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Active euthanasia's violation of the Immanuel Kant's Categorical Imperative

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Abstract

Active euthanasia is one of the ethical issues that the contemporary society is experiencing. The paper aimed at analyzing the arguments that justifies active euthanasia as a morally acceptable practice. In analyzing this contemporary moral issue the Immanuel Kant's categorical imperative was implored as the basis for ethical judgement. Kantian categorical imperative was significant as it defines and clearly discusses the value, dignity and our responsibility towards human life. This was relevant as it helps to restore the value and respect towards human life which has been distorted by the introduction of different perspectives on the origin, purpose and dignity of human life by different moral theories and moral thinkers. The change in perception of human life as not having an intrinsic value but utilitarian value has led to approval of active euthanasia as morally acceptable practice. This has caused dilemma to both the doctors as they are forced to act against their moral values (Hippocratic Oath). The patients or guardians as well to act against the human nature (natural instinct to survive/ self-preservation). It has also given a different perspective towards the right to life and has shown active euthanasia as an act of mercy towards others and oneself. Thus through the categorical imperative as the basis for ethical judgement on active euthanasia, this paper intended to re-establish the dignity and respect that human life ought to be given and treated as an end in itself.

Keywords: Active euthanasia, human dignity, autonomy, compassion, categorical imperative.

Introduction

Kant was not only one of the major thinkers of the Enlightenment era of the late 18th century but he also stands today as one of the greatest philosophers of all times. This is because his ideas still respond to the contemporary ethical issues like Active Euthanasia. He was a German philosopher born on 22 April 1724 in Konigsberg in East Prussia. Kant values reason in his moral theory, thus he considered that morality is only applicable to rational beings and every act must be guided by reason. Reason reflects in three basic principles of morality namely goodwill, duty and categorical imperative (Shaw, 1993). The imperative is a command of which Kant gave two kinds of imperatives, namely hypothetical which is conditional and categorical imperative which he recommended morality to be based on (Paton, 1947). The categorical imperative is in different formulations of which can be

summed up into three. The first formulation states that, *Act only according to that maxim which you can at the same time will that it should become a universal law without contradiction* (Murphy, 1994). The second states that, *act so as to use humanity, whether in your own person or in the person of another, always as an end, never as merely a means*. (Kant, 1964) And the third formulation states that,*so act that the maxim of your action will always at the same time be valid as a principle of making a universal law* (Kant, 2002). This implies that the will of the rational being is a will that legislates universal law.

The term euthanasia originates from two Ancient Greek words, *Eu* and *Thanatos*. *Eu* implies good and *Thanatos* implies death. Thus, etymologically euthanasia means good death or happy death (Thiroux, 1985). The definition of euthanasia has developed over time. In modern period, it implied the physician assisting in death or suicide. In contemporary usage, *Eu* refers to pain or suffering, thus, happy death is the one that releases an individual from pain or death that ends suffering. This is what coins euthanasia as mercy killing. Euthanasia can be categorized as active or passive, voluntary or involuntary. At the center of the distinction between voluntary and involuntary is the patient's consent. While, passive and active is omission or commission. The morality of active euthanasia has been justified based on the argument from individual autonomy, right to die, cost and compassion which will be analyzed by Immanuel Kant's categorical imperative to determine their morality.

In this paper, we will be limited to the argument from individual's autonomy and compassion. The work will begin by the arguments for active euthanasia and followed by Kant's response. It will conclude by showing how euthanasia is an attack on humanity, sanctity of life and Kant's aspect of reciprocity, as discussed below.

1. ARGUMENT FROM INDIVIDUAL'S AUTONOMY

The argument from the autonomy is the basis for moral acceptance of euthanasia and it is a serious challenge to the opponents of euthanasia. It has the widest acceptance in biomedical ethics as it claims that, just as the person has the right to determine as much as possible the course of his or her life, a person has also the right to determine as much as possible the course of his or her death (Battin, 1994). It poses a challenge as the rational and free terminally ill person requests the physician for assistance in terminating his or her life. This request ought to be respected since an individual has a moral claim to self-determination in matters that are presumed to be private. The first thing we need to ask ourselves about the individual autonomy in our analysis of the morality of euthanasia, is that, does an individual's autonomy mean an absolute autonomy? Hence, to be in a better position to analyze the argument in light of Kant's Categorical Imperative, we need to examine the usage of the concept of autonomy in its ordinary usage and healthcare ethics.

