OVERVIEW

In 2005, after a protracted legal battle, Terri Schiavo was disconnected from life support and subsequently died. Terri had spent the previous fifteen years in a permanent vegetative state. The question at the center of the fierce, public debate over her fate—and the question students will try to answer in this unit—is whether the decision to discontinue life support for Terri Schiavo was justified or not.

Students will explore the profound ethical and philosophical implications of this case and enhance their critical thinking skills.

LEARNING OUTCOMES

1. Learn how to use informal logic to critically examine arguments used to support ethical claims
2. Develop strategies to explore the meaning and philosophical significance of fundamental concepts such as “Life,” “Death,” “Person,” and “Right”
3. Assess the validity of information and facts presented as part of an ethical claim
4. Understand the ethical and philosophical implications of cases that involve life-extending technologies and surrogate decision-making

PROCEDURES AND ACTIVITIES

This unit uses a student-centered and interactive approach to teaching. Activities are designed to allow for a maximum degree of student participation and collaboration. Each activity is marked as an individual-, partner-, or group activity, or as a teacher-directed class discussion.

The following icons are used to designate the different types of activities:

- Individual Activity
- Partner Activity
- Group Activity
- Teacher-Directed Class Discussion
1. INTRODUCTION TO TOPIC

This introductory segment begins with a pre-assessment activity (a questionnaire), tapping into students’ previous knowledge of and personal experience with some of the issues addressed in this unit. Students will then be provided with basic information about the Terri Schiavo case. A class-discussion should give students an opportunity to share their first reactions about the case. At the end of this segment, students will take a vote on whether they believe the decision to disconnect Terri Schiavo from life support was justified or not. They will choose among: 1) Right decision; 2) Wrong decision; 3) Not sure. Another vote taken at the end of the unit will show if the students’ opinions about the case have changed.

Students will answer the following questions individually, and then discuss their answers with a partner. The questions listed here are just suggestions and may be altered or amended according to grade level, subject, and course focus.
1. Do you have personal experience with a person who is unconscious? Are you familiar with cases of people who are or were in a coma?
2. What can cause people to become unconscious, and what are some of the characteristic features of being in a coma?
3. Do you believe the life of a person in a coma should be sustained at all cost? Why? Why not?
4. Do you agree with the statement: It is never justified to knowingly inflict harm on another person? Why? Why not?
5. What makes you a person?
6. Are there certain rights that every person should have? What are they?
7. What are characteristic features of a good life? What could you not live without?
8. Can people ever be truly free? What are the limits of our personal freedom? How important is freedom to you?
9. When is it ok to make decisions for other people? When is it ok for other people to make decisions for you?
10. What would you want to happen to you if you were to fall into an irreversible coma?

Students will be introduced to the case of Terri Schiavo and provided with basic information about her life and the events that led up to her death.

In February of 1990 at the age of 26, Terri Schiavo collapsed at home and oxygen was cut off from her brain for several minutes. As a result, she fell into a coma. In May of 1990, she emerged from her coma but remained unconscious in a permanent vegetative state. Although severely brain-damaged, Terri Schiavo was able to breathe, and maintain a heartbeat and blood pressure on her own. While her vision was impaired, her eyes were open and functional and she could move her limbs. She needed a feeding tube connected to her stomach to sustain her life. For many years, Terri’s husband, Michael, and Terri’s parents worked with doctors to try to help Terri regain consciousness. However, years of rehabilitation failed, and Terri did not improve. Arguing that it would have been Terri’s wish to die, Michael, who was Terri’s legal guardian, sought to discontinue life support. Terri Schiavo’s family challenged this decision. On March 18, 2005, following a prolonged legal battle and media attention, her feeding tube was removed. Terri Schiavo died on March 31, 2005.

Ask students if they believe—based on the information above—that the decision to disconnect Terri Schiavo from life support was justified or not. At the end of this session, students should take a vote on whether they believe
the decision to disconnect Terri Schiavo from life support was: 1) Right decision; 2) Wrong decision; 3) Not sure.

2. EVALUATION OF ARGUMENTS AND ETHICAL CLAIMS

One of the aspects that make the public debates over Terri Schiavo’s fate so confusing (and difficult to assess) is the fact that they were not conducted by exchanging and comparing arguments, but rather by using short and often incomplete statements, individual words, or images. In this section, students will be introduced to some of the statements that reflect the different positions represented in this case. With the help of general rules of argumentation and basic informal logic, students will learn how to examine the arguments for implicit and explicit premises.

