**A Critique of Euthanasia from the Perspective of Ubuntu (African) Notion of Mutual Care**

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**Abstract**

The central problem of the phenomenon of euthanasia is the question of whether or not human life has intrinsic value that should be unconditionally preserved. From a humanistic and liberal stand point, proponents of euthanasia argue that every human being with rationality, emotions and will should not be compelled to undergo unnecessary, prolonged, and dehumanizing suffering from terminal illness. Most opponents argue that killing of terminally ill persons on grounds of compassion is immoral. Using Ubuntu ethics of mutual care, we aim at demonstrating that euthanasia is unacceptable in most African societies. We argue that, within Africa, terminally ill persons are useful in the community in the sense that their condition provides the family members an opportunity to show how they care for them. We also contend that instead of euthanasia, African traditional medicine plays a great role in curing the terminally ill.

**Keywords:** Ubuntu, African ethics, mutual care, terminally ill, euthanasia.

**Introduction**

When is it right to die? Is it at the moment of birth? Is it at old age? Is it when you no longer see life comfortable? Is it when you have fatal accident? Or is it when you are terminally ill? Existence presupposes that one has life. Life is not just a precious gift from God, it is a fundamental good that should be cared for, protected and preserved. “..human life is a supreme value with inherent dignity. Human life is therefore perceived as sacred and inviolable” (Ojong 2016 v). Any attempt to deny a person's inalienable right to life is a direct attempt to dehumanize, debase and destroy the dignity of that person (Enyimba & Nweke 2018, 3). Based on this, humans have this natural inclination and instinct manifested in their desire to elongate, promote, protect and preserve life. Asouzu confirms this when he asserts that “every human being has a natural instinct for the preservation of life (24).

The sacredness, sanctity and inviolability of life is preached and upheld in all cultures, religion and political societies. Within the political sphere for instance, “the primary foundation for the formation of a political society is the protection, promotion and preservation of human well-being” (Locke 1945, l 84). Locke further stressed that, “The state of nature has a law of nature to govern it which obliges everyone, and reason which is that law, teaches all mankind who will but consult it that being equal and independent, no one ought to harm another in his health, liberty, or possession, for men being all the workmanship of one omnipotent and infinitely wise maker...” (1945, l23). This implies that the sanctity, inviolability and inherent dignity of human life is self-evident to human reason. For instance, the constitution of the federal republic of Nigeria as amended, states in section 33-(l) that “every person has a right to life, and no one shall be deprived intentionally of his life” (29).

African Philosophers have also buttressed the fact that Africans have deep reverence for human life. Accordingly, Mesembe I. Edet asserts that “Several African philosophers have identified respect for human life as one of the core traditional African cultural values..., the value of the sanctity of human life is at the apex of the hierarchy of values of the traditional African experience of values.” (2012, 177). The implication of the foregoing is that Africans see human life as inherently good, a supreme value that must be desired, protected, groomed and preserved for its own sake. Little wonder Iroegbu emphatically states that, Africans reverence human life from its conception to its demise. Human life is “elaborately celebrated in pregnancy, birth, naming and initiation ceremonies. Its growth and continuity is feasted in adulthood and adolescence rites, family rites and communal festivities, its end is buoyantly celebrated in death rites, departure rituals, and funeral festivities” (1994, 84). Consequently, human beings, both individually and collectively, from time immemorial have tirelessly continued to search for ways to protect, improve, and preserve the dignity of human life. Human wellbeing is therefore the invisible wheel that propels the activities of human beings (Ideyi 2007, 164).

One aspect of human endeavours that has human life as its primary subject matter is the bio-medical sciences. The bio-medical sciences have over the years made many discoveries in both preventive and therapeutic medicines that have enormously helped not only to protect the dignity of human life but also to promote the quality and duration of human life on earth. In spite of the advanced strides of the bio-medical scientists, they are yet to conquer death. Human beings still suffer and die. Some of the diseases that plague human beings are terminal and chronic. It is important to note that, while some countries kick against the practice of euthanasia, other countries embrace it as a welcome development. Thus, there are few countries in the world where euthanasia is legally practiced. These include: Switzerland, Belgium, Netherlands, Luxembourg, India, Colombia, Mexico, and Ireland. Interestingly, some states in America practice euthanasia. These include: Oregon, Washington, Montana and Vermont. Australia has stopped the practice.

