



Attitudes to Euthanasia in the Vinaya and Commentary

By Damien Keown

Goldsmiths College
University of London
d.keown@gold.ac.uk

Journal of Buddhist Ethics 6 (1999):260-270
Copyright Notice

Digital copies of this work may be made and distributed provided no charge is made and no alteration is made to the content. Reproduction in any other format with the exception of a single copy for private study requires the written permission of the author. All enquiries to jbe-general@jbe.la.psu.edu.

Abstract

The prohibition on taking human life is one of the cornerstones of Buddhist ethics, but there is often confusion about the interpretation of this prohibition in different contexts. In his commentary on the third pārajika in the Samantapāsādikā, Buddhaghosa sets out to clarify the legal provisions of the monastic precept against taking life. The root text and his comments on it are relevant to the contemporary debate on euthanasia, and this paper considers what light Buddhist jurisprudence can shed on this moral dilemma.

The third *pārajika* is one of the four most serious monastic offences that can be committed by a monk, and breaking any one of them is punished by lifelong expulsion from the monastic community. The four *pārajika* offences are:

- (1) Sexual intercourse
- (2) Stealing
- (3) Taking life
- (4) Falsely laying claim to superhuman powers.

These four precepts are essentially a reformulation of what might be called the four “core moral precepts” of Buddhism. Usually they are found

in the order 3–2–1–4 as in the *Pañcasīla* or Five Precepts for laymen, as well as in other moral codes like the Eight and Ten Precepts. In these formulations the precept against taking life always comes first, so the order in the monastic code is anomalous. What the monastic precept prohibits specifically is killing something having human form (*manussaviggaha*).

The prohibition on taking human life is one of the cornerstones of Buddhist ethics, but there is often confusion about the interpretation of this precept in different contexts. In his *Samantapāsādikā* commentary, Buddhaghosa sets out to clarify the legal provisions of the precept. He discusses a variety of cases, real and hypothetical, where death ensues, and endeavors to clarify the legal requirements for a breach of the precept to have taken place.

His casuistry is an illuminating guide not just to monastic law but to the wider moral issues surrounding the taking of life, and his examples have relevance for a range of contemporary issues relating to the law and ethics of medicine, such as suicide, physician–assisted suicide, euthanasia, and abortion. In fact of the sixty or so cases reported under this rubric in the *Vinaya* about one–third are concerned with deaths that occurred due to medical intervention of one kind or another. The practice of medicine occupies an important place in the discussion, no doubt because death often occurred in the context of medical treatment administered by monks.

In commenting on these cases, Buddhaghosa also devotes some time to discussing routine issues which arise in medical practice — such as which classes of people should be taken on as patients and which not — and some of what he says would not be out of place in a professional code of ethics such as that of the AMA or the BMA. He also digresses to discuss issues such as the therapeutic use of magical charms, a practice that may bear more than a passing resemblance to the practice of physicians today, particularly where the use of placebos is concerned.

Representatives of the Buddhist tradition are rarely found at the cutting edge of modern ethical debate, and it is often assumed that early Buddhist literature has little to say about the kinds of moral dilemmas that are debated in the modern world. This is to overlook the fact that there are certain issues in the practice of medicine that are perennial, and these issues were faced by Buddhist monks who practiced as physicians from the earliest times. The way the problems are formulated in the *Vinaya* and commentary often differs from the way they are presented today, and modern considerations often give the issues a different nuance. Nevertheless, the early sources can at least provide a useful starting point and direction for reflection.

The central legal concepts involved in Buddhaghosa’s discussion are

those of method, intention, and agency. The *methods* of causing death mentioned in the *Vinaya* are many and varied, including the use of weapons, devices ranging from pits and traps to more subtle psychological strategies like frightening someone to death by dressing up as a ghost, and, of course, death resulting from unsuccessful medical treatments. In terms of *intention*, the examples show that guilt is firmly tied to the *mens rea* or state of mind of the accused at the time the offence was committed. Guilt or innocence depends upon the outcome tallying with the intention with which one undertook the project in question. The concept of *agency* is important where other parties are involved as intermediaries, as when one monk instructs another to carry out a lethal plan. These notions serve as the pegs on which Buddhaghosa hangs his discussion, the overall purpose of which is to establish in what circumstances a monk is guilty of an offence and the grade of punishment appropriate.

