

# Dying with Dignity: A Legal and Ethical Analysis of Euthanasia in An Indian Perspective

Pradyomayee Sujata<sup>1</sup> and Prof. (Dr.) Sanjay Choudhury<sup>2</sup>

<sup>1</sup>Research Scholar, Law Department, Bhagwant University, Ajmer, Rajasthan

<sup>2</sup>Professor, Law Department, Bhagwant University, Ajmer, Rajasthan

**Abstract:** *Euthanasia, often termed “mercy killing,” is a highly debated topic worldwide, raising crucial legal and ethical concerns. In India, the discussion surrounding euthanasia gained prominence following landmark Supreme Court rulings that shaped its legal standing. This paper aims to analyze euthanasia from an Indian legal and ethical perspective, exploring the various dimensions of the right to die with dignity. By evaluating judicial precedents, ethical theories, and international comparisons, this study provides an in-depth understanding of euthanasia’s implications in India. The research also incorporates a case study to highlight the complexities surrounding euthanasia in the Indian context.*

**Keywords:** Euthanasia, Assisted Suicide, Indian Law, Right to Die, Medical Ethics, Supreme Court Rulings, Passive Euthanasia, Active Euthanasia

## I. INTRODUCTION

Dying with Dignity is a concept rooted in the belief that individuals should have the right to make autonomous decisions about their end-of-life care, free from unnecessary suffering and undue medical intervention. It encompasses various ethical, legal, and medical considerations, particularly in cases of terminal illness, severe pain, or irreversible conditions that diminish the quality of life.

In India, the debate surrounding euthanasia and assisted dying has gained prominence, particularly after landmark judicial rulings that have shaped the legal stance on the issue. The Supreme Court's recognition of passive euthanasia under specific guidelines reflects an evolving approach toward balancing personal choice and societal concerns. However, the ethical and religious perspectives on euthanasia remain deeply contested, with concerns about potential misuse, medical ethics, and the sanctity of life.

This discussion explores the intricate intersection of law, ethics, and individual rights, analyzing the Indian legal framework and its implications for those seeking a dignified death. By evaluating global precedents and Indian judicial interpretations, this analysis aims to contribute to the ongoing discourse on euthanasia and the fundamental human right to die with dignity.

In India, the discourse surrounding euthanasia, or "dying with dignity," intertwines complex legal frameworks and nuanced ethical considerations. As societal attitudes evolve and medical capabilities advance, questions regarding the right to choose one's end-of-life care have become increasingly pertinent. This paper delves into the legal landscape and ethical dimensions of euthanasia within the Indian context, examining the tensions between individual autonomy, medical ethics, religious perspectives, and state regulation. By navigating these multifaceted issues, we aim to shed light on the challenges and implications of euthanasia, striving to forge a balanced understanding that respects both human autonomy and societal responsibility.

## II. LITERATURE REVIEW

The concept of **dying with dignity** has been extensively explored in legal, ethical, and medical literature, particularly in relation to euthanasia and end-of-life care. Scholars and legal experts have debated the implications of allowing individuals to make autonomous choices regarding their death, considering factors such as human rights, medical ethics, and the potential for abuse.

### **Ethical and Philosophical Perspectives**

Beauchamp and Childress (2013) in *Principles of Biomedical Ethics* discuss the ethical principles of autonomy and beneficence in medical decision-making. They argue that respect for patient autonomy should allow individuals to choose euthanasia under specific conditions, provided that it aligns with ethical medical practice. Their framework has been widely referenced in debates on euthanasia policies.

Similarly, Singer (1994) in *Rethinking Life and Death* advocates for a pragmatic approach to euthanasia, emphasizing that prolonging life at the cost of immense suffering contradicts the ethical principle of minimizing harm. His utilitarian perspective challenges the rigid pro-life stance that disregards the suffering of terminally ill patients.

