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# CIVIL SERVICES ACHIEVERS' POINT

A ONE STOP SOLUTION FOR UPSC/APSC/SSC & BANKING

## ANSWERWRITING PRACTICE- ESSAY

### TOPIC-

**Euthanasia and the Right to Life and Liberty (1000-1200 Words, 125 marks)**

### MODEL ANSWER:

The constitution of India under article 21 empowers citizens to enjoy right to life and personal liberty bringing within its ambit the right to privacy, right of self-determination and right of autonomy. The right to die is negative right of right to life and has been the point of debate since decades in Indian judiciary. The legal impediments in recognition of right to die are sections 309 IPC and 306 IPC containing penal provisions for attempt and abetment to suicide respectively.

The Right to die is a concept which is based on the opinion that a human being is entitled to make any decisions about ending his or her life which also includes undergoing voluntary euthanasia. Possession of this right is often understood to mean that a person with a terminal illness, or without the will to continue living, should be allowed to end their own life or to decline life-prolonging treatment. The primary question that arises is whether people should have the right to die and what may be the principle justifying such right.

Right to life is a basic natural right of human beings. In India, it is a fundamental right guaranteed under Article 21 that is Part-III of the Constitution of India. Article 21 states that:

*“No person shall be deprived of his life or personal liberty except according to procedure established by law”*

This fundamental right confers an obligation on the state to ensure good quality of life, livelihood, liberty and a dignified life to the people, both citizens and otherwise.

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**The question that right to life can include within its ambit the right not to live or the right to die is one that has been debated in several cases. Death can be defined as the termination of life. Death can be categorized basically into two kinds – (i) natural and (ii) unnatural death. It can be caused by the action as well as the inaction of a person. Causing the extinction of a life unnaturally by the action of oneself over himself or over someone else is morally bad as well as legally punishable. Every living being in this world wants to live a long life and by every possible means wants to increase the longevity of their lives and promoting end of such life is not the intended result of this right.**

**For a common man, when life becomes far more painful and unbearable than death, then it is very normal for him to desire death. This voluntary embracing of death is known as euthanasia or mercy killing.**

**Several arguments for legalizing euthanasia have been put forth including:**

**it is a way to end an extremely miserable and painful life. and insistence to postpone the death against patient's wishes are against law, unwise, inhumane and not medically sound.**

**The family members of the dying patient are relieved of the physical, emotional, economical and mental stress upon them. It also provides comfort to the patient and causes relief of his pain.**

**The patients also have a right to refuse medical treatment. If a doctor treats a patient against his express wishes, he can be charged with assault.**

**Performance of euthanasia will free up the medical funds of the state to help other poor and needy people.**

**An individual has the freedom to exercise his right to die. The constitution guarantees the fundamental rights and freedoms where a positive right includes a**

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**negative right. For instance, freedom of speech includes within it freedom not to speak, etc.**

**Further, arguments against legalizing euthanasia include:**

**Indian society, driven by religion, will not accept the concept of euthanasia as the religious scriptures defy it.**

**Commercialization of euthanasia can take place.**

**The poor people could resort to this in order to avoid the pecuniary difficulties of medication.**

**Old and destitute are sometimes considered a burden and people can make use of this to shove off their responsibilities.**

**Allowing euthanasia will devalue human dignity and will offend the principle of sanctity of life. It will leave sick, disabled people more vulnerable than the rest of the population and can also provide a 'cloak for murder'.**

**The sanctity of human life does not imply the forced continuation of existence in pain and suffering. Given that a person has the right to lead a dignified existence, he cannot be forced to live to his detriment. If a person suffers from an incurable disease, it would be inhumane to compel him to live a painful life. A terminally ill person should be permitted to terminate his pain and suffering by choosing to do so.**

**In fact, these are not cases of extinguishing life but only of accelerating the process of natural death, which has already commenced. The proposition merely is that the legislation must provide for an alternative, if the terminally ill patient so desires, having complied with the requisite conditions, to substitute his slow and painful death with a quick and painless one.**

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Medical science is progressing in India as in the rest of the world, and hence currently we have techniques that can prolong life by artificial means. This may indirectly prolong terminal suffering and may also prove to be very costly for the families of the subject in question. Hence, end-of-life issues are becoming major ethical considerations in the modern-day medical science in India. Allowing euthanasia exclusively in the case of terminally ill patients is desirable.

The landmark Supreme Court judgment in 2018 has provided a major boost to pro-euthanasia activists though it is a long way to go before it becomes a law in the parliament. Moreover, concerns for its misuse remain a major issue which ought to be addressed before it becomes a law in our country. The ultimate outcome of this debate remains uncertain. It must, however, be remembered that an acrobatic argument that acknowledges technological advances but dismisses the evolving ethical issues which pose uncomfortable and disturbing questions is unfair to the community of patients.



CENTRES: BELTOLA, SILCHAR, KOKRAJHAR, COTTON UNIVERSITY, SONAPUR COLLEGE, MARGHERITA