



Analysis of Euthanasia Legitimacy Based on the Right to Self-Determination from the Perspective of Legal Experts and Comparative Legalization

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Abstract

This article aims to analyze the concept of individual self-determination as a basis for legitimizing euthanasia, examine how the right to life is interpreted within the framework of self-determination by legal scholars, and review legal practices in several countries that ground the legality of euthanasia in respect for personal autonomy. Using a normative juridical research method that focuses on the study of literature, legal norms, principles, and theoretical frameworks, this research demonstrates that the right to life, as formulated in human rights instruments, should not be understood as an obligation to preserve biological life under all circumstances, particularly in situations of severe and incurable medical suffering. Instead, respect for human dignity, personal autonomy, and individual will forms a crucial foundation for assessing the legitimacy of euthanasia. Legal scholars argue that a competent individual's conscious decision to end life through a regulated medical procedure may be considered a legitimate expression of the right to self-determination. Comparative analysis of legal practices in Canada, the Netherlands, and other jurisdictions shows that the legalization of euthanasia is generally based on recognizing individual freedom to determine one's own end-of-life choices with dignity. Therefore, this study concludes that, in certain contexts, euthanasia does not violate the right to life but rather affirms the individual's right to shape both life and death in a manner consistent with human dignity.

Keywords: *Euthanasia; Human Rights; Right to Life; Right to Die; Self-Determination Rights*

Introduction

As societal developments continue to evolve, the principle of the right to life has given rise to the notion of a Right to Die, which is subsequently manifested in the practice of euthanasia (Math, et al., 2019). The primary justification for euthanasia is the existence of a prolonged and severe medical condition that causes extraordinary suffering without any reasonable prospect of recovery. These circumstances often lead patients or their families to make decisions to withdraw or terminate medical treatment administered by physicians or medical personnel. The discontinuation of such treatment constitutes one form of euthanasia (Lee, 2023). This withdrawal of medical procedures also represents an exercise of the individual right to self-determination, which forms one of the core elements of human

rights as regulated under the International Covenant on Civil and Political Rights (Soewondo, et al., 2023).

The right to self-determination means that all individuals possess the right to direct their future, maintain control over how they live, be treated with dignity as whole persons in all contexts, and hold authority over the resources that support their lives (Connecticut Developmental Services, 2025). Although traditionally associated with collective, diplomatic, or political contexts particularly regarding state independence, self-determination also bears a personal meaning relevant to individuals, namely the ability to make one's own choices, to exercise control over one's life, and to preserve one's dignity. One of the ways these capacities manifest is through the decision to pursue euthanasia.

The concept of dignity affirms that every person deserves respect by virtue of being human. The Universal Declaration of Human Rights reverses earlier hierarchical understandings by declaring in Article 1 that *"all human beings are born free and equal in dignity and rights."* Dignity is therefore not derived from factors such as class or race but is inherent in every person, and human rights naturally arise from this inherent dignity. The International Covenant on Civil and Political Rights, adopted in 1966, reinforces this view in its preamble, which states that human rights *"derive from the inherent dignity of the human person"* (Soken-Hubert, 2025). Historically, only those considered dignified by social status were granted rights, but redefining dignity as inherent to all establishes the universality of human rights.

The Canadian Parliament has enacted legislation legalizing euthanasia or medical assistance in dying for patients suffering from severe and incurable conditions. This regulatory shift followed a landmark Supreme Court ruling that struck down the prohibition preventing medical professionals from assisting patients without hope of recovery (Konder et al., 2019). The policy places Canada among the few countries that legally permit physicians to assist in the death of patients with grievous illnesses. Canada's Minister of Justice Jody Wilson-Raybould and Minister of Health Jane Philpott emphasized that the law seeks to balance personal autonomy for those seeking medically assisted death with safeguards to protect vulnerable individuals. Medical assistance in dying is legally permitted in several countries, including Canada, the Netherlands, and Japan (BBC News, 2016).

This article aims to analyze how the concept of individual self-determination serves as the basis for legitimizing euthanasia; to examine legal scholars' interpretations of the right to life within the framework of self-determination in euthanasia practices; and to review the legal systems of various countries that ground the legality of euthanasia in the principle of individual autonomy in determining one's own fate.

Method

This study employs a normative legal research method with both conceptual and comparative approaches. Normative legal research is a methodology that focuses on the examination of legal norms, doctrines, principles, theories, and applicable regulations, with the objective of formulating solutions to legal issues such as normative gaps, conflicts of norms, or ambiguities within existing rules (Marzuki, 2011). This method is characterized by its reliance on literature-based analysis, distinguishing it from empirical (non-doctrinal) research, which is grounded in field studies and direct observation.