The *Vinaya* consists of a complex blend of moral and legal issues, and I should make clear that my primary interest is in the moral principles rather than the legal ones. Unfortunately, ethical discourse did not reach the same degree of sophistication or precision in the early texts as legal terminology. We therefore have no option but to rely on the discussions of the *vinayadharas*. My hope is that it is possible from their discussions to isolate principles which can then be applied outside of the specific context and jurisdiction of the *Vinaya*. Care must be taken here, however, since just because something is prohibited by the *Vinaya* does not mean it is immoral. The sources themselves make a distinction between *paññatti-vajja* — or what is prohibited by the *Vinaya* (for example, eating after midday) — and what is *lokavajja*, or regarded as immoral by the world at large outside the cloister (for example, killing, stealing, and lying). Furthermore, many rules in the *Vinaya* were inserted simply to satisfy the expectations of the laity so that Buddhist monks would not seem less scrupulous than their religious competitors.

Despite the fact that the *Vinaya* is also concerned with the sub-moral duties of ecclesiastical office, however, certain sections of it, such as the third *pārājika*, do address issues which are primarily of a moral nature, and the prohibition on taking life comes into this category. As already mentioned, it is found in every formulation of Buddhist precepts, whether intended for laity or monks.

The commentary to the third *pārājika* begins with the unlikely topic of meditation, and in particular a specific form of meditation known as “contemplation of the impure.” This is a method used to counteract attachment. In practicing it one might reflect upon the body as impermanent, a thing subject to decay and corruption, and not a proper object of attach-

ment. Having instructed the monks on this theme, the Buddha retired into seclusion for a fortnight. Unfortunately, the monks became overzealous in their practice and developed disgust and loathing for their bodies. So intense did this become that many felt death would be preferable to such a repulsive existence. Accordingly, they proceeded to kill themselves, and lent assistance to one another in doing so. They found a willing assistant in the form of Migalaṇḍika, a “sham recluse” (*samaṇa-kuttaka*), who agreed to assist by killing the monks in return for their robes and bowls. Migalaṇḍika dispatched his victims with a large knife, but halfway through the bloody process suffered a bout of remorse. At this point a devil appeared and whispered reassuringly in his ear that by “bringing across those who had not yet crossed” he was in fact doing right. In other words, by killing the monks he was saving them from the sufferings of *samsāra*. Reassured by this Migalaṇḍika resumed his work and killed a large number of monks, up to sixty on a single day.

When the Buddha came out of his fortnight’s seclusion he noticed the drop in numbers among the monks and inquired as to the cause. When he learned what had taken place he proclaimed the third of the four most serious monastic offences (*pārājika*). This is the prohibition on taking human life, and was announced as follows:

Whatever monk should intentionally deprive a human being of life, or should look about to be his knife-bringer, he is also one who is defeated and is no more in communion.¹

In connection with euthanasia it will be seen from the context that this precept prohibits killing even when the person being killed requests assistance in dying. The phrase “should look about to be his knife-bringer” (*sattahāraṇḍikaṃ vāssa pariyeseyya*) is a clear reference to the part played in this episode by Migalaṇḍika. Migalaṇḍika, it will be noted, was doing little more than acting as the instrument of execution: it was the monks themselves who wished to die, and indeed offered Migalaṇḍika their robes and bowls as an inducement for his help. Nevertheless, the role of “knife-bringer” or “knife-bearer”² is specifically singled out for condemnation in the precept. The specific ground for the proclamation of the third *pārājika* was thus what today might be termed the practice of *voluntary active euthanasia*.

One of the main arguments advanced in favor of allowing euthanasia in the contemporary debate is respect for autonomy. This is founded on the twin claims that the free choices of rational individuals should be respected, and that all individuals have the right to dispose of their lives as they see

fit. This ground would seem applicable to the present case. The monks were, as far as we can tell, competent rational adults. They wished to die because they had made the judgement that their lives were “not worth living” and that they would be “better off dead.” This was a free choice consequent upon their evaluation of their quality of life, which they deemed to be insufficient to justify continued existence. In terms of respect for autonomy, therefore, their decision might be thought justifiable, in the sense that as competent adults it was up to them to dispose of their lives as they saw fit. It seems, however, that the Buddha rejected this line of argument.