1.1 The Meaning of the Concept Autonomy

The word autonomy derives from two Greek words *autos* meaning self and *nomos* meaning rule or governance or law. Thus, etymologically and in its original meaning, it implies the self-rule or self-governance of the Greek city-states (Osuji, 2014). The meaning has been extended to people, in this case, it implies self-governance, liberty rights, privacy, individual choice, freedom of the will, causing one's behaviour, and being one's own choice (Maclean, 2009). This entails that, the person is free to do what pleases him or her. In its common understanding, it implies being able to act

according to one's beliefs or desires without interference from others. The interference means without undue influence from others (Rae and Cox, 1999).This concept of autonomy in medicine, may entail thatit is the patient's right and freedom to make decisions for their lives and the treatment and not the physician.

It is worth to note that, the current understanding of the concept autonomy traces its foundations from the political philosophy of the Enlightenment period. This period was a period of revolutions, for instance, the theological view of the world was strongly challenged and human beings became the measure of all things and not God. The ideas of the reformation thinkers of this period focused on humanism, natural rights and the social contract, of which Thomas Hobbes emphasized that individuals have natural rights, which exist apart from any religious revelation or authority (Kass, 1993). Thus, individuals enter the society by choice. All these ideas were the foundation for individual liberty and liberal democracy. Thus, an autonomous person freely acts by a self-chosen plan while a person with diminished autonomy is controlled by others or incapable of acting according to his plans or desires, like the prisoners and the mentally retarded.

1.2 The Concept of Autonomy in Medicine Today

In medicine, during the paternalism, there was no autonomy for the patients. This is because doctors were considered and considered themselves to have the best knowledge of medicine(Richard Ashcroft et al., 2007).This was due to their success in conquering diseases and the dramatic development in medical technologies that extended life. Thus, all recommendations from the doctors were followed and they were the ones who made decisions on behalf of the patients. In medicine today, the individual's autonomy plays a very big role especially in situations of dilemmas, to the point that, the law protects competent individuals from being subject to medical treatment they do not want (Tran, 2006).The courts like the Dutch court have considered autonomy as the decisive overriding factor or final resource in many medical decisions.This is why in every hospital before the person goes for operation or being treated the relatives have to sign to give their consent to the doctors. This is to protect the doctors as well as the hospital from being sued in case of death. This has imparted fear in doctors to make decisions that do not coincide with what the family thinks is the appropriate treatment for their beloved one. For instance, doctors continue with treatment to terminally patients such as ventilator support that they judge to be futile and feel should be withdrawn, because the family requests it (Tran, 2006).

However, the individual's autonomy has been abused by other people, this is why physicians have been given an exception on the autonomy of some patients particularly those who are unable to choose the treatment like children. The exception is that, they can decide on the treatment and what's best for the child health even if it can be against the parents or guardian will (Habermann and Ghosh, 2008). The parents are the ones to make decisions for their child, but the courts allow the physician to override parental choice and force treatment on minor children when it is clear that the parents' exercise of their autonomy in deciding the course of treatment for their children is not in the children's best interest (Kelly, 1991).For instance, the courts have ordered the children of Jehovah's Witnesses to be transfused and have convicted Christian Science Parents when medical neglect results in a child's death.

However, the courts rules out giving life-saving treatment to children with truly disastrous multiple neurological disorders which would virtually eliminate any

possibility of fulling the purposes of life.Thus, beneficence towards the other takes precedence over autonomy when the exercise of one's liberty brings clear harm to others, particularly those who are entrusted to parental care such as children (Scott and Cox, 1999). Despite all the abuses of individual autonomy which some are due to religious and cultural beliefs, in today's medicine there is greater emphasis on an individual's autonomy.

Having scrutinized the concept of autonomy in both ordinary and in health ethics which has shownthat individual autonomy is the trump card (takes priority) in biomedical dilemmas over the principle of beneficence and that competent patients make decisions on their treatment and not doctors on their behalf. This brings us to the principle of respect of autonomy, which is the source of dilemma to the doctors. The dilemma is in balancing and managing the conflicts of obligation between the principle of beneficence and autonomy (E. Strand, et al, 2007).The dilemma is that, the duty of the doctors is to promote life by all means as the Hippocratic Oath ought them to do (principle of beneficence), however in situations whereby the competent patient request for euthanasia or the family request for termination of life of their relative suffering from unbearable pain (the principle of autonomy). The dilemma in such situation is that should the doctor respect the autonomous decision of the patient or family, of which if he does not respect can be sued or should the doctor respect the Hippocratic Oath which ought him or her to do his best to promote life and not to cause any harm?