Result and Discussion

1. The Concept of Individual Self-Determination in Human Rights Interpreted as the Basis for the Legitimacy of Euthanasia.

The term euthanasia derives from the Greek words *eu* (good) and *thanatos* (death), which together mean "a good and easy death." In ancient usage, the term referred simply to a "good death." It was not until the late nineteenth century, particularly in England and the United States, that the term was employed to describe the medically assisted ending of life for patients with no prospect of recovery. The

term was adopted as a euphemism to avoid expressions such as “compassionate killing.” (Jones, 2021). Euthanasia is also widely known as “mercy killing,” as it is carried out to alleviate a patient’s suffering. The underlying objective of euthanasia is to allow individuals to live and die with dignity (Mohita, et al., 2022).

The terminology of euthanasia indicates an act of ending a person’s life based on considerations of benevolence. The value of benevolence in euthanasia is grounded in an individual’s desire to escape unbearable pain by choosing to end their life. The intention to avoid suffering while still alive provides a strong impetus for individuals to decide to end life (Rifai, T. P., 2018). Various aspects of human life may trigger the desire to die, particularly in cases of chronic, incurable, or severely painful illnesses with minimal chances of survival. Limited prospects for recovery, prolonged treatment, substantial financial burdens, and ongoing suffering often lead individuals or their families to conclude that life can no longer be sustained, thus motivating the decision to pursue euthanasia.

Euthanasia emerges from the belief that every individual has the right to determine their own destiny. If one has the right to live, one is also deemed to have the right to choose a dignified death. This perspective cannot be separated from the concept of the patient’s right to self-determination, which has become a central element of human rights as global awareness of these rights has progressed (Fadhila, et al., 2024). The practice of euthanasia reflects the exercise of an individual’s right to self-determination, which constitutes a fundamental component of human rights as protected under the International Covenant on Civil and Political Rights (ICCPR). Discussions on euthanasia therefore inherently involve the principle of self-determination, which forms one of the primary pillars of human rights (Wijaya, I. G. A. P., et al., 2021).

As stated in the International Human Rights Instruments, General Comment No. 12: Article 1 (Right to Self-Determination) affirms: *“In accordance with the purposes and principles of the Charter of the United Nations, article 1 of the International Covenant on Civil and Political Rights recognizes that all peoples have the right of self-determination. The right of self-determination is of particular importance because its realization constitutes an essential condition for the effective guarantee and observance of individual human rights, as well as for the promotion and strengthening of those rights. For that reason, States set forth the right of self-determination in a provision of positive law in both Covenants and placed this provision as article 1, apart from and above all other rights contained in the Covenants.”* (United Nations, 2006).

Self-determination is further reaffirmed in Article 1(1) of the Core International Human Rights Treaties, which states that *“All peoples have the right of self-determination.”* (United Nations High Commissioner for Human Rights, 2006). This principle may be interpreted as an individual’s freedom to make autonomous choices, exercise control over their life, and preserve their dignity, including both maintaining the right to life and choosing the right to die.

In Indonesia, euthanasia is regarded as a violation of one of the fundamental human rights namely, the right to life. Debates surrounding euthanasia remain ongoing. From a humanitarian perspective, euthanasia may be viewed as an act of compassion, an attempt to help another human being end unbearable suffering and pain. As social beings (*zoon politikon*), humans not only possess rational and progressive capacities but also feelings of compassion, empathy, and sympathy toward the suffering of others. These sentiments ultimately contribute to the emergence of the idea and practice of euthanasia.

2. The Interpretation of the Right to Life within the Framework of the Principle of Individual Self-Determination in the Practice of Euthanasia According to Legal Scholars

According to John Locke, human rights are God-given entitlements inherent to every individual, including equality and liberty, as well as the right to preserve one’s life and property. Indonesian Law No. 39 of 1999 on Human Rights, Article 1(1), defines human rights as a set of rights inherent in the nature and existence of human beings as creations of God Almighty, which must be respected, upheld, and

protected by the state, the law, the government, and all persons for the sake of human dignity and worth (Harlen, 2022).

The right to life has progressively developed and given rise to the idea of the right to die, which has generated extensive debate. The Universal Declaration of Human Rights (UDHR) and the International Covenant on Civil and Political Rights (ICCPR) explicitly guarantee the right to life (Akhigbe, 2018). However, it is important to note that these instruments do not categorically prohibit euthanasia, as the right to life in human rights law extends beyond mere biological existence to encompass the quality of life and the individual's freedom to determine the course of their own life.