At this point one notes that, what is today known as euthanasia is the intentional termination of human life on grounds of certain medical conditions. Euthanasia is one of the earliest issues that led to the emergence of medical ethics as a distinct, very significant and controversial philosophical sub disciplines. We shall appropriate Ubuntu (African) ethics of mutual care to argue against the practice of euthanasia. Ubuntu refers to the idea that a person is a person because of other people. “It is only through the values of life of the community that we become persons" (Ikeke 2011, 97).

Thus, to achieve the aim of this study, we begin with a clarification of the meaning and nature of the concept of euthanasia, and an exposition of arguments against and for it. Next, we expose the nature of Ubuntu ethics and show that the principle of mutual care is an important aspect of Ubuntu(African) ethics. Lastly, using Ubuntu notion of mutual care, we demonstrate that the practice of euthanasia is discouraged in African societies.

**The Notion of Euthanasia**

Etymologically, “euthanasia derives from the Greek word, “eu-thanatos” which literally means “good death” (Davis 2008, 195). Davis further defines “Euthanasia... as ‘the deliberate killing of a person suffering an illness believed to be terminal, ostensibly out of "mercy” (2008,195)*.* The emphasis in this definition lies in two things.  
First, ‘deliberate killing’ and second, ‘out of mercy’. In a similar sense, Ijezie holds that, “euthanasia is the intentional killing of someone suffering from an incurable or agonizing illness by lethal agents or means” (2009, 113). The emphasis here is “intentional killing” “incurable or agonizing illness" and "by lethal means”. Furthermore, Fagothey holds that “Mercy Killing or *euthanasia,* is the giving of an easy, painless death to one suffering from an incurable or agonizing ailment” (1986, 247). In line with this meaning, Peschike holds that “The word euthanasia or mercy killing commonly means the intentional killing of a tormented, incurable patient by lethal agents or means” (2009, 328).

Additionally, A. F. Uduigwomen and Godfrey Ozumba present to us a contemporary meaning of euthanasia useful to this work. Thus, for Uduigwomen, “euthanasia has sometimes a wide usage which extends to the painless annihilation of so-called good-for-nothing or undesirable elements in the society” (2003, 115). Ozumba on his part emphasized that “we must bear in mind that euthanasia is not suicide per se and is not abortion. Euthanasia may well be understood as an attitude, a disposition and a bearer of certain good motive” (2003, 140). Euthanasia has been classified into various forms. These include: active, passive, voluntary, involuntary and non-voluntary euthanasia.

Active euthanasiais aform of euthanasia also known as positive or direct euthanasia. It involves the killing of a patient. Consequently, the active cause of the patient’s death is the intervention of the physician and not the sickness of the patient. This involves an inescapable responsibility of the physician, because one is always responsible for what one is actively doing (Peschike 2009, 328-329). Passive euthanasia is another form of euthanasia also known as negative or indirect euthanasia. This type of euthanasia involves letting a patient die. Garrard and Wilkinson explain passive euthanasia as involving the intention to hasten death in a patient’s interest (because of their expected negative quality of life). For them, passive euthanasia involves withdrawing or withholding life- prolonging medical treatment (2005, 64-65).