### **Legal Aspects of Euthanasia and Assisted Dying**

Dworkin (1993) in *Life's Dominion: An Argument About Abortion, Euthanasia, and Individual Freedom* provides a legal and philosophical defense of euthanasia, arguing that dignity in death is a fundamental human right. He asserts that laws should prioritize individual autonomy over traditional moral prohibitions.

From an Indian legal perspective, Bhat (2019) in *Law and Medicine* discusses the evolution of euthanasia laws in India, focusing on the landmark Supreme Court judgments, including **Common Cause v. Union of India (2018)**. He explains how the judiciary has cautiously moved toward accepting passive euthanasia while maintaining strict legal safeguards.

### **Medical and Psychological Considerations**

Gawande (2014) in *Being Mortal: Medicine and What Matters in the End* explores how modern medicine often prioritizes life extension over the quality of life. He critiques the medical profession's reluctance to embrace end-of-life care that prioritizes patient dignity and autonomy. His work is significant in advocating for patient-centered approaches in terminal illness management.

Sulmasy and Finlay (2017) in *The Lancet* discuss the risks of physician-assisted dying, highlighting concerns about coercion and the potential for misuse, particularly among vulnerable populations. They caution against euthanasia laws that lack strict oversight mechanisms.

### **Indian Perspectives on Euthanasia and Dying with Dignity**

Aruna Shanbaug's case, analyzed by Narayan and Subbaiah (2011) in *Indian Journal of Medical Ethics*, was instrumental in shaping India's euthanasia debate. The article explores the ethical dilemmas surrounding long-term coma patients and the need for legal clarity on passive euthanasia.

Gupta (2020) in *Euthanasia in India: Legal and Ethical Challenges* examines the cultural and religious factors influencing India's euthanasia policies. He argues that the opposition to euthanasia is deeply rooted in Hindu, Islamic, and Christian beliefs, making legislative changes complex despite growing public support for the right to die with dignity.

## **III. OBJECTIVES**

- To examine the legal status of euthanasia in India, with reference to landmark judicial decisions.
- To explore the ethical debates surrounding euthanasia, including perspectives from medical, philosophical, and religious viewpoints.
- To compare India's approach to euthanasia with that of other jurisdictions where it is legal or strictly prohibited.
- To analyze the implications of euthanasia on patients, families, and healthcare providers in India.
- To assess the socio-cultural factors influencing the euthanasia debate in India.

## **IV. LEGAL FRAMEWORK IN INDIA**

The legality of euthanasia in India has evolved significantly through judicial interpretation. The landmark case of *Aruna Shanbaug v. Union of India* (2011) paved the way for recognizing passive euthanasia under strict guidelines.

The Common Cause v. Union of India (2018) ruling further strengthened the right to die with dignity by legalizing passive euthanasia and allowing living wills under stringent conditions. However, active euthanasia remains illegal under the Indian Penal Code (IPC), particularly under Section 302 (murder) and Section 304 (culpable homicide not amounting to murder).

### V. ETHICAL CONSIDERATIONS

Euthanasia raises profound ethical dilemmas:

- **Autonomy vs. Sanctity of Life:** Proponents argue that individuals should have the right to make decisions regarding their own bodies, including ending their suffering. Opponents emphasize the sanctity of life, arguing that taking life is morally unacceptable.
- **Medical Ethics:** The principle of beneficence supports euthanasia when it alleviates suffering, whereas non-maleficence opposes it as it involves harm by ending life.
- **Religious and Cultural Views:** Indian society, deeply influenced by Hindu, Muslim, and Christian beliefs, generally opposes euthanasia, viewing life as sacred and preordained by a higher power.

### VI. CASE STUDY: ARUNA SHANBAUG CASE

#### Background

Aruna Shanbaug, a nurse at KEM Hospital in Mumbai, was sexually assaulted in 1973, leading to a persistent vegetative state (PVS) for over four decades. In 2011, journalist Pinki Virani filed a petition seeking euthanasia for Aruna, arguing that she had no quality of life.