1.3 The Principle of Respect for Autonomy

Autonomy is highly valued in biomedical ethics as it considers that each person has rights and freedom, which ought to be respected as he is the self-determiner of his or her life. The principle of respect for autonomy promotes that patients should be enabled to choose the health care interventions they will or will not receive (V. Entwistle, et al., 2010).This implies that, the patients can choose the treatment they want to receive, how they want to be treated and when to stop the treatment. The autonomy is only limited when it is likely to cause harm to others. It is disrespecting the autonomy of the patient to interfere in his/her decision which does not affect or cause harm to other people.

The question we can raise on the autonomy of the patient in deciding whether to continue or to end the treatment is that, how can a patient who is not an expert in medicine or who does not know about medicine make an autonomous decision? Ignorance limits the individual's autonomy, this makes the definition of autonomy by Beauchamp and Childress significant. They define autonomous decision as those which are made intentionally, with substantial understanding and without controlling influences that determine their actions (Smith, 2012). This definition is significant because it brings out the element of patients being informed about the treatment, that is, about the benefits and risks of treatment so that the patient can decide with a substantial degree of understanding and freedom from constraint. For instance, the person suffering from appendicitis needs to be informed about the risk of carrying out the surgery to remove it, as well as, the benefits to enable the patient to make an autonomous decision.

In cases where the patient can give consent, it is an act of respecting the autonomy of the patient as well as treating the patients as rational beings for the health professionals to give clear and understandable information about the treatment (L. Manda, et al., 2019). This makes the decision of the competent patient voluntary. In cases where the patient cannot give consent like minors and incompetent patient, the physicians should

respect the decision of the parents or guardians. This is because in health professional's obligation to respect autonomy outweighs the professional obligations of beneficence (Maclean, 2009). The physician has just to give the proper information to the parents/guardians about the risk and benefits of the treatment. However, this does not mean the physician should not maintain the confidentiality of medical information that patients provide to health professionals based on trust.

The proponents of the argument from autonomy stipulates that,competent patients should be allowed to decide how and when they want to die (M. Guy and T. Stern, 2006). For them, freedom of the patients should not only be limited to the denial of treatment when a patient is not comfortable with it, so that natural death can occur, and to accept the treatment. However, the freedom should be extended to a patient to choose death, the means to achieve it and acquiring assistance from another without the person being prosecuted for murder. Thus, they want to advocate for active euthanasia as moral practice and legal. They support their argument by considering that, the person dies with dignity when the individual determines his or her death instead of being determined by another person (Nordenfelt, 2006).

1.4 Kant's Response to the Argument from Autonomy

Immanuel Kant ethical theory is very relevant in the analysis of the argument from autonomy which is the backbone for the justification of the morality of active euthanasia. It is relevant because Kant emphasizes the role of autonomy on the possibility of morality. Kant argued that, "morality is possible and only applicable to human beings because they are rational and autonomous. He considered that autonomy renders an absolute value to human beings (Schmid and Schonecker, 2018). This implies that for Kant the freedom of the will is the necessary condition under which the human being can be an end in himself. A human being possesses the intrinsic value or inner worth because he is rational and autonomous, thus having the capacity to create his laws and determine his destiny (Clarke, 1999). The inner worth is what is referred to as dignity.

Kant's view of autonomy differs from that of the proponents of euthanasia. The proponents of euthanasia consider autonomy as doing what one pleases, thus one can choose to take his life whenever he or she feels it has lost its meaning or is unbearable to the undergoing situation. However, Kant considered self-determination which autonomy entails, as being guided by reason which makes our autonomous decisions universal. The right to self-determination needs to be guided by reason so that the moral agent can reflect on the moral ground of his choices. The reflection on the moral choices will help the moral agent to know whether his choices are good or bad, right or wrong. Thus, for Kant being autonomous implies being free from any kind of inclination, thus not being a slave to instinct, impulse, or whim, but rather doing as one ought, as a rational being (Dworkin, 1988).

Kant argued that an act is morally right when it is autonomous and guided by the laws of reason which help in deliberation of the rightness or wrongness of the moral decision (Sullivan, 1989). Thus according to Kant, the decision of the competent patient to request for active euthanasia is not an autonomous decision. This is because the decision is not guided by reason alone, rather it is influenced by external factors like unbearable suffering, the fear of being dependent on care givers and the fear to lose one's social dignity. For instance, the president of the nation is socially expected to have a noble death and not deteriorated by a disease, thus some opt for active euthanasia. When we kill a person or

actively assist the person to die because of unbearable pain, we violate the second formulation of the categorical imperative which advocates that we treat human beings as ends in themselves.

