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Conceptualising the Value of Life in Bioethical Discourse: Sanctity vs Quality of Life

[Konceptualizacja wartości życia w dyskursie bioetycznym: świętość a jakość życia]

Streszczenie: Artykuł dotyczy problemu wartości życia w kontekście jego rozumienia w dyskursie bioetycznym. W analizie zastosowano dwa różne podejścia. Pierwsze podejście ukazuje zestaw imperatywów ludzkiego zachowania związanych z dominacją religijnego komponentu definiującego wartość życia. Nazywa się to koncepcją „świętości życia” i traktuje ludzkie życie jako święty akt boskiego wpływu na egzystencję żywych. Drugie podejście systematyzuje poglądy bioetyczne, które promują najwyższą wartość wolności i autonomii w podejmowaniu decyzji przez każdą jednostkę, w tym tych związanych z jej życiem i zdrowiem. Nazywa się ono koncepcją „jakości życia” i reprezentuje zbiór idei, które sugerują świadome wpływanie na stan życia jednostki, jeśli możliwa jest jego poprawa lub jeśli jego dalsza egzystencja traci racjonalny sens. Te dwa główne podejścia koncepcyjne tworzą problematyczną sytuację, która stymuluje naukowe badania interdyscyplinarne w ramach dyskursu bioetycznego, tworząc jego aparat pojęciowy i kategoryalny oraz poszerzając światopogląd badacza i refleksyjnej jednostki.

Summary: The article deals with the problem of the value of life in the context of its understanding in bioethical discourse. Two different approaches are used to discuss the topic. The first approach demonstrates a set of imperatives of human behaviour associated with the dominance of the religious component defining the value of life. It is called the concept of the “sanctity of life” and considers human life as a sacred act of divine influence on the existence of the living. The second approach systematises bioethical views that promote the supreme value of freedom and autonomy in making

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decisions by each individual, including those related to their life and health. It is called the concept of "quality of life" and represents a set of ideas that suggest to consciously influence the state of life of the individual if it is possible to improve it or if its further existence loses its rational meaning. Being in opposition to each other, these two main conceptual approaches create a problematic situation that stimulates scientific interdisciplinary research within the framework of bioethical discourse, forming its conceptual and categorical apparatus and expanding the worldview of the researcher and the reflective individual.

Słowa kluczowe: życie, wartości, bioetyka, dyskurs, świętość życia, jakość życia.

Keywords: life, value, bioethics, discourse, sanctity of life, quality of life.

Introduction

Human life is a unique manifestation of the existence. It is the fact of the conscious existence of a biological organism capable of self-reflection and which can be a part of organised forms of social coexistence. The value of human life lies not only in the uniqueness of its phenomenon of beingness, but also in the ability of this way of life to form the symbolic foundations of the world. Bioethics, as a special interdisciplinary field of study of human life, brings a moral component to the understanding of this phenomenon of being. It searches for conceptual approaches to the vital characteristics of an individual that can demonstrate and help to understand the value of life as the highest good of living things, reveal the imperative nature of moral norms and categories that consolidate this understanding in human consciousness and manifest themselves both at the level of an individual worldview and at the general level of leading philosophical ideas and concepts.

Presentation of the main research

Bioethics recognises life in any of its biological manifestations as the highest value. An important issue that arises from this bioethical position is the question of the value of the life of the Other. In the modern world, when medicine increasingly uses the latest technologies to support and prolong life, and ethics introduces the idea of the integral nature and significance of the human personality, bioethics, in fact, appears as "...Metaethics, as a modern philosophy of man" (Hordiienko, 2018, p. 28). Thus, bioethics not only expands the traditional field of ethics, but also becomes the basis for revising the basic principles of morality. The concepts of sanctity and quality of life are emerging as these "new ethics".

