

- Turshouse, "Virtue Ethics," section 2.
7. For a more rigorous account of this principle, see Rosalind Wiseman, "Virtue Theology and Abortion," in *Philosophy and Public Affairs* 20 (1991), pp. 223–246. For some problems with this thesis, see Robert B. Louden, "On Some Versions of Virtue Ethics," in *American Philosophical Quarterly* 21 (1984), pp. 227–236.
8. Martin, *A Game of Thrones*, pp. 636–637.
9. Hursthouse, "Virtue Ethics," section 2.
10. Martin, *A Game of Thrones*, p. 307.
11. Ibid., p. 488.
12. Among the more prominent proponents of consequentialism (in its most common form, utilitarianism) are Jeremy Bentham (1748–1820) and John Stuart Mill (1806–1873). See, for example, Jeremy Bentham, *Introduction to the Principles of Morals and Legislation* (Mineola, NY: Dover Publications, 2002), originally published in 1789; John Stuart Mill, *Utilitarianism* (New York: Oxford University Press, 1998) (originally published in 1861). For further readings, see Stephen Toulmin, ed., *Consequentialism* (Oxford: Blackwell Publishing, 2000).
13. For the culture dependent view of virtue ethics, see Martha Nussbaum, "Non-relative Virtues: An Aristotelian Approach," in *Harvard Studies in Philosophy* Vol. 13, *Ethical Theory: Character and Virtue*, ed. Martha C. Nussbaum, Theodore Uehling, Jr., and Howard Wettstein, eds. (Notre Dame, IN: University of Notre Dame Press, 1988), pp. 32–53.
14. Martin, *A Game of Thrones*, p. 487.
15. Ibid., pp. 504–505.
16. Ibid., p. 27.
17. Ibid., p. 368.
18. Ibid., p. 320.
19. Ibid., p. 381.
20. George R. R. Martin, *A Storm of Swords* (New York: Bantam Dell, 2005). This novel was originally published in 2000.
21. Martin, *A Game of Thrones*, p. 487.
22. This part of the chapter has to do with an old problem in philosophy, the problem of evidence. See Thomas Kelly, "Evidence," in *Stanford Encyclopedia of Philosophy*, ed. Edward N. Zalta, <http://plato.stanford.edu/archives/fall2008/entries/evidence/>, for further reading and relevant references.



## IT WOULD BE A MERCY: CHOOSING LIFE OR DEATH IN WESTEROS AND BEYOND THE NARROW SEA

Matthew Tedesco

On each side of the Narrow Sea, a character pivotal to events in *A Game of Thrones* faces a medical crisis. At Wintertell, young Bran Stark is climbing the walls of the great castle when he peers through a high window and witnesses the Lannister twins Jaime and Cersei engaged in a secret act of incest. To protect this secret, Jaime shoves Bran from the window, leaving Bran crippled, comatose, and fighting for his life. Later in the same book, on the vast grasslands of the Dothraki Sea, the mighty and undefeated Khal Drogo takes a wound in battle that initially seems inconsequential, but soon festers. Drogo rapidly weakens and falls from his horse. Like Bran Stark, his life sits precariously on the edge of an arakh. Befitting genuine medical crises, both Bran and Drogo are placed in the care of people with expertise in treating the injured and sick.

Bran is treated by Maester Luwin, a Citadel-trained learned man long in the service of House Stark. In contrast, Drogo's wife Daenerys Targaryen seeks out the more controversial dark magic of the maegi Mirri Maz Duur in order to save her beloved sun and stars.