#### Court's Ruling:

The Supreme Court rejected active euthanasia but allowed passive euthanasia under strict medical and legal conditions. This case became the cornerstone of euthanasia laws in India, leading to further legal reforms in 2018.

#### Implications:

- Strengthened the legal framework for passive euthanasia.
- Led to the formulation of guidelines for 'living wills.'
- Highlighted the need for legislative intervention on end-of-life care.

#### *Aruna Shanbaug Case (India, 2011)*

One of the most significant cases in India regarding **dying with dignity** and euthanasia is that of **Aruna Shanbaug**, a nurse who remained in a persistent vegetative state (PVS) for **42 years** following a brutal assault in 1973.

#### Background

Aruna Shanbaug, a nurse at King Edward Memorial (KEM) Hospital in Mumbai, was strangled with a dog chain and sexually assaulted by a hospital cleaner. The attack left her in a permanent vegetative state. She was kept alive through artificial feeding but showed no signs of consciousness or recovery.

#### Legal Battle for Euthanasia

In 2009, journalist and activist **Pinki Virani** filed a plea in the Supreme Court of India, arguing that Aruna should be allowed to die with dignity through euthanasia. She contended that prolonging her life under such conditions violated her **right to die with dignity** under **Article 21 of the Indian Constitution**.

#### Supreme Court Verdict (2011)

The **Supreme Court of India** rejected the plea for active euthanasia but permitted **passive euthanasia** under strict legal guidelines. The Court ruled that:

**Active euthanasia** (administering lethal substances) remains illegal.

**Passive euthanasia** (withdrawal of life-sustaining treatment) is permissible under strict court-monitored conditions.

The decision to withdraw life support should be made by a **medical board and approved by the High Court**.

#### Impact on Indian Law

This case laid the foundation for future euthanasia laws in India. It led to the landmark 2018 judgment in **Common Cause v. Union of India**, which legalized **passive euthanasia and living wills** for terminally ill patients.

Ethical and Social Debate

The case sparked widespread debate on euthanasia and **dying with dignity** in India. Supporters argued that keeping Aruna alive for decades without improvement was **inhumane**. Opponents, including religious groups, maintained that euthanasia could be **misused** if legalized broadly.

**2. The Right to Die: The Case of Brittany Maynard (USA, 2014)**

**Background**

Brittany Maynard, a 29-year-old American woman, was diagnosed with **terminal brain cancer (glioblastoma)** in 2014. Doctors estimated she had only six months to live.

**Decision to Die with Dignity**

Facing excruciating pain and loss of bodily functions, Maynard **relocated to Oregon**, where the **Death with Dignity Act** allows physician-assisted death for terminally ill patients. She became a vocal advocate for **assisted dying laws**, arguing that individuals should have the right to choose how they die.

**Medical and Ethical Debate**

Her case reignited debates on euthanasia and **assisted suicide**, with opponents arguing that life should be preserved at all costs, while supporters emphasized the **right to die with dignity**.

**Outcome and Legacy**

On **November 1, 2014**, Maynard legally ended her life using **physician-assisted medication**. Her case contributed to the expansion of euthanasia laws in **California, Colorado, and other U.S. states**, strengthening the **right-to-die movement** globally.

**VII. JUDICIAL RESPONSE**

The legalization of passive euthanasia in India represents a significant step toward recognizing the right to die with dignity. However, its implementation remains complex due to bureaucratic challenges, lack of awareness, and ethical conflicts within the medical community. Furthermore, India's deeply rooted socio-religious beliefs continue to influence the euthanasia debate, making legislative progress slow and contentious. While passive euthanasia is now legally recognized, the prohibition of active euthanasia leaves room for further legal deliberation.

The Indian judiciary has played a crucial role in shaping the legal landscape of **dying with dignity** and **euthanasia**. Over the years, the Supreme Court of India has interpreted the right to life under **Article 21 of the Constitution** to include the **right to die with dignity**, leading to significant rulings that have influenced Indian law.