Could it be, perhaps, that the monastic prohibition was introduced not as a matter of principle, but simply because the monks in this case were suffering from religious zeal and had not allowed time for sober consideration of their decision? Perhaps if they had expressed a repeated and sustained wish over time to end their lives, the Buddha would have allowed it. This we cannot know, but such an interpretation is unlikely, if for no other reason than that the rule imposes not just a cooling off period before execution is allowed but an absolute prohibition.

After this first formulation of the precept a short episode is narrated that leads to the precept being expanded to include not just killing but also incitement to death. The text relates how a group of wicked monks became enamoured of the wife of a layman. In order to weaken his attachment to life and get him out of the way, the monks spoke to the husband of the pleasures that would be his reward in heaven for having lived a life of virtue:

Layman, you have done what is right, done what is virtuous, gained security from fear. You have not done evil, you have not been cruel, you have not been violent. You have done good and abstained from evil. What need have you of this evil, difficult life? Death would be better for you than life. Hereafter, when you die, when your body is destroyed at death, you will pass to a happy bourn, to a heaven world. There, possessed of and provided with five divine qualities of sensual pleasure, you will amuse yourself.³

As a result of hearing this the husband began to eat and drink the wrong kind of food and eventually succumbed to a fatal illness. When the matter was reported to the Buddha he expelled the monks and expanded the definition of the third *pārājika* to include incitement to death:

Should any monk intentionally deprive a human being of life or look about so as to be his knife-bringer, or eulogize death, or incite [anyone] to death saying “My good man, what need have you of this

evil, difficult life? Death would be better for you than life,” — or who should deliberately and purposefully in various ways eulogize death or incite anyone] to death: he is also one who is defeated, he is not in communion.⁴

This amplification of the scope of the precept is particularly important in the context of euthanasia since the weight of the case for allowing euthanasia rests on the postulate that “death would be better than life,” especially when, to use the wording of the precept, life seems “evil and difficult.”

Apart from respect for autonomy, a second consideration sometimes advanced in support of euthanasia is compassion. Compassion is of great importance in Buddhism, particularly when linked to the notion of the bodhisattva. Some later sources reveal an increasing awareness of how a commitment to the alleviation of suffering on the part of a bodhisattva can create a conflict with the principle of the inviolability of life. Compassion, for example, might lead one to take life in order to alleviate suffering, and indeed this is the second main ground on which euthanasia is advocated today. Such a situation is addressed in the *Vinaya*, in the first of the sixty or so cases to be reported after the precept against killing was declared.⁵ This case involves a conflict between the prohibition on taking life and the compassionate desire to alleviate suffering. The case is stated in just a couple of lines:

At that time a certain monk was ill. Out of compassion the other monks spoke favorably to him of death. The monk died.

Fortunately, the commentary expands on this rather terse account:

“Out of compassion” means that those monks, seeing the great pain the monk was in from the illness felt compassion and said to him: “You are a virtuous man and have performed good deeds, why should you be afraid of dying? Indeed, heaven is assured for a virtuous man at the very instant of death.” Thus they made death their aim and...spoke in favor of death. That monk, as a result of them speaking favorably of death, ceased to take food and shortly after died. It was because of this that they committed an offence.⁶

It is noteworthy that those found guilty did not go so far as to actually administer euthanasia, but only suggested to the dying monk that he would be “better off dead.” The monk himself then ceased to take food and died, so technically their offence was incitement to suicide. Despite their be-

nevolent motive, namely that a terminal patient should be spared unnecessary pain, the judgement was that those involved were guilty of a breach of the precept. According to Buddhaghosa, the essence of their wrongdoing was that the guilty monks *made death their aim (maraṇāttika)*. This suggests that to make death one's aim, to will death, and *a fortiori* to embark on any course with death as one's purpose, goal or outcome, regardless of how benevolent the motive, is immoral from a Buddhist perspective.⁷ In a modern context, this prohibition would seem to include anyone who aids or abets suicide, lends help in the context of assisted suicide or, of course, administers euthanasia directly. Although compassion is a common motive it does not here provide exoneration. From this we may conclude that while compassion should *accompany* moral acts it does not *justify* them, and that compassion is a virtue only when the end it seeks is good.