Show students a picture of these women protesting the decision to disconnect Terri Schiavo from life support and ask them what they believe they are trying to express.

A. PRESENTATION OF STATEMENTS USED IN THE SCHIAVO CASE

With a partner, students should organize the following statements according to whether they believe them to be in favor of, or against continuing life support for Terri Schiavo:

1. “Everybody has a right to life.”
2. “Terri’s emotions are gone…What’s there is a shell of Terri. There’s nothing there anyone.” (Michael Schiavo)
3. “She wouldn’t like to live like this and that’s all she’s doing – surviving.” (Michael Schiavo)
4. “I think society…has been confused over what compassion is. We’re here to love and take care of these people and not kill them.” (Bobby Schindler)
5. “Terri died 15 years ago.” (Michael Schiavo)
6. “...The intrinsic value and personal dignity of every human being do not change, no matter what the concrete circumstances of his or her life...” (Pope John Paul II)

Collect and discuss students’ findings. Ask students which of the statements they can identity with most, and why? What is it about the statement they find most compelling that makes it “better” than the others?

B. INFORMAL LOGIC

Students will be introduced to some basic elements of a traditional theory of argumentation (syllogisms) and informal logic. The goal here is by no means to give students a complete overview, but rather to illustrate that there are certain criteria to distinguish good arguments from bad arguments. For the purposes of this unit, students should be familiar with the concepts, listed below.

Syllogistic Arguments
Ask students which of the following arguments appears to be “better” than the other and why?

Picture Courtesy of Mike Wilson/Getty.
Argument 1
1. All men are mortal.
2. Socrates is a man.
3. Socrates is mortal.

Argument 2
1. All men are mortal.
2. Socrates is mortal.
3. Socrates is a man.

The difference between these two arguments is that the conclusion (3) of Argument 1 follows from the premises (1, 2), whereas the conclusion of Argument 2 does not. If the premises in the first argument are true, the conclusion is also true, whereas, even if the premises in the second argument are both true, the conclusion could still be wrong (e.g. Socrates could be the name of a dog.). While we may still have to check whether the premises in the left argument are true to decide whether the conclusion is also true, we already know that the second argument is “bad,” simply by looking at its form.

The form Argument 1 above is called a “syllogism.” A classic syllogism, as described by the Greek philosopher Aristotle in his “Prior Analytics,” is a logical argument that consists of a conclusion that is inferred from two premises.

Premise 1: All men are mortal
Premise 2: Socrates is a man
Conclusion: Socrates is mortal.

The special thing about a syllogism is that if all the premises are true, the conclusion is also necessarily true (independent of the content of the statements). In other words, as long as the premises are true, the conclusion of any argument that has the same basic structure as the argument above is also true:

Premise 1: All A are B
Premise 2: C is A
Conclusion: C is B

Informal Syllogisms
Whereas arguments can have the form of a formal syllogism, most arguments have the form of informal syllogisms. The main difference is that informal syllogisms are incomplete: they contain unstated assumptions (or “hidden premises”). The following is an example of an incomplete version of the formal syllogism above.

“Socrates is mortal because he is human.”

This argument is identical to Argument 1 above, but the second premise and the conclusion are stated, whereas the first premise is assumed but not explicitly stated:

Premise 1: All humans are mortal (assumed)
Premise 2: Socrates is human (stated)
Conclusion: Therefore, Socrates is mortal (stated)

The reason why this is important for evaluating arguments is because—as we will soon see—it can help us identify unstated assumptions that are necessary to support a conclusion, but may turn to be questionable or untrue. When evaluating the strength of an argument, we should always be on the lookout for assumptions and premises that may not be true.

For further information on syllogisms, see also: [http://en.wikipedia.org/wiki/Syllogism](http://en.wikipedia.org/wiki/Syllogism)

C. IDENTIFICATION OF KEY CONCEPTS USED IN THE DEBATE THAT REQUIRE FURTHER CLARIFICATION

As we determined earlier, Statement 1 above (“Everybody has a right to life.”) supports the position that Terri Schiavo should not be disconnected from life support. This statement is one of the premises of an argument that has the conclusion: “Terri Schiavo should not be disconnected from life support.” The question is: What are the other unstated assumptions or hidden premises are needed to support this conclusion?
Premise 1 (statement 1 above): Everybody has a right to life
Premise 2: Terri Schiavo is somebody
Premise 3: Terri Schiavo is alive
Premise 4: Terri Schiavo has a right to life
Premise 5: If somebody has a right to life, then he or she should be kept alive
Premise 6: Terri Schiavo should be kept alive
Premise 7: Disconnecting Terri Schiavo from life support would result in her death, i.e. she would not be kept alive.
Conclusion: Terri Schiavo should not be disconnected from life support

With a partner, students will try to construct arguments using the remaining five quotations above as first premises. See Appendix for examples. The conclusion of the argument is always either: “Terri should be disconnected from life support,” or “Terri should not be disconnected from life support.”