Voluntary euthanasi**a** is the form of euthanasia carried out specifically at the patient’s request. Voluntary euthanasia is generally understood to mean euthanasia at the request of the patient. (Keown 2004, 9). Voluntary euthanasia is also called assisted ‘suicide’, or mercy death. Involuntary euthanasiaon the other hand, occurs when the death of the patient is caused by those around him/her against his/her will or wish to live. Paterson Craig holds that “Involuntary euthanasia adds to the wrong of intentionally killing a patient, the further injury of consciously acting against the patient’s will... the intentional killing of a patient against his or her will may be achieved by action or omission or by some combination.” (2008, 148). Here he believes that the decision may be informed by the fact that the patient’s life is not worth living.   
Non Voluntary euthanasiais yet another form of euthanasia which occurs when the person is unconscious, incapacitated to the point of not being able to reason for oneself or otherwise unable to make a meaningful choice between living and dying and an appropriate person takes the decision on their behalf. Noteworthy is the fact that non-voluntary euthanasia also involves intentional killing. Thus, “non-voluntary euthanasia entails the intentional killing of   
a person who has not expressly consented to the ending of his or her life” (Paterson 2008, 148).

At this point, it is pertinent to expose some of the arguments for and against euthanasia in order to enable us employ Ubuntu notion of mutual care to align with opponents of euthanasia. For instance, it has been argued on financial and economic grounds that sick people with brain damage or malfunctional vital organs are burdens on their family members and on society financially and economically. Hence, it is not wrong to allow them to die in order to be free from the financial burdens they create for their family and society. It is also argued that, if euthanasia is allowed, suicide would be reduced in that some critically ill patients, who take their lives in secret and incriminating loved ones, would have died through mercy killing.

Another argument from the idea of utilityholds that, when a patient becomes so useless or worthless that he/she can do no more good to either himself/herself or to others, it is better to terminate his/her life because the person will die anyway. Those who argue for euthanasia also base their argument on Mercy. According to them, it will be merciful to end the life of such a patient who merely exists as a vegetable. Alleviating suffering is another argument for euthanasia. A person who is suffering from terminal sickness or disease and wishes to die because of the   
suffering and pain he or she undergoes, his wish should be respected to end the person’s pain.

Similarly, moral or ethical argument for euthanasia appeals to the need to respect the sufferer’s autonomy (freedom to choose to die), and to allow the individual value “quality of life” over “sanctity of life” by reducing reliance on life support systems and advanced medical knowledge. Another argument is that which is based on right to self- determination and right to liberty respectively. With regard to Right to self-determination, those who argue for euthanasia believe that “individuals have a right to choose their own treatment and act as the judge of their own best interest.” (Orlando 3). With regard to Right to Liberty, those who argue for euthanasia believe that, legalization of euthanasia based on liberty involves “concerns for the personal autonomy and freedom of choice of individuals...” (Butler, etal 2).

There is an argument from the notion of human dignity. This argument stems from the health condition of the critically ill patient that has become so bad that allowing him to continue living will be keeping him in a dehumanizing condition. Those who argue from the perspective of human dignity believe that it would be better to help to help such a person to die with dignity. From the point of view of Christian religion, the Catechism of the Roman Catholic Church, num 2278 states that, discontinuing medical procedures that are burdensome, dangerous, extraordinary, or disproportionate to the expected outcome, can be legitimate, it is the refusal of over-zealous treatment.

On the contrary, several arguments have also been raised against euthanasia. The theory of vitalism for instance, is totally against killing of any sort but is in support of preserving life at all cost. The idea of sanctity/inviolability of life has been used to argue against euthanasia. This is because life must be respected and not ignored or relegated to the background whether a person is critically sick or at the point of dying. Most people who argue against euthanasia belief strongly that euthanasia is murder because it involves killing of a human person. Euthanasia is murder and it is even forbidden in the scripture because it is a violation of the sixth commandment: “thou shall not kill.” (Ex 20:13). Moreover, it is the divine creator of life that gives life and can take it away.

Again, the possibility of scientific discovery of a new cure and the possibility of miracle for a patient’s disease provide good reason for not taking away life by euthanasia. There is a saying that ‘once a door is open for one, then it is open for others.’ If mercy death which is carried out at the request of the patient is authorized or given moral sanction, the next step will be mercy killing, that is, decision to kill will be readily made by others for those unable to request death for themselves.