The best works of fantasy use places, persons, and powers sprung from the imagination in order to connect with the parts of us and our lives that are most real. These two medical crises in *A Game of Thrones* are gripping and philosophically interesting, not for the medical details themselves, but rather for the hard moral issues that surround the decisions made both during and after the treatment of both Bran and Drogo. These issues are of special interest to philosophers working in biomedical ethics—the area of philosophy that concerns moral issues and problems surrounding biological research, medical research, and the practice of medicine. These are no esoteric, armchair exercises. Rather, they are the issues we face when we are forced to make the most profound and difficult choices for ourselves, our families, and our loved ones. At the core of biomedical ethics are matters of life and death, of mortality and personhood, of the choices we may make, and the choices we must not. The medical crises of Bran and Drogo are windows into some of these important philosophical matters.

### "Give Me a Good Clean Death"<sup>1</sup>

"It would be a mercy."<sup>2</sup>

—Jaime

Jaime Lannister utters these words to his brother Tyrion as Bran lies in his coma. Ever the knight and most at home with a sword in his hands, Jaime opines that it would be better to end the boy's life cleanly and quickly than allow him to go on living as a "cripple" and a "grotesque." As readers, we are privy to Jaime's private motives: his crime against Bran has not been

discovered, nor has his incestuous relationship with his sister that has spawned three children, including Prince Joffrey. Presumably Jaime would prefer to keep it that way, so Bran's death would be a very convenient thing.

We as readers may be outraged by more than Jaime's private agenda here. Even if someone else, someone entirely disinterested in Bran's life or death, had made the comment, we would still reject the suggestion that a quick death for Bran would be a mercy. Should Bran awaken, he will have a serious handicap, as he will no longer have the use of his legs. But this would not prohibit Bran from leading a good life, filled with interesting pursuits and meaningful relationships, even if some of those pursuits (like his love of climbing) have now been foreclosed. In light of this, we as readers believe it would certainly *not* be a mercy to end Bran's life. On the contrary, it would be a seriously immoral thing to do to him.

Even if he is wrong (and with sinister motives to boot) regarding Bran, Jaime's suggestion is worth considering more generally. It is certainly true that the concept of mercy—understood as acting with compassion and care for someone else's well-being—is important when we are faced with life-and-death decisions, and in the end it may be morally decisive. On the grounds of appealing to mercy, there certainly seem to be dire medical decisions where Jaime's reasoning here—the choice of death—is morally defensible. In the late stages of a terminal illness, with death certain and every conscious moment filled with unmanageable pain, many choose to end whatever course of treatment is prolonging life in order to hasten death. We choose this course of action for ourselves, we choose it for our loved ones, and in the most tragic of situations, we choose it on behalf of our newborn children when their afflictions are hopeless. In all of these cases, our concern is for the well-being of the seriously ill person, and it is this concern for well-being that is at the heart of mercy.

Jaime Lannister's notion of mercy, however, is a bit different. When Jaime suggests that Bran's father "end his torment," and when he speaks of a preference for "a good clean death" over life as a cripple, he is probably not imagining Lord Eddard Stark asking Maester Luwin to stop caring for Bran so that his son may die gradually. Jaime is instead recommending something much quicker—a decisive stroke of Valyrian steel, delivered by House Stark's greatsword Ice, to bring an immediate end to Bran's life. This distinction among different acts of mercy maps closely onto an important conceptual distinction in biomedical ethics: the distinction between passive and active euthanasia. When needed life-sustaining treatment is withdrawn from a terminally ill patient, this constitutes passive euthanasia. In virtually every case we can imagine, passive euthanasia is a slower act of mercy than actively providing the patient with "a good clean death" by taking some definite action to end the patient's life (such as, for example, administering a lethal dose of a drug). When I remove some needed life-sustaining intervention from you—such as your ventilator or feeding tube—your death will occur only when you suffocate or starve to death. From the standpoint of mercy, once the decision has been made that death is preferable to life, avoiding the suffering that accompanies a slow, painful death certainly seems like the merciful thing to do. In this respect, perhaps we ought to follow Jaime's lead, and allow terminally ill patients to choose active euthanasia over passive euthanasia. This is, after all, the choice we make for our pets when they are deathly ill and we seek the most humane, merciful end.