Collect and discuss students’ findings. Based on the arguments and premises, what additional information do we need to know (find out) whether the arguments are not only formally valid, but also sound? In other words, which of the premises are either factually questionable and/or contain words or concepts that are vague or ambiguous and require further clarification?

Working together again with a partner, students should identify at least three (stated or unstated) premises of the arguments they’ve developed that they believe to be questionable, either factually or conceptually. They should then formulate questions that would have to be answered in order to decide whether that particular premise is true or not.

Questionable Premise: “Everybody has a right to life.”
Possible Questions: Does everybody mean: all human beings, all persons? Does it include animals? What does it mean to “have” a “right”? Assuming they have it, can people lose their “right to life”?

Collect and discuss students’ questions. Organize students’ questions into five categories:
1. Questions about Terri Schiavo’s state:
   a. What state is Schiavo in?
   b. Is Terri dead already in any sense of the word?
2. Questions about her status as a person:
   a. Is she (still) a person? Is she the same person?
3. Questions about her rights as a person:
   a. Does she have a right to be kept alive, or a “right to life”?
   b. Does she have a right to die?
4. Questions about what is better for her, i.e. what is in her interest, what she would have wanted:
   a. What is in her best interest: to be kept alive or to be removed from life support?
5. Questions about who should make the decision:
   a. Who should decide for her?

3. CONCEPTUAL ANALYSIS

While the rules of argumentation and informal logic can help us examine an argument by identifying its hidden premises, and by examining its validity and soundness, the differences between the positions held in cases such as that of Terri Schiavo often run deeper. These differences are often the result of a different (and often deliberately vague or ambiguous) use or understanding of the key concepts in the debate. This is especially common in cases in which concepts are not clearly defined and have particularly broad meaning, or when they have different meanings in different contexts. Examples for such concepts on the Schiavo case are: “life,” “death,” “person” and “right.” In the second part of this unit, students will engage in an analysis and clarification of some of the key concepts used in the debate. Each
of these concepts and their philosophical significance will be examined independently and then applied to the Schiavo case.

The diagram below gives an overview of this part, showing the concepts as well as the essential questions (both case related and philosophical) discussed in each segment.

A. LIFE AND DEATH
The objective in this segment is to determine Terri Schiavo’s physical and mental state. While she is technically not dead, she nevertheless seems to be missing many of the characteristics we associate with a living person. But what exactly do we mean by “life” or “alive” and “death” or “dead”? Maybe the meaning of these terms is not as clear as it seems. Students will begin this segment by listing anything they associate with “life” and “death.” Based on their findings, they will then try to come up with a more general definition: What are the defining features of “life,” or “being alive,” and “death” or “being dead”?

Next, students will try to think of situations or states that are somewhere between being clearly alive (e.g. being awake, moving, responding, etc.) and being clearly dead (e.g. not mov-
describing it as that which it is not (e.g. not conscious, no brain-activity, etc.)?

With a different partner, students should come up with at least one example that would fit into the overlapping area between being alive and being dead. What are examples of experiences or conditions that do not squarely fall into one of the two categories?

Collect and discuss students’ findings. Students suggestions may include: sleep, coma, the unconscious, memory loss, people who died and were brought back to life (“near death experiences”), the time before you were conceived, the time after conception and before birth, etc.