In the case of active euthanasia, we treat a human being as a mere means to eradicate pain, save the social status and avoid dependence on others. The same applies to the so-called competent patient who autonomously request, he or she treats his or her life as a mere means to overcome sufferings. In other words, we act out of inclination and not autonomy because the decision is influenced by sufferings and not reason. Since it is not influenced by reason, the act of active euthanasia cannot be universalized because it will lead us into a contradiction of oneself as we naturally desire to live. This will also make it impossible to form the kingdom of ends which is based on rational person decision as a legislator for all members of the kingdom of ends. The decision of the patient cannot be a universal law to all members, as it cannot be accepted by all members of the kingdom of ends due to its basis on inclination.

2. THE ARGUMENT FROM COMPASSION

This is one of the pillars of the arguments of the proponents of euthanasia. This argument has made many doctors to assist their patients to die as wellas the family members to request the physician to withdraw the lifesaving machines or even to actively terminate the life of the innocent patient. Some questions are relevant in analyzing the argument of compassion in its justification of active euthanasia. The two questions we can consider are, does a relief of unbearable suffering make killing morality permissible? Is active euthanasia an act of mercy as it removes life completely without any hope of bringing it back?

The argument from compassion attains and gives the meaning to euthanasia as mercy killing. This is because it involves the end of intolerable suffering of the patient (Tran, 2006). This is why Dan Brock an ethicist argued that, euthanasia should be available as a compassionate means of ending the pain and suffering of those for whom the termination of life support or the refusal of aggressive treatment does not end their lives (Manning, 1998). This argument is very attractive and influential, in the sense that it gives the motive that is actually advocated by morality and even religious beliefs like Christianity. This is why the reference of euthanasia as mercy killing has attracted many people to support and seek justification of euthanasia.

Apart from gaining public support, this is one of the challenging argument for Christians to challenge. This is in the sense that, Christians promote an act of mercy or kindness to the needy of which euthanasia also is an act of mercy to the patients who suffer from unbearable pain as they await death. For instance, John Paul II gave the example of the Good Samaritan as a role model for the unconditional love for the suffering (John Paul II, 1984). If both of them reflects the act of compassion, then how come euthanasia as an act of mercy becomes questionable?

The Christians view the understanding of compassionate of the proponents of euthanasia as distorted. This is in that, for them, compassion alone cannot justify the morality of an act without being accompanied by a moral action that is right in itself (Pellegrino, 1997).This rules out the argument from mercy as the sufficient principle to justify euthanasia. The argument is ruled out because the decision can be influenced by other factors like social norms which makes an argument from mercy inadequate in itself. The other reason is that there are other methods which can be used to relieve the pain of the patient without

causing the death of the patient. This reflects in the report of one of the expertise of pain control Kathleen Foley. He argued that, We frequently see patients referred to our pain clinic who have considered suicide as an option, or who request physician-assisted suicide because of uncontrolled pain. We commonly see such ideation and request dissolve with adequate control of pain and other symptoms, using combinations of pharmacological, neurosurgical, unaesthetic or psychological approaches (Foley, 1999).

It is worth to note that, there is a difference between pain and suffering, namely, not all pain leads to suffering nor does suffering require the presence of physical pain. Thus most of the patient undergo substantial psychological suffering which is not or partially the result of physical pain. However, suffering varies from person to person as it involves conscious pain, mental anguish and serious self-burdensomeness.

2.1 The Challenge of the Argument from Compassion

The challenge of acting out of compassion is that, should the right to active euthanasia be limited to those suffering from intolerable pain? The proponents of active euthanasia considered that euthanasia is an act of mercy to the terminally ill patient. However, in order, to earn public acceptance and active euthanasia to be convincing, they gave conditions that limited it only to competent adult patients who are terminally (those who can give consent) (Kaufman, 1989). This raises the questions, how do we define the level of suffering between the competent and incompetent terminally ill patients? Does this imply that the suffering of the incompetent is lesser than that of the competent? If active euthanasia is an act of mercy, why should it be conditioned?