The problematic situation lies in the variety of approaches that encompass the interpretation of holiness or quality of life as the dominant ethical paradigm in the general bioethical debate on the definition of rules for the attitude to life in general, and human life in particular (Horban O., Martych R., 2020, p. 101–102). These questions focus on the problem of sufficient grounds to recognise the value of any manifestation of the existence of the living, the requirement to respect each of its manifestations, and how it should be expressed and provided. This leads to the following ethical disposition: whether life is the highest good and death, respectively, the absolute evil; whether it is ethical to interfere with the process of life and what are the limits of such interference. Based on different assumptions and drawing different conclusions, researchers have formed two bioethical traditions in relation to the value of life, which are conventionally called the concept of “sanctity of life” and the concept of “quality of life” (Horban O., Martych R., 2022a, p. 87–96). It should also be noted that there is a diverse body of philosophical and other scientific literature that is involved in this discussion. It includes both specifically philosophical literature on moral and ethical topics, as well as research in the fields of biology, medicine, biotechnology, and even the latest research on digitalisation and virtual reality. On the other hand, the literature on religious and ethical topics is widely used in this discussion, as it presents a unique perspective on the value of life, endowing it with divine features (“image and likeness of God”, the result of divine providence, etc.). As a result, we get two conceptual approaches that differ both in focusing on certain aspects of a single object of study and in fundamentally different approaches to the goals and meaning of human existence (for example, life as suffering is one of the dominant Christian religious dogmas). Adherents of one approach or another accuse their opponents of dehumanisation, violation of moral laws or the customary order. Instead, they proclaim themselves to be the only “defenders of man” (Sleczeek-Czakoń D., 2004, p. 233).

Let’s pay attention to the peculiarities of each of the conceptual approaches. The concept of the sanctity of life has its basic principles in religious postulates. Philosophy began to explore the value of life in ancient times. But it was then that the religious view of this problem was perceived as the only possible one (Horban O.V., Martych R.V., 2020, p. 3–10). Life has been recognised as a sacred act, from the moment of its inception and throughout the entire cycle of its existence. The sanctity of life demonstrates the property that gives its object exceptional significance, contrasting it with the profane, secular. In particular, E. Durkheim believed that the main feature of the sacred act is its separation, inviolability, and absolute opposition to something ordinary. A higher power touches the sacred and

endows it with its own properties, so holiness is the highest rank of being, the divine fullness of life (Durkheim E., 1954, p. 105–110). The prominent contemporary philosopher M. Eliade highlights such features of the sacred as power, inviolability and fullness of being, which emphasise the exceptional “authenticity” of this form of being alive. According to the researcher, an object that encounters a manifestation of the sacred absorbs its power, deepens into reality, and allows it to participate in the fullness of life (Mircea Eliade, 2001, p. 19).

This approach to bioethics is most clearly and fully represented in contemporary religious discourse. In this context, it should also be noted that, given the existence of scientific inconsistencies of an ethical and legal nature in views on the problem of the “living” in the context of scientific and technological progress, a return to the syncretic foundations of human knowledge, to reason as wisdom, in which the rational and cognitive are linked to practical philosophy, is becoming essential. In this sense, the principles of bioethics resonate with the postulates of the Christian Church. This, in turn, determines the fact that a significant part of the contemporary bioethical discourse is occupied by the discourse of modern Christian theology, which has its own peculiarities and manifestations in different streams of Christianity. Such peculiarities of mutual discursive synthesis are manifested, firstly, in the affirmation by Christian personalism of the objective ontological status of the human personality. Secondly, in the teachings of Christian theologians who affirm the beauty and righteousness of life created by God, and who understand nature and man as something sacred, and therefore actions committed against them are sinful and unacceptable. Thirdly, in the very basis of human life, which, from the theological point of view, is rooted in the spiritual world of the person himself, correlated with divine transcendence (Horban O., Martych R., 2018, p. 98–99).

The Catholic bioethical discourse on the sanctity of life is represented by the main documents of the Church, among which we should mention the Encyclicals “Donum Vitae” and “Evangelium Vitae”. The first Encyclical is an Instruction on Respect for Human Life, its Origin and the Dignity of Procreation (Donum Vitae). It was issued in opposition to some scientific interpretations that “an embryo is not a person”. “Donum Vitae” allows for artificial intervention only in the form of prenatal diagnostics, which is therapeutic and carried out for the sake of the embryo itself. The Instruction clearly states that any intervention that is not therapeutic in nature but is due to regulation (domination) over the process of procreation is unacceptable to Catholicism. According to the Encyclical, any intervention exposes a person to the temptation to “exceed the limits of reasonable

dominion over nature”. The Catholic Church declares non-interference on the basis of particular competence in the field of experimental sciences. However, taking into account the findings of these studies and technologies and based on its evangelical mission and apostolic duty, it aims to put forward a new moral teaching that is consistent with the dignity of man and his integral vocation. The Catholic bioethical discourse generally recognises that science and technology can help human beings as a resource, but they cannot in themselves be the meaning of existence and human progress. Medical care has always been an integral part of Christian culture (according to legend, the Apostle Luke was a physician). However, medical, like any other scientific and technical activity, requires unconditional compliance with the criteria of the moral law: they must serve the human person, his or her inalienable rights, his or her true and integral good, as intended and willed by the Creator.