In small groups, students will complete a worksheet, listing characteristics they consider to be typical for each of the following states or conditions. Ask students to fill out a chart like this:

<table>
<thead>
<tr>
<th>Awake</th>
<th>Asleep</th>
<th>Unconscious</th>
<th>In a Coma</th>
<th>Dead</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eyes open, moving, thinking, hearing, speaking, responding</td>
<td>Eyes closed, not moving (intentionally), dreaming</td>
<td>Eyes shut, deep sleep, dreams?, movement?, harder to wake up</td>
<td>Eyes shut?, dreams?, may not be reversible, movements?</td>
<td>No breathing, no movement, no pulse, no thoughts, no dreams</td>
</tr>
</tbody>
</table>

Collect and discuss students’ findings. Ask students which of the criteria they listed in each category indicates an “internal” and which an “external” perspective (i.e. which represents experiences of the person who is in any of these states (e.g. awake-thoughts, sleeping - dreams), and which are criteria that are observable from the outside (e.g. awake-eyes open, responding; sleeping - REM). Re-organize students’ findings on the board or in a new table:

**Internal Perspective**

<table>
<thead>
<tr>
<th>Awake</th>
<th>Asleep</th>
<th>Unconscious</th>
<th>In a Coma</th>
<th>Dead</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sensations, thoughts, hearing</td>
<td>Sensations, dreams</td>
<td>Sensations, dreams</td>
<td>Sensations?, dreams?</td>
<td>No thoughts, no sensations, no dreams</td>
</tr>
</tbody>
</table>

**External Perspective**

<table>
<thead>
<tr>
<th>Awake</th>
<th>Asleep</th>
<th>Unconscious</th>
<th>In a Coma</th>
<th>Dead</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eyes open, movement, speaking, responding</td>
<td>Eyes shut (mostly), breathing, pulse, brain activity</td>
<td>Eyes shut, breathing, pulse, brain activity</td>
<td>Eyes shut?, breathing, pulse, brain activity</td>
<td>No pulse, no breathing, no movements</td>
</tr>
</tbody>
</table>

The distinction between an “internal” and an “external” perspective is important because only when a person is awake can she communicate her internal perspective (thoughts, feelings, sensations, etc.) to another person. In all other cases, we rely solely on an external perspective to determine a person’s physical and mental state. While it may be relatively easy to tell whether a person is sleeping or unconscious (besides the fact that we can usually wake her or cause her to regain consciousness), this becomes a huge problem with people in a coma or a vegetative state. In these cases, it is much harder to use observations and measurable data to draw conclusions about that person’s internal state. (Distinguishing between an “internal” and an “external” perspective also reminds us that
we could, of course, find ourselves on the other side of the equation, i.e. in a coma or vegetative state, in which case the internal perspective would be ours).

Students will form small groups. They will be provided with information about criteria used to determine the type and severity of a coma or vegetative state. Information is available from the following websites:

- http://en.wikipedia.org/wiki/Glasgow_Coma_Scale
- http://en.wikipedia.org/wiki/Persistent_vegetative_state

Based on this information and what students already know about the case, they should try to determine the most accurate way to describe Terri Schiavo’s physical and mental state. Students may also be provided with additional resources about Terri Schiavo’s condition, including medical records, expert testimony, and accounts of family members. More information and links are available from: https://en.wikipedia.org/wiki/Terri_Schiavo_case

The activities in this segment may have confirmed students’ assumptions that Terri Schiavo is still alive, if only minimally, but does that also mean that we should still consider her a person?

B. PERSONHOOD AND PERSONAL IDENTITY

One of the reasons it is so important to determine Terri Schiavo’s physical and mental state is that it will help us decide whether she should be considered the same person she was before she fell into the coma, or whether she should be considered a person at all. To answer that question, students will first develop a better sense of what we mean by “person.”

Are all human beings automatically persons? If so, what about fetuses, severely mentally disabled people, or people—like Terri Schiavo—who are in a coma or a vegetative state? And, can only human beings be persons? If so, what about God(s), angels, cyborgs, certain animals (e.g. great apes), computers, unknown intelligent life forms, or an iPad to which all our thoughts and memories have been transferred? But even if we assume that Terri Schiavo is (still) a person is she the same person as she was before? And what makes anybody the same person he or she was at some point in the past?

Based on their findings and the results from the first segment, students will try to formulate an answer to the question of whether Terri Schiavo is a person or not: 1) She is a person. 2) She is not a person. 3) Not sure.

What makes you a person? (Answers may include: ability to think, freedom to act/choose, having a soul, etc.)

In small groups, students will compare their findings and try to come up with a general definition of “person”: “A Person is…” (Or, more technically: “Something is a person if and only if…”).

Collect and discuss students’ findings. Students should try to reach a consensus on what it means for something to be a person. Display definition in class on board or chart paper, for future reference. (Answers may include: human being, body, ability to think, language, ability to speak, ability to interact with others, etc.)

Based on their definition(s) and the previous
discussion, students will organize a number of items according to whether they believe them to be: a person, not a person, not sure.