Article 1 of the UDHR states that *"All human beings are born free and equal in dignity and rights,"* indicating that freedom and dignity are fundamental values inherent to every person. This includes the ability to make personal decisions about one's own body and life, including the decision to end suffering through euthanasia. Article 3 of the UDHR further provides that *"Everyone has the right to life, liberty and security of person."* Notably, the right to life is not formulated as an absolute mandate requiring the preservation of life under all circumstances, regardless of severe suffering or personal wishes (United Nations, 1948).

Similarly, Article 6(1) of the ICCPR affirms that *"Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life"* (United Nations, 1966). This formulation contains two essential points: first, that the right to life is inherent, and second, that the prohibition concerns arbitrary deprivation of life. Thus, if euthanasia is conducted under a lawful framework and with the informed and voluntary consent of the individual, it does not automatically constitute a violation of this provision.

Several prominent legal and bioethical scholars argue that the right to life should not be interpreted as an obligation to endure existence under inhumane or unbearable suffering. Respecting the right to life also entails respecting the right not to be forced to continue living in prolonged suffering. These scholars include:

a) John Harris (Bioethicist, University of Manchester)

John Harris is one of the leading bioethicists who asserts that the right to life encompasses the right to die with dignity. In his influential work *The Value of Life* (1985), he argues: "The right to life must include the right to choose to end that life, especially when continued existence entails great suffering," and asserts that "voluntary euthanasia, freely chosen, is not wrong" (Takala, et al., 2025). Harris views the rejection of euthanasia as a denial of individual autonomy and as treating human beings merely as biological objects rather than as free moral agents. He also concludes that voluntary euthanasia, when freely chosen, is not morally wrong.

b) Ronald Dworkin (Legal philosopher, NYU/Oxford)

In his seminal book *Life's Dominion* (1993), Dworkin writes: "Making someone die in a way that others approve, but he believes a horrifying contradiction of his life, is a devastating, odious form of tyranny" (Sándor, 2024).

For Dworkin, decisions concerning life and death constitute a part of an individual's moral freedom, reflecting the value of human life itself. He maintains that life is not merely of practical value (such as productivity, routine, or pleasure), but also possesses intrinsic worth. Dworkin argues that the manner in which a person lives and ends their life is an expression of that value. He distinguishes between the intrinsic value of life and a person's right to determine what constitutes a meaningful life. In the context of euthanasia, he contends that voluntary euthanasia may be morally justified when it reflects an individual's personal judgment about dignity and quality of life; accordingly, the state should not impose a particular moral view of the meaning of life upon individuals, especially at the end of their lives.

c) Margaret P. Battin (Bioethicist, University of Utah)

Margaret P. Battin, a professor of bioethics, has written extensively on euthanasia and assisted suicide. In her article “Euthanasia: The Way We Do It, the Way They Do It” (1992), she argues that: “Respecting a competent person’s choice to die is not an erosion of the right to life; it is its affirmation in the face of unbearable suffering.” Battin also examined countries that have legalized euthanasia and found that legal systems are capable of regulating euthanasia stringently while still upholding respect for fundamental human values. (Guerrero Quiñones, 2021).

d) Hélène Kuhse & Peter Singer (Bioethicists, Monash University & Princeton University)

In their works *Should the Baby Live?* and *Practical Ethics*, Peter Singer and Kuhse argue that the right to life is not an absolute value. Singer maintains that when a person’s quality of life is extremely poor and there is no prospect of improvement, respecting their wish to die is, in fact, an ethical act. (Dubey, et al., 2024).

From the perspectives of the scholars discussed above, it can be concluded that the right to life should not be interpreted as a biological obligation to remain alive under all circumstances. Instead, respect for dignity, autonomy, and individual will—particularly in situations of extreme medical suffering—constitutes an integral component of human rights principles. Accordingly, euthanasia in this context is not a violation of the right to life but rather an affirmation of the individual’s right to live and die with dignity. These scholars emphasize that respect for personal autonomy, human dignity, and the right to self-determination forms an essential part of human rights, which may encompass the choice to end one’s life in certain medical conditions. This perspective situates euthanasia within the framework of self-determination rights, namely the right of individuals to consciously and freely determine how their lives should be lived, including how and when they choose to end them.

3. Legalization of Euthanasia Based on the Principle of Individual Self-Determination in Several Countries

One of the pioneering countries in the legalization of euthanasia is the Netherlands, which in 2002 enacted the Termination of Life on Request and Assisted Suicide (Review Procedures) Act. Articles 293 and 294 of the Dutch Penal Code state that euthanasia and assisted suicide are criminal offenses; however, these provisions are decriminalized under certain conditions. (Overbeek, et al., 2021). The decriminalization framework provides that the termination of life on request (euthanasia) and assisted suicide are not treated as criminal acts if performed by a physician and if all due-care criteria and official euthanasia guidelines are met. (Buijsen, 2022).