The author of the Encyclical *Evangelium Vitae*, John Paul II, insists on affirming human life as a fundamental good. The main idea of the work is to justify the need and ways of protecting life as a manifestation of holiness (*Evangelium vitae*). The main postulates of this Encyclical are the ideas of respect for human life as a fundamental good of every human being; the inviolability of life, which does not belong to man, because it is “the property and gift of God”; that life begins at conception; that human dignity is ensured by the very fact of being a person, and not by any other virtues or merits. An important manifestation of the “sanctity of life” discourse is the idea that the life of the body in its earthly state is not an absolute good. However, no one can arbitrarily choose whether to live or die, because the Creator is the absolute master of making such a decision. This postulate seems to be extremely important for the adherents of the sanctity of life in the discussion about the existence of limits in the treatment of the human body and euthanasia.

The peculiarity of the modern Orthodox bioethical discourse is the shift in emphasis in the problem of understanding the sacredness of life from the ontological and epistemological to the axiological and ethical (Horban O., Martych R., 2018, p. 101–102). The bioethical discourse is present in the views of Orthodox theologians on the issue of “life” in the context of recognising its human nature. The Orthodox Church recognises the human dignity of the embryo at any stage of its development, starting from the initial one. On this basis, intentional abortion at any stage of pregnancy is treated as murder, as a criminal encroachment on the sacred gift of human life.

As for the traditional attempts of doctors to do everything possible to maintain the life of a sick organism and thus prevent its death, Orthodox

bioethical discourse proceeds from the expediency of such actions. Surgery, transplantation, or the use of artificial organs are considered appropriate when there is a high enough probability of the body's return to normal activity. At the same time, in a situation where it is unlikely that the body's vital functions will be restored, Orthodox ethics does not support the practice of euthanasia, rejects the very possibility of intentionally terminating the life of a dying patient, considering this action as a special case of murder if it occurs without the patient's knowledge, or suicide if with the patient's knowledge.

Among the bioethical issues in the context of the sanctity of life, the most controversial in religious discourse is the problem of alleviating physical suffering in the event of illness. In this context, it is worth noting the particular radicalism of Protestantism. Focused on personal autonomy and moral autonomy, Protestantism elevates these postulates to fundamental principles of respect for patient autonomy. In this case, the ethics of life is reduced to the ethics of responsibility (Collange J.-F., 1992, p. 41–44). Based on the ethical and philosophical doctrine of Kant, Protestant theologians interpret it as a fundamental moral principle that a person should be seen as an aim itself and treated as an aim itself, not as a means to some other goal, even the most humane one.

With its religious origins, the concept of the sanctity of life functions only if one is open to the transcendent, i.e., believes in the existence of a certain force or factor that transcends the usual, earthly or visible order. According to Taylor, this openness implies a certain anthropomorphism, when objects external to the human being are understood in relation to him or her. At the same time, the problem of the relation and connection between mind and body turns out to be unthinkable, since the latter does not acquire the degree of objectification characteristic of the modern and postmodern worldview, and the mind, on the contrary, is subjectified. It is a special way of perceiving and interpreting the world as "a state of the world of life when what we might call an interpretation of the moral/spiritual is lived not as an interpretation but as an immediate reality" (Taylor C., 2013, p. 30).

The concept of "quality of life" seems to be more acceptable and popular in modern bioethics, as it has embraced ethical and ontological theories more broadly and deeply. On the other hand, unlike the adherents of the sacredness of life, whose main representatives today are religious groups, the idea of quality of life meets the needs of a modern liberal society.

The quality of life is traditionally understood as "...the degree to which an individual is healthy, comfortable, able to participate in or enjoy life events [...]. Quality of life is seen as multidimensional, encompassing

emotional, physical, material and social well-being” (Jenkinson S., 2023). In bioethics, the concept of quality of life allows us to address many practical issues related to life and death. Among them, it helps to distinguish a position in terms of the permissibility of shortening life through euthanasia or abortion. A clear understanding of the term influences actions related to birth control through contraception, sterilisation, artificial termination of pregnancy or abstinence from sexual intercourse. The content of the concept determines the justification of interventions in human biological nature by means of genetic engineering, cloning, artificial insemination, and forms the relevant social policy in the field of demography, ecology, and health care (Reich W.T., 1978, p. 829–831).