A handful of other cases are reported which have a bearing on our theme. In one case a monk, perhaps again motivated by compassion, appeals for the swift execution of a criminal:

At that time a certain monk, having gone to the place of execution, said to the executioner, "Sir, do not keep him in misery. By one blow deprive him of life." "Very well, your Reverence," said he, and by one blow deprived him of life.⁸

The monk's motive, apparently, was to spare the prisoner the mental distress of having to wait for the appointed time of execution. The prisoner was to have been killed anyway, and the monk's intervention simply brought forward the inevitable outcome. In spite of his desire to spare the prisoner suffering, the monk was nevertheless found guilty of a breach of the precept.

The final case I will mention concerns a monk who assists in bringing about the death of an invalid by prescribing a drink that will be fatal for him:

At one time a certain man whose hands and feet had been cut off was in the paternal home surrounded by relations. A certain monk said to these people, "Reverend sirs, do you desire his death?" "Indeed, honored sir, we do desire it," they said. "Then you should make him drink buttermilk," he said. They made him drink buttermilk and he died.⁹

The reason why the relatives desired the death of the patient is not made clear. The circumstances were that an individual had suffered amputation of the hands and feet. A person in this condition would be able to do little for himself and would require constant attention and care. The family

expressed the opinion that it would be better if the man died. This may have been because they judged his quality of life to be so poor that he would be “better off dead.” Perhaps their motive was simply to be free of the burden of providing the care and attention he required. It may even have been a combination of these reasons. We are not told if the patient agreed with the view of his family that he should die. It may be that the man’s view about his death is not reported because it is not thought relevant, since intentional killing is judged wrong regardless of whether the victim consents or not. The circumstances thus suggest this was a case of active euthanasia, although it is not clear whether it was voluntary or not. In the event, the monk who gave the advice was excommunicated. A similar verdict was pronounced in the case of a nun who recommended a concoction of “salted sour gruel” (*loṇasuvīraka*) as a means of causing the death of another patient in the same condition.¹⁰

At one point in his commentary Buddhaghosa has a brief but interesting discussion about the situation of terminally ill patients which at first sight seems to suggest that euthanasia may be allowable in certain circumstances. This discussion occurs in the context of a somewhat bizarre case of a monk who was deeply depressed and threw himself off Vulture’s Peak, apparently with the intention of committing suicide. By chance he happened to fall on top of a basket-maker who was under the precipice at that time. Miraculously the monk survived but the basket maker tragically died. After discussing this case Buddhaghosa mentions three interesting scenarios relating to dying patients. This is what he says:

You should not kill yourself by throwing yourself off a cliff, nor by any other method even down to withdrawal from food. If one who is sick ceases to take food with the intention of dying when medicine and nursing care are at hand, he commits a *dukkāta*. But in the case of a patient who has suffered a long time with a serious illness the nursing monks may become weary and turn away in despair thinking “when will we ever cure him of this illness?” Here it is legitimate to decline food and medical care if the patient sees that the monks are worn out and his life cannot be prolonged even with intensive care.¹¹

There would seem to be a contrast here between the case of a person who rejects medical care with the express purpose of ending his life, and one who resigns himself to the inevitability of death after treatment has failed and the medical resources have been exhausted. The moral distinction is that the first patient seeks death or “makes death his aim,” to use Buddhaghosa’s phrase, while the second simply accepts the inevitability

and proximity of death and rejects further treatment or nourishment as pointless. The first person wishes to die; the second person wishes to live. The second person, however, is resigned to the fact that he is beyond medical help and therefore declines further medical intervention.