Yet, while passive euthanasia is widely practiced and widely considered to be a morally permissible (and often morally praiseworthy) act, active euthanasia is far more controversial. The American Medical Association has consistently drawn a sharp distinction between the two practices. Its policy statement "Decisions Near the End of Life,"<sup>3</sup> initially adopted in 1991, affirms this distinction, explicitly permitting the withdrawal

and withholding of life-sustaining treatment in respecting the autonomous choices of patients, while forbidding both active euthanasia and physician-assisted suicide. This prohibition is sometimes justified on the grounds that there is an important moral distinction between killing and letting die. The idea is that while there can be cases where it is permissible to let someone die, killing is a morally different category.

Many philosophers have challenged this alleged moral distinction between killing and letting die. In his paper "Active and Passive Euthanasia," James Rachels (1941–2003) argues, like Jaime Lannister, that active euthanasia can be a merciful choice, and forbidding active euthanasia while permitting passive euthanasia is endorsing the course of action that causes more suffering once the choice of death has already been made.<sup>4</sup> And to those who recoil at the notion of allowing killing, Rachels argues that killing and letting die are in themselves morally equivalent acts. We fail to see this because killing is so often accompanied by other morally troubling factors (such as bad intentions, or a viciousness of character). But when we hold all of those other factors fixed, we find no moral distinction between killing and letting die; both are actions subject to moral evaluation given the details of the particular circumstances in question. Other contemporary philosophers, such as Dan Brock, have argued that the mistake is found in categorizing withdrawing medical treatment as merely letting die.<sup>5</sup> According to Brock, to kill is to intentionally cause death, however it may occur. Because passive euthanasia is intentional, and because it causes death, it is an act of killing, no more or no less than active euthanasia.

### **"You Love Your Children, Do You Not?"<sup>6</sup>**

Beyond this controversial distinction between active and passive euthanasia, other facts surrounding Bran's medical crisis also highlight important issues for biomedical ethicists.

One complicating feature of Bran's crisis is that he is, as we meet him in the first book, just seven years old. Imagine for a moment that Bran's medical condition were very different: instead of being crippled from a fall, imagine instead that Bran is afflicted with an aggressive metastatic cancer. His death is certain and soon, but some recurring treatment is prolonging his pain-filled life. When an adult is in such a state and chooses to terminate treatment, the moral justification for affirming that wish is respect for the patient's autonomy. Young children, though, are almost certainly not autonomous, or at least are not fully autonomous if we imagine autonomy as something that is attained gradually over time. So if respect for autonomy is paramount in justifying passive euthanasia, but children lack the capacity for autonomy, it might seem like the option of passive euthanasia is foreclosed for children.

This, though, is not the case. On the contrary, the choice of passive euthanasia is sometimes made on behalf of children by their parents. On reflection, this is not very surprising. After all, parents choose for their children in important matters, including medical decisions, all the time. Parents generally are charged with shepherding their children into adulthood, and prior to their children being regarded as autonomous decision makers, parents are responsible for safeguarding the well-being of their children. When children cannot decide for themselves, parents are empowered to decide for them, under the presumption that the decision is made with only the child's well-being in mind. In the tragic cases of deciding on death for their children, however, some of those choices are bound to be controversial. Consider the following two real-world cases of parents choosing death for their children:

1. In 1963 at Johns Hopkins Hospital in Maryland, a child is born prematurely, with both Down's Syndrome and an intestinal blockage easily corrected by surgery. Upon learning that the child was born with a mental handicap, the parents refused the surgery for the child,

who was then allowed to starve to death over eleven days.<sup>7</sup>

2. In 1980 at Derby City Hospital in England, a child named John Pearson, also born with Down's Syndrome, is also rejected by the parents because of this handicap and is therefore prescribed by the presiding doctor, Leonard Arthur, "nursing care only"—no nourishment, but water and a regular narcotic. John died three days later of bronchopneumonia. Dr. Arthur is charged with the baby's murder but found not guilty.<sup>8</sup>

It's not surprising that many have been upset by these cases. In all three cases—Bran Stark, John Pearson, and the Johns Hopkins case—a child is afflicted with a serious handicap, where the handicap forecloses a range of possibilities in life and makes a range of other actions and choices more difficult. But unlike, for example, the most severe forms of spina bifida, the handicaps in question are not so brutal and all-encompassing that they make life not worth living. There are handicaps that are so severe that they make any sort of decent life simply impossible; crippled legs and Down's Syndrome do not fall into that category.