This is why Kant considers such acts from compassion as an act done out of inclination and not guided by reason (Boss, 1999). This is why the proponents of active euthanasia have led themselves into a contradiction, which the opponents of active euthanasia refers it to as slippery slope. This is because in advocating for active euthanasia they give the conditions but in the long run they break the conditions. For instance, euthanasia in Belgium was limited to people aged 18 years and above who are competent and frequently requested for active euthanasia, however, that is not being followed as now even the children of 12 years can be euthanased. This just shows that we cannot form the kingdom of end if we terminate the life of patients based on compassion.

In critically analyzing the moral worth of killing people in the name of compassion or redeeming them from unbearable pain, we will realize that active euthanasia is not the way we can show mercy to someone (Gaie, 2004). Mercy is an expression of care, but how can we express care by killing the person? This is why we will realize that the real motivation behind active euthanasia is not really for the benefit of the patient but is the way to reduce health care costs. This is in that, why should you sustain the patient whom there is no hope for recovery and spend the whole family wealth on such a person, thus euthanasia becomes a better option as we terminate the life of the person as a way of showing mercy. This is exactly what Kant considers as using man as a mere means, which is not supposed to be. Thus, killing the life of the terminally ill patient in name of compassion is not treating man as an end in himself, thus it is immoral.

3. EUTHANASIA AS AN ATTACK ON HUMAN NATURE

The value of human dignity reflects in the second categorical imperative, whereby Kant recommended that it should be treated as an end and not as a mere means (Paton, 1947). This implies that human nature has an absolute value than just a mere instrument that can be used to attain certain purposes. Euthanasia is a crime against life

and an attack on human nature. This is because it respects life and human nature based on its quality. For instance, if a human being is terminally ill and cannot contribute to the society, it considers that such a person is better off dead than being alive as he or she wastes society resources and depend on others for his living. This is why the proponents of euthanasia holds the view that, it is better for one to end his or her life if it has been stricken so much by a disease (Walter and Anthony, 1990).

Propagating that it is better off dead than being deteriorated by disease, makes patients not to fight for life and make them feel less relevant to live as they depend on others. It makes them feel that life has an instrumental value and no intrinsic value, thus you can remove it at any time when and how one feels life is unworthy living. Euthanasia does not recognize the value that life has despite being terminally ill. This is why it advocates the patients to request for assistance in death so as they can die with dignity and as an act of expressing one's autonomy to die. This is contrary to the categorical imperative as it puts more emphasis on the value of human life without any qualification like the age of the person or the state of sickness as well as the person's contribution to the society. Thus, Euthanasia is morally wrong and nobody should end or be helped to end his or her life for reasons of mercy, illness and human rights.

The proponents of euthanasia advocate that the doctors are in the best position to carry out euthanasia because of their knowledge of medicine. However, physicians make oaths to preserve human life at all cost. These oaths are referred to as oath of Hippocrates and at times known as the declaration of Geneva (Philips and J. Dawson, 1985). This entails that the primary duty of physicians is to treat and preserve human life always and not to cause harm or to kill in the name of respecting patient's autonomy or out of compassion. According to the deontological moral view, one has to do his duty at all times regardless of some circumstances (Hitchcock, et, al., 2003). Thus a physician must always bear in mind the importance of preserving human life from the time of conception until death. Hence by allowing euthanasia and physicians to be involved in it, is morally wrong because a physician will not be fulfilling his or her primary duty of treating and preserving human life. Such a physician will be doing nothing else than contradicting himself or herself in life.

Making doctors agents of euthanasia is something which Kant considers cannot be universalized because no rational being could wish to live in a world where doctors are agents of death and not healing. In my view, it will be difficult for both doctors and patients. For doctors will always realize they are not trusted even if they can do the best they can for the recovery of the patient. On the other hand, the patients will never feel comfortable with the doctors even if prescribed the right dosage of medication, they will always doubt that, because they know doctors can kill. Thus, involving doctors in actively terminating life of the patients is using them as mere means to achieve the individual goal of which the doctors themselves never benefit anything from that, as they sincerely sacrifice and give the best for the wellbeing of their patient. Thus, active euthanasia uses human life as a mere means to end the person's sufferings and save the cost that health care involves which Kant regarded them inappropriate motive to act upon.

4. EUTHANASIA'S VIOLATION OF THE SANCTITY OF LIFE

The dignity and sanctity of the human person is because human beings are themselves the source of morality and potential creators of moral laws. Such is the basis of their special worth and dignity. This

argument is based on Kant's notion that a rational being is capable of morality and has hence absolute value (Light and Smith, 1997). Kant also contended that each person has a moral duty to preserve his or her own life (Kant, 1886). Hence, in the context of the categorical imperative, euthanasia would be against human dignity and sanctity of life. This is in the sense that human beings have absolute value and their lives should not be taken away for any reason. Since it takes away human life, euthanasia is further seen as a violation of natural moral law which commands all life to be preserved.