**The Notion of Ubuntu Ethics**

Ubuntu is a Ngun Bantu (South Africa) term meaning “humanity”. It also means “humanity towards others”. Ubuntu believes in the universal bond that connects all humanity through mutual sharing, respect and caring. Ubuntu is in contrasts to Rene Descartes “I think therefore, I am”. This contrast is seen in the assertion that “I am because you are”. Ubuntu is part of the Zulu phrase “Ununtu ngumuntu ngabantu” which literally means that “a person is a person through other people.” Ubuntu means common humanity where the whole community is seen as one. That is, you and me both form the basis of society.

Desmond Tutu is believed to be the modem proponent of Ubuntu. He describes a person with Ubuntu as “open and available to others affirming others... having a proper self-assurance”. That is to say, what this person posses comes from a greater whole. According to him, a person with Ubuntu is open and available to others, affirming of others, does not feel threatened that others are able and good, for he or she has a proper self-assurance that comes from knowing that he or she belongs in a greater whole and is diminished when others are humiliated or diminished when others are tortured or oppressed. What this implies is that one cannot exist as a human being in isolation. It also means the interconnectedness of all and sundry. That is an individual cannot separate himself from the whole. He must be generous and caring to others. According to Nelson Mandela, a traveler through a country would stop at a village and he didn’t have to ask for food or for water. Once he stops, the people give him food, entertains him. That is one aspect of Ubuntu but it also has various aspects. Ubuntu does not mean that people should not enrich themselves. The question rather is, are you going to do so in other to enable the community around you to be able to improve? If the answer is yes, then it is within the purview of Ubuntu ethics.

Within Zimbabwe, the first Major or philosophical publication dedicated to Ubuntu as a philosophical concept appeared in 1980 titled Hunhuism or Ubuntuis by Stanlake J. W. T. Samkange. He highlights the three maxisms of Flunhuism or Ubuntuism that shapes this philosophy. They include:

1. To be human is to affirm one’s humanity by recognizing the humanity of others and on that basis, establish respectful human relations with them.
2. If and when one is faced with a decisive choice between wealth and the preservation of life of another human being, then one should opt for the preservation of life.
3. The king owed his status, including all the powers associated with it to the will of the people under him.

In Malani, Ubuntu can be seen as Umunthu. According to Thomas Msusa, the African worldview is about living as one family, belonging to God. Msusa noted that in Africa we say “I am because we are”. He further noted that when you are on your own you are as good as an animal of the wild, when there are two of you, you form a community. The philosophy of Umunthu has become a proverb rendered as “your neigbour’s child is your own, his/her success is your success too.” For Etieyibo Ubuntu is the basis of African ethics, “Ubuntu is concerned with humanity and it gives us a different way of looking at the issues of ethical conduct.” (2011, 127). According to Ramose,

*Ubuntu* is actually two words in one. It consists of the prefix *ubu and* the stem *ntu. Ubu* evokes the idea of be-ing in general. It is enfolded be-ing before it manifest itself in the concrete form or mode of existence of a particular entity. *Ubu* as enfolded being is always oriented towards unfoldment, that is incessant continual forms and modes of being. In this sence, *ubu* is always oriented towards- *ntu...* whereas - *ntu* as the nodal point at which being assumes concrete form or a mode of being in the process of continual unfoldment may be said to be the distinctly epistemology. (2005, 36).

Ramose further explains that *“Ubu-* and *-ntu* are two radically separate and irreconcilable opposed realities. On the contrary, they are mutually founded in the sense that they are two aspects of being as one-ness and indivisible who1e-ness” (2005, 36). Wholeness here implies everyone. That is common good. This means that wholeness involves humanity and humanity demands humaneness. “Ubuntu understood as being human (human-ness); a humane, respectful and polite attitude towards others. …(Ramose 2005, 37). Ramose further stressed that to be human being is to affirm one’s humanity by recognizing the humanity of others and, on that basis, establish humane relations with them” (2005, 37). Thus, Ubuntu fosters human relationship. This relationship is expressed with others and the community in general. A person with Ubuntu, is available to others, a person with Ubuntu affirms others, and as such does not feel threatened that others are good towards others, a person with Ubuntu has self-assurance knowing that he/she belongs to a greater whole. A person with Ubuntu feels humiliated when others are oppressed. A person with Ubuntu is not individualistic in nature but looks at the common good as a priority. Thus, “The idea of the common good refers to a common source of collective legitimization beyond the dictates of the ego. This basis of collective legitimization always entails a dimension of common ownership that makes provision for the needs of others” (Asouzu 2007, 380). The point Asouzu is trying to make is that, common ownership and providing for others forms the basis of Ubuntu. Providing for others implies caring for others. Etieyibo affirms this when he asserts that,

