, *The Emotions: A Philosophical Exploration*, Oxford: Oxford University Press, 61.

⁴ Damasio, Antonio, 1999, *The Feeling of What Happens: Body and Emotions in the Making of Consciousness*, New York: Harcourt Brace; see also Wesley Boston, 2003, *Feeling as the Self-Awareness of Emotion*, Queen’s University, Kingston, Ontario. This is Dr. Boston’s MA thesis, which I had the privilege of supervising.

central to my treatment of feelings is something that is only tacit in the Foreword's references to Goldie's notion of "feeling towards." This is what Franz Brentano called "intentionality" or the directedness of consciousness on an object.⁵ Although this is not the place to pursue the matter in any detail, Brentano focused on intentionality as the defining characteristic of thought or consciousness and attempted to articulate how thought or consciousness is what it is because it is always directed on an object, because it is always thought or consciousness of something.⁶ Even when thought or consciousness is self-reflective, it has an object in that it objectifies itself or part of itself.

Brentano's use of the terms "intention" and "intentionality" did not have to do with intention in the sense of meaning or planning to do something. His use of the terms was locative in the sense of how the objects of consciousness are in the mind, but not simply as ideas or images complete in themselves; they are in the mind as representations that reach out to the actual states, things, or events that are what one is conscious of or is thinking about. Brentano's use of "intention," "intentional object," and "intentionality" was an amalgam of the Latin words "in" and "tendere," which when joined together have the sense of "reaching toward." This is just what Goldie tries to capture in using the phrase "feeling towards." Brentano meant to convey how the conscious mind bears on the objects of its thought, whether they are internal states or external things or events.

What is of importance about intentionality or the directedness of consciousness in the present context is that intentional objects may be feelings as well as things or events. The directedness of consciousness may objectify components of consciousness itself, as when we attend carefully to our mood, say, to determine precisely how we feel about something. This is highly significant in the present context because of how much of what follows has to do with focusing and reflecting on feelings both as experienced and as objects of assessment. Crucially, feelings become objects of thought, rather than only being experienced or had, when they are the focus of survivors' consideration

⁵ Audi, Robert, ed., 1995, *The Cambridge Dictionary of Philosophy*, Cambridge: Cambridge University Press; John Searle, 1987, *Intentionality: An Essay in the Philosophy of Mind*, Cambridge: Cambridge University Press.

⁶ I return to intentionality in the Appendix.

of affective influences on their perceptions of and reasoning about electors' choices to die.

Our concern with emotions, as opposed to with feelings, is indirect because emotions are not, as underlying states, intentional objects of consciousness even when they are stimulated in us. Sometimes emotions are experienced in that they cause feeling, but sometimes, perhaps much of the time, they are stimulated but their being so is not evident to those in whom they are stimulated. We often have occasion to say of individuals that they are angry without intending to attribute felt anger to them because while they are angry, at that point they do not realize they are. This can be either because the persons in question are not aware of being angry, though they may be behaving angrily, or because they are experiencing their anger as something else, for instance, merely as frustration or impatience. Most of us have had the experience of snapping at someone, "I'm not angry!" only to realize on doing so that we in fact are angry. Somewhat subtler are cases where for various reasons we dissimulate to ourselves what we actually are feeling. In these cases, friends often enlighten us by observing that, say, our claimed disappointment with something or someone is a considerably higher level of dissatisfaction, or that what we describe as concern for someone's bad luck incorporates a significant amount of satisfaction at their comeuppance.

Again, as affective dispositions, emotions characterize individuals even when they are not stimulated or actualized. Consider that we can and do describe individuals as angry without intending to attribute felt anger or angry feelings to them at the time we describe them as angry. What we usually mean by such an attribution is that the individuals we describe as angry are persons who, though not angry at the moment, are prone to respond angrily to remarks, events, and situations that others treat with equanimity. In this case our attribution has to do with how the individuals in question are more likely to respond angrily to some occurrences than to respond with indifference or patience as others are inclined to do. We apply the description, "angry," to individuals, then, who are not at the moment expressing anger or behaving angrily or, we surmise, feeling anger, in order to convey that they have a disposition to feel anger and to respond angrily to things like imagined slights, transit delays, inconvenient rainstorms, or flat tires, all of which most people find

irritating but normally handle without allowing their irritation to rise to the level of anger.

As will emerge, both of the foregoing cases are highly significant to survivors' emotional responses to electors' choices to die. It is often crucial for survivors to be made to understand that they are having certain emotions of which they are not aware or that they refuse to acknowledge or the experience of which they are misconstruing. It is as important that they understand they have certain emotional dispositions the strength of which they may not realize. In the end, we are not so autonomous or self-transparent as conscious entities that we correctly understand all our affective states and cannot be prompted by others to learn about emotional responses we are having but are not aware of, about which we are confused or self-deceived, or about tendencies we have to respond to situations in fixed ways.

In the remainder of this chapter and in those that follow, much of our attention will center on feelings and the role they play in shaping perception and reasoning. Emotions are important here mainly as what prompt feelings and with respect to whether they are accurately reflected in how the feelings prompted are construed. As indicated, throughout what follows I mainly will be discussing feelings, what survivors experience, rather than their emotions as physiological and neurophysiological dispositional states. Reiteration of this point is called for because of our marked tendency to think of feelings and emotions in the ordinary senses in which the terms are used interchangeably and as often as not "emotion" is used simply to designate strong feelings. However, the ordinary senses of "feelings" and "emotions" simply are inadequate to make the points that need to be made about survivors' perceptions and reasoning regarding electors' choices to die.