In view of the categorical imperative, it would be against the human dignity and sanctity of life for one to be killed or request to be helped in ending his or her life to get relieved from pain. Because such would be a case of human life being used as a mere means to some end. Kant objects that no life should be used as a mere means to some end because life is sacred. For Kant, one has to always treat humanity whether in his or her person or that of others as an end not as means to some ends (Liddell, 1970).

In the case of duty owed towards ourselves. He who proposes to commit suicide has to ask himself if his action be consistent with the idea of humanity as an end in itself. The man who destroys his organic system to escape from sorrow and distress makes use of his person as a mean toward supporting himself in a state of comfort and ease until the end of life. Humanity is not a thing, i.e., is not that which can be dealt with as a mean singly, but is that which must at all times be regarded as an end in itself. I am, therefore, not at liberty to dispose of humanity which constitutes my person, either by killing, maiming or mutilating (Kant, 1886).

Furthermore, the term human is of Latin origin "*humanus"*, which means earthly and proper to the kind that we belong to the species of rational animals.While the term dignity is of Latin origin, "*dignus"*, meaning goodness ornament, distinction, honour, glory, but generally speaking dignity means standing of ones entitled to respect (Obengo, 2016). Therefore, euthanasia is against human dignity and sanctity of life because human life is said to be the basis of human good and is regarded as a precious gift from Gods love. It is worth to note that, there is a slight difference in the understanding of human value or dignity, and sanctity of life between the rational Western philosophers, and the Judeo Christian. The rational Western Philosophers like Kant emphasizes that the absolute value of the human person is as a result of being rational animals. This is so because reason or rationality is conceived as the highest part of the human soul. While the Judeo Christian holds that, man should be understood primarily from the standpoint of his divine origin (Titus and Smith, 1974). His uniqueness is not chiefly in reason or relation to nature. Man is a being created by God and is made in the image of God. Thus, he can never be used as a means to an end and that euthanasia would be strictly against the sanctity of life and human dignity.

5. THE ASPECT OF RECIPROCITY

Reciprocity is a word which stems from a Latin word, *reciprocus* which means alternative or returning the same way, moving backwards and forwards or mutually exchanged. Kant's aspect of reciprocity reflects in the formulations of the categorical imperative. The first categorical imperative advocates that we should act in the way that our actions become the universal law (Kant, 1938). This implies that the maxim that I want as an individual should also apply to every rational being. For instance, in the case of involuntary active euthanasia whereby the doctors and relatives judge the life of the patient as a worthy living and better off dead and thus propagate that the patient's life should be terminated even if the patient does not want to die. Reciprocity in such a situation implies that the same

treatment should also be employed to doctors and relatives who advocated death of the patient when they are also terminally ill but do not want to die. This is why Kant considers that such a world whereby, we just kill each other because we consider the life of the other worthless cannot be accepted by rational beings. This is because no one can will to be killed when he wishes to live, which is very valid.

The second formulation also brings about the element of equality among human beings. This is whereby Kant argues that when we use other people merely as a means for our gain, we fail to recognize that the other has a dignity equal to our own (Sullivan, 1994). Since we are all equal, we need to respect others as they also respect us. Terminating the life of the patient because the disease has made him or her to become dependent on us, is not to respect the dignity that every person has as a supreme subjective end in himself. Furthermore, it is also treating them as if we are not equal, that is, having the same rational nature. This is what prompts many competent terminal ill patient to opt for euthanasia as they feel, they are not equal to the rest of the people who are not terminally ill. Thus, active euthanasia, though it appears to be morally justifiable, it does not respect the life of the patient as well as making us treat others as mere means and not as equal to us.

Conclusion

Immanuel Kant regards a human being as a rational and autonomous being. Autonomy which is not absolute and which he recommended that must always be guided by reason is what makes man to have an intrinsic value. Thus, man ought to be treated and to treat other human beings as end in themselves and not as means to achieve one's goal. The aspect of man being rational makes man to formulate maxims that are universal and leads to the formulation of the kingdom of end of which the law applies equally to all members without any exceptional and contradiction. thus, active euthanasia is immoral as it treat others or oneself as a mere means and cannot be universalized without contradicting one's maxim, which cannot lead to the formulation of the kingdom of end, as discussed above.

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