Accordingly, physicians who directly end a patient’s life or assist in suicide will not be prosecuted as long as they comply with these guidelines. The legalization of euthanasia through statutory decriminalization reflects formal recognition of the free will of patients suffering from severe, incurable illnesses. The law grants individuals the right to consciously and voluntarily choose a dignified death as an extension of personal autonomy. (Anastasia, 2024).

Belgium followed the Netherlands in legalizing euthanasia in the same year (2002), adopting a similar regulatory model. Uniquely, Belgium later became the first country to legalize euthanasia for minors without age restrictions in 2014, provided that they are capable of giving informed consent and meet specific medical criteria. (Deak, et al., 2017). Euthanasia for adults and children is generally accepted in Belgian society, with euthanasia for minors supported by approximately 74% of the population. The principle of self-determination forms the foundation of the legal framework permitting euthanasia for competent adults and minors capable of understanding the consequences of their decisions. The state affirms that the ultimate decision over one’s life must rest with the individual, not with institutions or the government. (Verhofstadt, et al., 2024).

Canada also legalized euthanasia through the Medical Assistance in Dying (MAiD) legislation in 2016, following the Supreme Court's ruling that prohibiting medical assistance in dying violated constitutional rights. Canada explicitly links the right to medical assistance in ending one's life to the Charter of Rights and Freedoms. In *Carter v. Canada* (2015), the Supreme Court held that the ban on medical assistance in dying violated the rights to life, liberty, and security of the person, as it prevented individuals from making meaningful personal decisions about death in conditions of unbearable suffering. Since then, Canadian law has continued to evolve, including expanding MAiD eligibility to certain mental health conditions beginning in 2024. (Supreme Court of Canada, 2015).

Colombia legalized euthanasia in 1997 through a Constitutional Court decision, although its effective implementation began only after further regulation in 2015. Colombia, as a Latin American country recognizing euthanasia, affirms that the right to die with dignity is an inherent human right. The Constitutional Court emphasized that patient autonomy over their bodies and lives is a principle that the state must not violate. (Mroz, et al., 2021).

In Australia, particularly in the Northern Territory, the Rights of the Terminally Ill Act 1995, which came into effect on 25 May 1995, was enacted to affirm and protect the rights of individuals with terminal illnesses to request assistance from medically qualified persons to voluntarily end their lives humanely. (Parliament of Australia, 2022). The Act also permits assisted euthanasia under certain conditions without criminal liability for those providing assistance, while offering procedural safeguards to prevent potential misuse of the rights recognized under the Act. (Braun, 2024).

The legalization of euthanasia grounded in self-determination rights across several countries illustrates a paradigm shift in global medical law and ethics—from a paternalistic approach toward one that places patient autonomy at the center of decision-making. Within this context, euthanasia is understood not merely as a medical intervention but as an expression of individual freedom in determining the end of one's life.

Conclusion

In Indonesia, euthanasia is regarded as a violation of one of the fundamental human rights, namely the right to life. The debate surrounding the permissibility of euthanasia remains ongoing. From the perspective of humanitarian values, euthanasia may be understood as a humane act an effort to assist another human being in alleviating unbearable suffering and pain. As social beings (*zoon politikon*), humans not only possess the capacity for progressive reasoning but also empathy, compassion, and sympathy toward the suffering and distress experienced by others. These sentiments have ultimately contributed to the emergence of both the idea and practice of euthanasia. Although human rights norms primarily regulate the right to life, this right should not be interpreted merely as a biological obligation to preserve life under all circumstances. Rather, respect for human dignity, autonomy, and individual will especially in conditions of extreme medical suffering constitutes an inseparable element of human rights principles. Accordingly, euthanasia, in this context, should not be perceived as a violation of the right to life, but rather as an affirmation of an individual's right to live and die with dignity.

Several legal and ethical scholars argue that respect for personal autonomy, human dignity, and the right to self-determination forms an integral part of human rights, which may include the choice to end one's life under specific medical circumstances. This view positions euthanasia within the framework of self-determination rights, namely the individual's conscious and voluntary authority to decide how their life should be lived, including how and when they choose to end it. The legalization of euthanasia in several countries grounded in the principle of self-determination rights demonstrates that euthanasia is not merely regarded as a medical intervention but also as an expression of individual freedom in determining a dignified end to one's life.

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