Yet something else is true about these handicaps, something morally important that makes these kinds of life-and-death decisions far more controversial. In all three cases, the handicap in question places a significant burden on those charged with the care of the child, ordinarily the child's parents. (Bran's situation is a little bit more complicated.) Generally speaking, the act of burdening someone is not morally irrelevant, particularly when the burden is not desired. If I decorate my yard in a way that causes you to regularly have to clear debris from your yard, I have burdened you, and this is a morally important fact. You have a legitimate complaint against me, and if I fail to help relieve that burden, I have wronged you. Bran now lacks the use of his legs, and this imposes a burden on others,

a burden vividly illustrated by the way in which he is borne on Hodor's back in a kind of saddle devised by Maester Luwin. (The fact that a mentally handicapped servant is conscripted in order to be a kind of human beast of burden raises a range of interesting moral questions too!) While children with Down's Syndrome can certainly live a good long life, there is no question that caring for such a child is difficult, and so a burden on the child's parents.

The mere fact that these handicaps impose special burdens is not itself controversial, nor is the general fact that burdens matter morally. What *is* controversial, however, is the question of whether or not this fact of burdensomeness, particularly in the case of newborn children with serious handicaps, can ever legitimately be factored into the life-and-death decisions that parents make regarding their children. Bran has the good fortune of being born into a powerful family, descendants of the Kings of the North prior to the rise of the Targaryens. But we are reminded at various points in *A Song of Ice and Fire* that the game of thrones played by the powerful is a remote consideration for the average citizens of Westeros, who may live their entire lives without ever setting foot in a great city or laying eyes on royalty. What if Bran had been born into such a family? What if there were no maester to rig a riding device, no simple servant descended from giants for Bran to ride? What if the burden of his ruined legs on his parents was very high? Would the choice of "a good clean death" be morally permissible, even if it would, strictly speaking, *not* be a mercy?

The standard view regarding decisions made by parents on behalf of their children is that the only morally relevant consideration is the welfare of the child; all other considerations, including how burdened the parents may be by the child's condition, must be put aside. But in practice, depending on the details of the particular family situation into which the child is born, the burden may seem a difficult thing to simply disregard. Beginning with Duff and Campbell's "Moral and Ethical

Dilemmas in the Special-Care Nursery" in 1973, some have argued that given the great variability in prognoses, the capacity of families to manage the care of handicapped children, and the availability of social support, we ought to acknowledge the moral importance of burdensomeness and allow it to factor into life-and-death decisions made by parents for their children.<sup>9</sup> Critics of this view worry that there is a kind of slippery slope created by legitimizing this consideration. Once we allow children to be euthanized for being burdens on their parents, it becomes hard to avoid the fact that, in a certain sense, *all* children are burdens, and distinguishing among burdens is a perilous business.

### "When Will He Be as He Was?"<sup>10</sup>

Throughout this discussion of the various moral issues surrounding Bran's medical crisis, it has remained the case that his handicap, though serious, does not rise to the level of justifying a mercy killing. As readers, we are outraged by Jaime Lannister's suggestion, and it serves to reinforce the early impression we have of the villainy of the Kingslayer. Later in *A Game of Thrones*, we witness a mercy killing, carried out by Daenerys Stormborn, the soon-to-be the Unburnt, Mother of Dragons, against her husband, Khal Drogo. Yet as readers, this act does not lead us to condemn Dany. If anything, we admire her for making the hard choice, and we accept it as a legitimate (and perhaps the morally best) course of action. Setting her act against the proposed mercy killing of Bran Stark may help us sort out our moral intuitions regarding hard life-and-death decisions, but it will also raise a new set of tricky moral issues for us to confront.