Much of the need to focus on feelings, on what is experienced of emotions, arises from the fact that survivors' only realistic and effective way of dealing with their emotional reactions to electors' choices is by managing their feelings. Controlling affective influences on survivors' responses to electors' choices to die cannot be a matter of altering their emotions. Altering emotions and factors that stimulate emotions is an impossible task regarding what are described in the Foreword as basic emotions: happiness, sadness, fear, anger, surprise,

and disgust. Other emotions are alterable to an extent, but such alteration involves sustained effort and lengthy processes of retraining, whether self-imposed or other-imposed. Survivors' controlling affective influences on their perceptions and reasoning regarding electors' choices to die can only be a matter of their governing the effects of their feelings rather than attempting to change what prompt the feelings.

One thing that considerably complicates consideration of feelings is that as indicated, sometimes survivors' actual emotional reactions to electors' choices are not accurately represented by how they construe their feelings, as when anger masquerades as concern. There is need, therefore, for survivors and those counseling them to identify as clearly as they can just what their real emotional reactions are to spouses', partners', relatives', and friends' elective-death decisions. Only then can survivors understand as well as they need to how their perceptions and reasoning, their judgments and actions, are being influenced by their affective states when electors close to them choose to die.

Another complication is that neither survivors themselves nor those counseling them can rely on what is known about survivors' emotional dispositions to gauge how affective states shape their responses to electors' choices. This is because electors' choices to die usually pose situations in which survivors' emotions and the feelings they prompt do not conform to their long-term affective dispositions. The situations forced on survivors by electors' choices are so different and new that survivors usually are initially at a loss as to how to respond. We will see when we look at culture's role in shaping survivors' responses to electors' decisions that, in like manner, expectations regarding cultural influences on survivors' perceptions of and reasoning about electors' choices also are likely to prove unreliable.

With respect to counseling survivors on the management of their feelings, it is notable that despite common usage failing to differentiate between feelings and emotions as outlined in the Foreword and as I am doing in this chapter, the distinction seems implicit in how we normally deal with feelings. We are prepared to challenge people regarding their feelings at particular times when they are assessing significant situations or making important decisions, but at the same

time we are not prepared to challenge them regarding their emotions. This difference amounts to a *de facto* distinction between feelings as short-term, experienced affective states, and emotions as long-term affective dispositions. What is most significant about this common behavior is a key implication in our preparedness to question feelings but not emotions. The implication is that we expect people to have some control of the particular feelings they may have in particular circumstances, but do not expect them to have the same measure of control over their emotions.

We fairly clearly construe emotions or long-term affective dispositions as central to what determines who people are as subjects. David Hume anticipated this recognition of the greater fundamentality of emotions by describing “the passions” or emotions as being “original existence[s] or . . . modification[s] of existence” and too fundamental to personality to be altered or curtailed by the application of reason. Hume went further than we want to go, maintaining that all reason can do with respect to the passions is to serve their ends.⁷ Hume did not distinguish between emotions and feelings; in his time there was not available to him the concepts and data employed by Damasio and others. I am stressing how emotions, as dispositional states, and feelings, as experienced states, differ in order to best consider how feelings are controllable by the application of reason even if emotions largely are not.

Mention of emotions as determinants of who people are as persons and subjects inevitably raises questions about the second crucial factor operant in how individuals are shaped as persons and how they see elective-death decisions and especially those made by electors close to them. This second factor is culture. The results of acculturation play a hugely important role in individuals’ perceptions of and reasoning about elective death to the extent that culture establishes their personal, social, and religious values and beliefs. There is an inescapable interplay between feeling-causing emotions and culture because through behavior modification culture conditions in important ways the long-term affective states that partly make people who

⁷ Hume, David. 1978. *A Treatise of Human Nature*, Oxford: The Clarendon Press, 414–15.

they are. Reciprocally, emotions play a crucial part in sustaining cultural values and practices.

The primary impact of culture on survivors' perception of and reasoning about electors' decisions mainly has to do with their conceptions of death itself and what are believed to be its consequences when natural or other-inflicted, but especially when self-inflicted. The fundamental questions are whether death is believed to be annihilation of the person as opposed to passage of the person as a soul or spirit to one or another sort of afterlife, and whether its being self-inflicted precludes an afterlife or makes it a daunting prospect.

In *Choosing to Die* and elsewhere I describe rational suicide, and what I am here referring to as elective death, as intentional, uncoerced, and soundly reasoned self-killing. I make clear that to be rational, reasoning about and enactment of suicide must be done in full understanding that death may be and most likely is personal annihilation.⁸ One may hope there is an afterlife, but as I have argued, suicide cannot be rational if done with or because of an impossible to substantiate conviction that death is only passage to a different form of existence.⁹ Suicide decided and done on that basis amounts to taking a problematic belief as a matter of fact, and doing so precludes or at least seriously qualifies the rationality of choosing to die. It does so because the unsubstantiated conviction about an afterlife compromises the validity of elective-death reasoning by functioning in that reasoning as factual knowledge when it actually is only an unproven belief.¹⁰

How culture may seriously occlude understanding of elective death as at least likely self-annihilation is most evident when we look beyond our own Western culture to other cultures. For example, the play *Death and the King's Horseman* reflects its author's African culture and provides an apt case in point.¹¹ In Wole Soyinka's play, characters are portrayed as understanding life and death as cyclical and death as passage from one to another form of continuing existence. The story is about a horseman ready to kill himself, not because he wants

⁸ Prado 2008, 49.

⁹ Prado 1998, 2008; readers interested in the afterlife issue are encouraged to read the Appendix.

¹⁰ Prado 2008, 76–87; 1998.

¹¹ Soyinka, Wole, 2002, *Death and the King's Horseman*. New York: W. W. Norton.