Within the framework of this system of views, there is an attempt to introduce into the modern bioethical discourse, along with the concept of “organismal life” and its synonymous “body life” and “biological life”, a special concept – “personality life”. In this approach, the concept of “body life” is only a basic condition for a higher qualitative level of beingness of the “living” – “personality life”. And if a given human organism lacks certain qualities, then it becomes possible to deny such life.

One of the most prominent adherents of this view is the Australian researcher Peter Singer, who, from the point of view of practical ethics, develops the issue of equality of all living beings as equality in taking into account interests. First of all, in his opinion, it concerns the ability of a living being to satisfy its basic needs, develop personal qualities, and be free to achieve its own goals. Therefore, the value of human life itself lies in its personal status. The criterion of the right to life is the ability to imagine oneself in time, to identify oneself with past states of one’s own consciousness, to have preferences (Singer P., 1996). For this researcher, the personal status of a person is a criterion in solving such bioethical problems as euthanasia, abortion, and killing other living beings. The priority in this matter is the free autonomous decision of the individual, which is an inherent characteristic of the human being, the basis of his or her dignity.

Among the attempts to define the qualities that can be a criterion for distinguishing between biological life and the life of a person, the opinion of the American bioethicist Mary Warren is of interest, who believes that in order to include anyone in the moral community of individuals, such qualities as consciousness, reason, independent activity, self-awareness and the ability to communicate are necessary (Warren M.A., 2001, p. 457–458).

The Polish researcher Weronika Hanska analyses various criteria for objective assessment of the state of life. She seeks to find an answer to the question whether life is always better than death, especially when a person is unable to use his or her own autonomy (Chanska W., 2009). The researcher

assumes that the recording of a patient's poor quality of life by modern medical means can provide grounds for making radical decisions, including the termination of treatment and euthanasia. Hence, her conclusion that the purposeful termination of the biological existence of a patient whose life has forever lost the qualitative personal characteristics that made it valuable cannot be considered murder. In this regard, the term "quality of life" should be interpreted more broadly than the concept of "health". This is especially important in certain cases when treating a patient, which should take into account his or her personal qualities, worldview and the right to autonomy in decision-making.

The specificity of the concept of "quality of life" is that, along with objective criteria, it includes subjective criteria, which means physical, mental and social well-being. The combination of these factors constitutes the discourse of health. Then "poor quality of life" should be recognised as an illness. However, there are enormous difficulties in making such an identification, as the perceptions of what constitutes a "good quality of life" during, for example, a certain type of treatment may differ greatly between patients and the medical community (Bowling L., 2001, p. 12).

Thus, the concept of "quality of life" in contemporary bioethical discourse requires further reflection and research. Nevertheless, it has already become one of the main categories of medical ethics, especially when discussing such states of the "living" as "health", "disease", "pathology", "norm". In addition, the idea of quality of life is an important characteristic of modern medical ethical discourse, which allows us to clarify the purpose of medical intervention for the "good" of the patient, as well as to take into account not only a purely clinical perspective, but also the patient's point of view (Horban O., Martych R., 2022b, p. 63–69).

The concept of "quality of life" is imbued with anthropological optimism, as it is based on the idea that people know best what is the highest good for them. The dominance of this perspective in modern medicine and ethics in general will allow us to address issues that will enable individuals to make independent and autonomous decisions. Instead of control over human life, its protection and preservation, excessive freedom to dispose of one's own existence is proposed, based solely on the autonomy in decision-making and free will of the individual.

Conclusions

The absolute value of life is an integral attribute of a person's moral attitude to the phenomenon of being alive. Bioethics, as an interdisciplinary

area of research, conceptualises approaches and directions of understanding the value of life and searches for imperatives of human activity related to changing the parameters of life or the fundamental foundations of its existence. The dynamics of bioethical discourse is represented by a wide range of different views on the value of life as a special and unique form of existence. The scientific and religious discussions generated by this wide range of opinions focus on two main ethical issues: whether life is the highest sacred manifestation of the divine essence of the Creator, and therefore it is sacred and inviolable by virtue of its origin; or whether we should focus on the impact on life itself that would ensure the physical, psychological and social comfort of its existence. These conceptual approaches include opposing points of view, generate scientific and theological debates, and force adherents and opponents to further search for arguments. Nevertheless, these approaches have considerable scientific potential, which allows the development of bioethical doctrine by formulating imperatives for human behaviour. Bioethics, with the help of moral norms and imperatives, defines the limits of possible human influence on the ways and forms of living things, forms a system of categories and concepts that describe conceptual constructs with the aim of developing a moral attitude of a person to all living things.

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