Here's what we know of Khal Drogo's medical crisis: The once-fearsome Khal, whose hair has never been cut because he's undefeated in battle, has taken a wound that has festered. The seriousness of his condition is illustrated in his fall from his

horse, because a khal who cannot ride cannot lead. As he edges toward death, his wife, Dany, desperately seeks the help of the maegi Mirri Maz Duur over the warnings of Khal Drogo's bloodriders. The maegi saves Drogo, but her dark magic costs Dany the life of her unborn son, Rhaego, the prophesied "Stallion Who Mounts the World." Furthermore, the Drogo that survives Dany's bargain with the maegi is utterly diminished. He is entirely uncommunicative, and his once-piercing stare is now blank. Yet we are left with this provocative observation from Ser Jorah Mormont as Drogo lies vacantly in the sun under buzzing bloodflies: "He seems to like the warmth."<sup>11</sup> Even in his severely compromised state, Drogo can seemingly still experience the pleasure of the sun, and he is in no apparent pain. Given the presumed permanence of Drogo's condition, Dany kills him, smothering him with a cushion.

Most readers are not horrified by Dany's act, or even bothered by it in the slightest. Yet, at first glance, she has just engaged in the premeditated killing of a defenseless human being. This sounds a lot like the worst sort of murder, and we regard murder as among the worst of crimes. So how does Dany remain a hero of our story? Well, Drogo's condition is not unlike a range of serious cases—from traumatic brain injuries to degenerative conditions that radically impair cognitive functioning—where someone is left utterly diminished from the person they once were. So our moral evaluation of Dany's mercy killing is bound up with much more than just this story.

One important feature of Drogo's crisis becomes clear when compared with that of Bran Stark's. When we are outraged by Jaime Lannister's suggestion that Ned Stark kill his son out of mercy, at least a part of our outrage has to do with the life that we expect Bran to be able to lead once he recovers. No, he will never again climb the walls of Winterfell or run across its grounds. But there is still every reason to believe that he will engage in meaningful relationships, pursue sophisticated projects, and generally enjoy the range of goods that

characterize lives that are, one might say, distinctively *human*. But this phrase is deceptive, for there are a range of beings who remain in all respects biologically human, yet can never again (and perhaps never could in the first place) enjoy those pursuits in the way that beings like you and I can.

### "This Is Not Life"<sup>12</sup>

Consider the distinction between being a *human* and being a *person*. The former is a biological category, describing the biological makeup of a thing; the latter is a moral category, describing what kind of moral standing a thing has. In virtually all cases, those two categories overlap, but not always. We can, for instance, imagine beings who are not biologically human, but who are plausibly enough persons, given their cognitive sophistication and ability to engage in the kinds of projects and life plans that we recognize as distinctive in ourselves. Perhaps the race of giants beyond the Wall or the legendary Children of the Forest fall into this category. And following this reasoning one step further, we might imagine beings who are biologically human but not persons, unable to fulfill the criteria (whatever they are) for personhood. Drogo is drawn to the sun, but so are plants, reptiles, and a range of other nonpersons. If there is nothing more to say about the life he can lead, then perhaps he is not a person any longer, and Dany's mercy killing is not an act of murder. Murder is the premeditated killing of an innocent person, and there is a great moral difference between intentionally killing my neighbor and intentionally killing the mosquito that has landed on my arm. Whatever else is true about my neighbor and the mosquito, one is a person, the other is not, and this distinction is of paramount moral importance.