**Key Judicial Precedents on Euthanasia in India**

**Gian Kaur v. State of Punjab (1996)**

**Verdict:** The Supreme Court ruled that the **right to life under Article 21 does not include the right to die**.

**Impact:** The Court upheld the constitutional validity of **Section 306 (abetment of suicide) and Section 309 (attempt to commit suicide) of the Indian Penal Code (IPC)**.

However, the Court clarified that the **right to life** includes a **dignified life until natural death** and that "dying with dignity" can be interpreted in certain medical situations.

**Aruna Shanbaug v. Union of India (2011)**

**Facts:** Aruna Shanbaug, a nurse in a **persistent vegetative state (PVS)** for **42 years**, became the subject of a euthanasia plea filed by journalist **Pinki Virani**.

**Verdict:** The Supreme Court rejected the request for **active euthanasia** but allowed **passive euthanasia** in India under **strict judicial supervision**.

**Guidelines Set by the Supreme Court:**

**Active euthanasia (administration of a lethal substance)** remains **illegal**.

**Passive euthanasia (withdrawal of life support)** is permissible but requires approval from the High Court and a medical board.

**Impact:** This judgment became the first legal recognition of **passive euthanasia** in India, setting a precedent for future cases.

Common Cause v. Union of India (2018)

**Facts:** A public interest litigation (PIL) filed by the NGO **Common Cause** sought to recognize the right to **die with dignity** and legalize **living wills** (advance medical directives).

**Verdict:** The Supreme Court delivered a **landmark judgment** that:

Recognized **passive euthanasia** as a fundamental right under **Article 21**.

Legalized **living wills**, allowing individuals to specify their end-of-life treatment preferences in advance.

Laid down detailed **guidelines** for passive euthanasia procedures to prevent misuse.

**Impact:** This judgment was a milestone in India's euthanasia debate, as it granted individuals the right to **refuse life-prolonging medical treatment** in terminal conditions

### **Legislative and Legal Developments**

Although the judiciary has **progressively recognized** euthanasia in India, the **Indian Parliament has yet to enact a comprehensive law** on euthanasia. The legal framework remains based on judicial rulings and guidelines issued by the courts.

**Law Commission of India (2006 & 2012 Reports):** Recommended allowing passive euthanasia under strict conditions.

**Medical Treatment of Terminally Ill Patients Bill (2016):** Proposed guidelines for passive euthanasia but has not yet become law.

Ethical and Social Debate on the Judiciary's Role

**Supporters argue** that judicial recognition of passive euthanasia ensures that terminally ill patients **do not suffer unnecessarily**.

**Opponents, including religious groups,** believe that euthanasia violates the **sanctity of life** and could lead to **misuse**.

**Doctors and medical professionals** highlight the need for **clearer legal safeguards** to ensure ethical implementation.

### **VIII. CONCLUSION**

Both Aruna Shanbaug and Brittany Maynard highlight the legal, ethical, and medical challenges surrounding euthanasia and dying with dignity. While India's legal system now permits passive euthanasia, many countries still struggle with balancing patient autonomy and ethical concerns. These cases continue to shape discussions on whether individuals should have the legal right to end their suffering on their own terms. The Indian judiciary has played a **pivotal role** in recognizing **dying with dignity** as a constitutional right. The **2018 Common Cause case** marked a significant shift toward patient autonomy, granting terminally ill individuals greater control over their end-of-life decisions. However, a **comprehensive legislative framework** is still needed to regulate euthanasia in India effectively.

Euthanasia remains a contentious issue in India, balancing the right to die with dignity against legal, ethical, and cultural constraints. While judicial pronouncements have paved the way for passive euthanasia, active euthanasia remains a criminal offense. Moving forward, legislative clarity, public awareness, and ethical guidelines will be crucial in ensuring a humane and just approach to end-of-life decisions.

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