This example suggests that Buddhism does not believe there is a moral obligation to preserve life at all costs or to eke out a life that is spent. Recognizing the inevitability of death, of course, is a central element in Buddhist teachings. Death cannot be prevented forever, and Buddhists are encouraged to be mindful and prepared for the evil hour when it comes. To seek to prolong life beyond its natural span by recourse to ever more elaborate technology when no cure or recovery is in sight is to live in a state of denial of the realities of human life. The Buddha himself declined to extend his life, although he reports that this option was open to him. Accordingly, in terms of the *Vinaya*, it would seem justifiable to refuse piecemeal medical treatments that do nothing more than postpone the inevitable for a short time. It should be noted that although this is sometimes described as “passive euthanasia” this is a misnomer, since there is only euthanasia when death is willed directly as a means or an end.

Buddhaghosa goes on to give two further examples of death involving religious practice that do not breach the third *pārājika*.

It is also legitimate in the case of one who suffering from a painful illness from which he knows he will not recover withdraws from food in the knowledge that he is on the brink of a spiritual breakthrough. Again, this time in the context of meditation, it legitimate for one who is not ill but who inspired by religious feeling concludes that the search for food is burdensome, withdraws from it and exerts himself in his meditation subject.¹²

The third example is similar to the second, except that this time the patient has the added incentive that he may at this late stage in his life make a spiritual leap forward if he applies all his remaining efforts to meditation.

The final example is slightly unusual in that the subject is not sick at all. Instead, full of religious zeal (*saṃvega*), he wishes to devote himself solely to meditation. Buddhaghosa does not make clear whether this is undertaken by way of a fast unto death, as in the Jain practice of *sallekhanā*, or is simply a temporary fast. If it is the former, and is undertaken by a young person in good health, some may feel that it is morally culpable in endangering life unnecessarily and is not in keeping with the principle of the “middle way.”

What conclusions can be drawn from the *Vinaya* and Buddhaghosa’s

commentary?

(1) The *Vinaya* is a particularly important source for Buddhist ethics because ethico–legal issues receive a more detailed analysis in the *Vinaya* than in either the *Sutta–Piṭaka* or the *Abhidhamma*. The casuistry employed suggests parallels with Western moral philosophy, which often uses scenarios and hypothetical cases in an attempt to extract moral principles from different practical contexts. The sources reveal that, contrary to what is often asserted by Western commentators, early Buddhism does take a clear and defensible stand on controversial moral questions. This position, perhaps not unsurprisingly, turns out to be a conservative one.

(2) Although discussed in the context of monastic law, it seems fair to see the law here as defending what is fundamentally a moral value. In other words taking human life — even one’s own life — seems to be wrong not because one is wearing an orange robe but because in the view of the texts the destruction of life is intrinsically immoral whether done by monk or layman.

(3) With respect to euthanasia, it would seem to be wrong to commit suicide; wrong to act as “knife–bringer” to someone seeking death; wrong to emphasize the positive aspects of death and the negative aspects of life; wrong to incite someone to kill another, and wrong to assist others in causing death. While we might wish for more detail in the individual five or so cases relating to euthanasia, they all seem to suggest that it is immoral to affirm that death is better than life.

(4) The prohibition on euthanasia does not imply a commitment to vitalism, namely the doctrine that life should be prolonged at all costs. Withdrawal from food and refusal of medical intervention when the end is near is not seen as immoral, since this is to do no more than accept death as an inevitable part of life.

(5) Finally, the views that are expressed in the texts are one thing. The importance that should be attached to the texts as sources for resolving moral dilemmas is another. It is possible to put forward the argument, for instance, that since these texts are embedded in a particular cultural and historical framework they have little relevance to modern Western societies. On the other hand, it may be felt that the views expressed in canonical texts should not lightly be set aside, and should at least be the point of departure for reflection on contemporary moral problems.

Notes

¹ Vin.iii.70.

² On the analysis of this term see VA.ii.441.

³ Vin.iii.71.

⁴ Vin.iii.72.

⁵ Vin ii.79.

⁶ VA.ii.464.

⁷ I believe this also applies in cases of “arhat suicide,” an issue I have discussed elsewhere. See “Buddhism and Suicide: The Case of Channa,” *Journal of Buddhist Ethics*, Vol. 3, 1996, pp. 8–31.

⁸ Vin.iii.85.

⁹ Vin.iii.85.

¹⁰ Vin.iii.85.

¹¹ VA.ii.467.

¹² VA.ii.467.