The question of what it is to be a person has been pursued, perhaps most deeply, in the literature on abortion. Insofar as fetuses are, without question, biologically human, some philosophers have defended the moral permissibility of abortion

by attempting to show that fetuses are not persons, and so the killing of a fetus fails to take on the moral importance of the killing of a person. Michael Tooley, for example, identifies self-consciousness—having a conception of oneself as a continuing subject of experiences—as the fundamental criterion of personhood.<sup>13</sup> Similarly, Mary Anne Warren identifies a list of five criteria (consciousness, reasoning, self-motivated activity, the capacity to communicate, and the presence of self-concepts), and argues that some unspecified number of these amounts to personhood. Importantly, whatever entity lacks all five is not a person.<sup>14</sup> Critics of the moral permissibility of abortion have responded with different accounts of our moral specialness. Don Marquis, for example, has argued that the serious wrongness of killing beings like you, me, and fetuses has to do with the way it deprives something of a “Future like ours,” a deliberately vague concept meant to broadly capture the range of projects, pursuits, and relationships that make our lives distinctive.<sup>15</sup>

Without presently taking a stand on the moral status of abortion, it is interesting to note that on all of these accounts, both defending and rejecting the permissibility of abortion, Dany’s killing of Khal Drogo is certainly *not* the killing of a person, and so, not murder. On the flip side, if Ned Stark had heard and taken Jaime Lannister’s advice to kill Bran, that would have been the killing of a person. So this distinction regarding the nature of personhood is helpful in making sense of the different moral responses we have to the prospect of a mercy killing in the medical crises of Khal Drogo and Bran Stark. But where does this reasoning take us?

Contemporary philosopher Peter Singer has famously and controversially argued that the killing of a significantly disabled infant is not the killing of a person. While these infants are clearly biologically human, they lack the qualities that make something count as a person.<sup>16</sup> For Singer, such killings would clearly fail to count as murders, and in many cases, these killings

would not be wrong at all. If the disability in question is one that leads to a life of significant pain and discomfort, then as radical as Singer’s claim might seem, the case he describes is actually less controversial than Drogo’s killing, assuming that the mental states of Drogo and the infant are roughly equivalent. Drogo is in no pain, and while Drogo may not now be a person, he has the possible advantage of having been one once (though whether and how much of an advantage this might be is also controversial).

If we still recoil at Singer’s position, what are we to make of our response? Is it, in the end, the residue of an irrational taboo that we ought to bring to light and reject? Or should we look further into the moral features of these cases—questions of quality of life, of burdensomeness, of personhood—and perhaps beyond them, into other morally important considerations? In philosophy, as in these profound and life-altering decisions that we sometimes face, answers are rarely easy. But cases like the medical crises of Bran Stark and Khal Drogo allow us to plumb the depths of these difficult matters.

## NOTES

1. George R. R. Martin, *A Game of Thrones* (New York: Bantam Dell, 2005), p. 91.
2. *Ibid.*
3. Council on Ethical and Judicial Affairs, American Medical Association, “Decisions Near the End of Life,” *Journal of the American Medical Association* 276 (1992), pp. 2229–2233.
4. James Rachels, “Active and Passive Euthanasia,” *New England Journal of Medicine* 292 (Jan. 1975), pp. 78–80.
5. Dan Brock, “Voluntary Active Euthanasia,” *Hastings Center Report* 22 (Mar./Apr. 1992), pp. 10–22.
6. Martin, *A Game of Thrones*, p. 486.
7. J. M. Gustafson, “Mongolism, Parental Desires, and the Right to Life,” *Perspectives in Biology and Medicine* 16 (Summer 1973), pp. 529–533.
8. Helga Kuhse, “A Modern Myth: That Letting Die Is Not the Intentional Causation of Death,” *Journal of Applied Philosophy* 1, no. 1 (1984), pp. 21–38.
9. Raymond S. Duff and A. G. M. Campbell, “Moral and Ethical Dilemmas in the Special-Care Nursery,” *New England Journal of Medicine* 289 (Oct. 1973), pp. 890–894.