Ubuntu is concerned with collective wellbeing… Ubuntu encourages developing a shared concern, individuals basically think about communal wellbeing rather than individual wellbeing… Ubuntu does not take the wellbeing of the individual as the appropriate standpoint of decision but the common good… Ubuntu does not endorse the view that one can improve their own lives at the expense of others…(2011, 125)

How can Ubuntu notion of mutual care serve as an argument against the phenomenon of euthanasia? It is crucial to know what Ubuntu notion of mutual care is all about before using it to argue against euthanasia.

**Ubuntu (African) Notion of Mutual Care**

Ubuntu ethics has some moral values or virtues which guide harmonious living. These values include mutual respect, mutual caring, mutual sharing, honesty, co-operation, empathy, fairness, compassion, reciprocity, hard work and harmonious living etc. Our interest here is with mutual caring. Care or caring has to do with the feeling and exhibition of concern and empathy for others. It has to do with showing compassion, kindness and love towards others. Caring implies providing for others, assisting others.

Within Ubuntu ethics, Etieyibo holds that “Ubuntu espouses the values of caring… integral to the flourishing of the individual and community” (2011, 127). He further stressed that Ubuntu fosters collaboration and solidarity, it does not set up one person against another. In encouraging everyone to communally care about others, it encourages that we all work out together solutions to our problems, whether social or economic (2011, 126). Care becomes one of the yardsticks for living together. Mutual care or caring has to do with love, kindness, compassion, responding and finding alternative to the needs of others in order to flourish the well-being of each other. Within the African context, caring is an integral part of the African people when it comes to the sick. Africans care for the sick until the point of death. This is why we argue in this work that from the point of view of mutual care, euthanasia is not permissible within the African traditional society. This is because life is an important value and should be preserved.

**Argument against Euthanasia using Ubuntu (African) Notion of Mutual Care**

The issue of euthanasia arises when a person that is terminally ill places burden on the family members either because of the expenses they incur or the psychological stress they go through. Western and traditional African societies are concerned with issues relating to the sick especially the terminally ill. While western societies may support the discontinuance of treatment of the sick as seen in the Dutch laws, no African country has legalized euthanasia. Consequently, in traditional African societies, the relatives of the terminally ill patient will for instance, not discontinue treatment even though that may be the last option. If euthanasia is an option, what will be the essence of African Traditional Medicine (A.T.M.)? Mutual caring thus becomes very necessary for the terminally ill patient. In caring for the sick, the family members, the community, the traditional doctors, African Traditional Medicine (A.T.M.) and the ancestors all play an important role respectively. We contend that mutual care plays an essential role in the healing of the terminally ill patient, such that euthanasia which is the medical killing of the terminally ill becomes an anathema in African society.

What will be the value of Traditional African medicine if euthanasia is the last resort? Before the influx of western medicine, Africans cured themselves through their herbal medicine. Africans are still finding cure to the various ailments through their traditional herbal medicine. Within the context of Ubuntu, traditional African medicine preserves the humane and compassionate dimension of the African community. (Ramose 2005, 71). Traditional medicine is against the exchange of mutual care for uncompassionate euthanasia. Ramose stresses this when he lamented the emigration of mutual concern, mutual care and compassion for one another to the unsympathetic, formal and uncompassionate structures. Traditional medicine is against this kind of emigration. The emphasis here is compassion, concern and care. Through traditional African medicine, the sick is shown love by the family members, community and native doctors. The thought of euthanasia is completely ruled out within the African society.

