Death on Demand?

The Economics and Politics of Life, Death and the State

Former Governor George Ryan’s 1999 moratorium on executions rekindled the death penalty debate in Illinois. The targeted drone killing of an American citizen in Yemen in 2011 added another dimension, as did the 2013 gruesome two-hour execution in Arizona, followed by a California judge’s ruling that the death penalty violates Eighth Amendment’s protections against cruel and unusual punishment.

These individual cases are actually part of a larger set of circumstances: When the government condones or sponsors murder, and either kills or allows a human life to be taken. Capital punishment is certainly one example. War is another. Abortion is a third. Suicide would constitute a fourth case; and the fifth, related to the fourth, is physician-assisted suicide for the elderly, end-of-life situations, or when someone is in extreme pain or has no hope of recovery, such as 29-year-old Brittany Maynard in Oregon last year.

Some people may view capital punishment as retaliation or vengeance, and thus find it repugnant in a civilized society. Think Europe. On the other hand, others may find it acceptable as a legitimate societal expression of what criminal actions constitute unacceptable behavior to remain within the human community.

Many who oppose the death penalty fall back on two somewhat unrelated points: (1) We might make a mistake and put an innocent person to death; and (2) Occasionally there will be a messy, “botched” execution, such as in the Arizona case, which all of us might find abhorrent. If neither of these were an issue—100 percent certainty that the person was guilty of a heinous crime and that nothing goes wrong with the execution itself (there has never been a glitch with an execution by firing squad)—those who object on these grounds would still object for moral or ethical reasons, a perfectly defensible position to hold. However, they are using (1) and (2) as a “yeah but” crutch for support; better to just be upfront and honest about it.

An intermediate position on the matter might be to weigh the costs and benefits of capital punishment v. life in prison and then decide on economic grounds: Is it cheaper in the long run to feed and house someone for 50 years rather than going through the seemingly endless appeals process before putting the person to death? A second consideration: Is capital punishment a deterrent, such that killing one person actually saves lives by reducing criminal activity and the murder rate? The evidence on this is mixed. Gun control and concealed-carry debates contain similar elements. And again, there is no clear-cut answer.

In wartime, countries aggressively pursue actions to defeat an enemy, whatever the ultimate objective might be. Thus the killing of enemy combatants is explicitly condoned, but the government is putting the lives of its own young men and women in harm’s way, presumably an acceptable tradeoff. (War may not be morally acceptable to conscientious objectors, but they are implicitly free-riding off the risks assumed by others.)

In the case of abortion, the current modal American opinion seems to accept early terminations of a pregnancy; However, the closer one gets to nine months, opinions diverge and discourse becomes more strident. These are tough decisions. A late-term fetus has an excellent chance of survival outside the womb, but a one-month-old fetus does not.

Suicide, brought to the fore last year with the death of Robin Williams, and physician-assisted suicide, are variations on the same theme. Does a person have the right to end his or her own life? Can he or she receive help in this quest—from a medical doctor, family member or friend, and without the threat of legal action by the state? Laws and enforcement vary across countries.

In the United States more people die from suicide than car accidents (though this is not a “clean” comparison because some automobile deaths—such as driving at a high rate of speed, while not wearing a seat belt, and crashing into a large, stationary object—are likely, for moral or insurance reasons, essentially suicides.) Our suicide rate is positively related to age; and thus as our society continues to gray, how we handle this delicate “Death with Dignity” issue will likely force us to rethink our laws and practices in the years and decades ahead.