The sick is also perceived to be useful within the African Society. Everything and everybody is important. Plants and animals are significant. The dead and ancestors are vital. The terminally sick is also useful. Useful in the sense that it gives the family members an opportunity to express love, care, concern and compassion to them. Also it gives the African native doctors an opportunity to discover more African medications. As such no human being is completely useless.This means that if and when a choice must be made between preserving the life of a human being and making wealth then the former must be preferred and prevail… this means that no single human being can be thoroughly and completely useless. For this reason, even the demented still have a meaning in life, otherwise the ancestors would provide for their passage out of this world. (Ramose 2005, 70).

The implication of this is that Africans care for the sick and do not see it as inconveniencing. Within the traditional African society, caring does not require the law. In fact, it is against the African communal settings not to care for one another. Law is meant to guide human conduct within society. That is, law helps regulate human behavior. Laws have been formulated as to whether someone who is critically sick should be killed mercifully through euthanasia. Some western countries have legalized euthanasia. But it should be reemphasized that no African country has legalized the practice of euthanasia. “The significance of this observation is that it is unnecessary, particularly in the case of illness and diseases, to invoke laws in order ensure the provision of care and possible cure” (Ramose 69). If laws are formulated within the African society to kill the terminally sick, where lays the value of mutual care which is highly placed and cherished by Africans? Consequently, it is very necessary to care for the sick especially the terminally ill and unnecessary to formulae laws to kill the terminally ill.

The African life is communalistic in nature. The individual identifies with the family and community. As such, “the individual is recognized from the perspective of the wholeness in the form of the wider community” (Ramose 2005, 68). For Ramose, medical care in traditional African society has to a large extent been provided without recourse to… separated or isolated… centers (Ramose 2005, 69).This implies that hospitals, asylum centers etc. make the individual isolated or separated from the community. Medicine is not only a yardstick for healing, proper care plays an important role. When proper care is given to the terminally ill by the family or community, euthanasia will be uncalled for.

Within the African society, terminal illness may be as a result of an offence against the ancestors. The ancestors are believed to be the living dead. When a person dies within the African society, he/she automatically becomes an ancestor. Ancestors are believed to be close to the gods. Ancestors are believed to intervene for the living individual or community in general. If a person is terminally ill within the African society, it is believe that he may have offended the ancestors. Through incantation and pouring of libation, the family members or community can find out from the ancestors “…what wrong the victim has done to deserve such an affliction” (Ramose 2005, 69). If the sick person has committed an offence against the ancestors or the gods, “the effect of this report should be a cure in the sense that the healthy member of the family will then do what is necessary to appease the ancestors” (Ramose 2005, 69). On the contrary, “…the members of the family of the victim - patient will continue to share the burden of the illness until the victim-patient is cured or dies at the pleasure of the ancestors” (Ramose 2005, 70). This shows that euthanasia is not the last resort.

**Conclusion**

Through development and advanced technology, human life has been improved through medicine, agriculture, better housing, better means of moving for one place to another and better ways of recreation. Despite all these, humans still suffer and die. Human beings still go through dehumanizing ailments like brain damage, kidney failure, paralysis, liver failure, etc. Based on these terminal sicknesses, most countries have opted for euthanasia, medical killing of a patient.

We have argued that the value of life is sacrosanct and should not be tempered with. We demonstrated that no African country has legalized euthanasia at the time of this research. We appealed to Ubuntu ethics to argue against euthanasia. The philosophy of Ubuntu states that “I am a person through the community or I am because we are”. Using Ubuntu’s notion of mutual care which has to do with love, kindness, compassion, responding and finding alternative to the needs of others in order to flourish the well-being of each other, we argued that euthanasia is not permissible in Africa. This is so because in Africa even the terminally ill is useful and as such, the family members of the sick are given the opportunity to show love, care and concern to the terminally ill. We further demonstrated that African medicine and the ancestors play a great role in curing the terminally ill, thereby giving no room for the practice of euthanasia in African societies.

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