They should organize these items: me, my partner, Shrek, my computer, a cyborg, God, your family pet, a chimpanzee, Spiderman, someone with complete amnesia, unknown intelligent life forms, a three-week old fetus, a five-month old fetus, a two-week old baby, your favorite teacher, your least favorite teacher…

<table>
<thead>
<tr>
<th>Person</th>
<th>Not a Person</th>
<th>Not Sure</th>
</tr>
</thead>
</table>

Collect and discuss students’ findings. Ask students if this exercise led them to re-think their definition of what a person is and why. The two crucial questions that should come out of this discussion are:

1. Are all human beings (automatically) persons?
2. Can only human beings be persons?

What about Terri Schiavo? It seems that it is at least possible that something can be a human being, but would not (not yet, or no longer) be considered a person. Based on our definition of “person,” our previous discussions and everything we know about Terri Schiavo’s state: Should she be considered a person or not? And if not: What about her has changed so much that would lead us to no longer consider her a person?). But even if we (still) consider her a person, is she still the same person? What makes any of us the same person we were at some point in the past?

Are you still the same person you used to be when you were 1, 3, 5, 8 years old (or yesterday, or a minute ago, for that matter)? What has changed? What stayed the same? When did you become a person, or the person you are now? What would have to change for you to become a different person, or cease to be a person?

Students will share and discuss their findings with a partner.

Students will present their findings to the class. Discussion questions: Do you continue to be the same person (or at least a person) during periods of sleep (or other less than completely awake states)? How about periods of time of which you have absolutely no recollection (e.g. as a fetus, or during the first few years of your life)? And: Do you continue to be the same person to yourself whenever you sleep, or only to others, or neither? If you went to sleep and were never to awake from that sleep, would you continue to be the same person (or a person), either to yourself, or to others? Why or why not? Does whether you continue to be the same person during sleep depend on whether you will eventually wake up (regain consciousness, come out of a coma) and continue to consciously be the same person you were before?

Based on all we know at this point, should Terri Schiavo be considered a person or not? One more thing to consider: Even if we assume that Terri is no longer a person, or at least not the same person: Should we still treat her as if she were the same person? Would your answer change if Terri were your daughter, your sister, or your aunt?
The reason this is such an important question is that if we believe that Terri Schiavo is (still) a person we are more likely to attribute certain rights to her (e.g. a person’s “right to life”), whereas we may be less likely to grant her those rights if we still think of her as a human being, but not a person?

C. A PERSON’S “RIGHT TO LIFE”

If we agree that every person has a basic human right to be protected from physical harm or death, wouldn’t a person in a “coma” or a “permanent vegetative state” also have to be protected by that right? And if so, what would lead her to lose that right? There are at least two categories of human beings, who may be considered exceptions: those that are still considered persons (e.g. enemy soldiers), and those that are not (not yet/no longer) considered persons (e.g. embryos). Does Terri Schiavo fall into either of these two categories? And if so, can the comparison help us understand her status? What could be other reasons why she may not be protected by the “right to life”?

Article 6.1 of the International Covenant on Civil and Political Rights says: “Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his [or her] life.”

Share with the students the above quote. Ask students whether they think that every person has or should have the right to be protected from physical harm or death. Why? Why not? What in the above quote suggests that there may be exceptions (“arbitrarily”)?

With a partner, students should try to think of possible exceptions to the rule. What could lead a person to lose the “right to life”? (Answers may include: people who receive the death penalty for committing heinous crimes, enemy soldiers, terrorists, embryos, unborn babies, etc.)

Students will discuss their findings among themselves and/or with the class. What in these cases would lead a person to lose the “right to life”? (E.g. having harmed or being about to harm other people, being involved in an armed conflict with another country, not or no longer being considered a person, etc.).

Based on the previous discussion, students should try to answer the question: Based on everything we know about her condition, what (if anything) could have led Terri Schiavo to lose her “right to life;” or, more accurately, the right to be kept alive? What, on the other hand, speaks for the fact that she still has that right?

Terri Schiavo has a “right to life”

<table>
<thead>
<tr>
<th></th>
<th>Pro</th>
<th>Contra</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pro: She is still a person, and she hasn’t lost the right to life, she is not a person, or not the same person, but she used to be a person and should still be treated like one, which includes having the “right to life.”</td>
<td>Contra: She is no longer a person, and only persons (not all human beings) can have a “right to life.” She is still a person, but not the same person she was before.</td>
</tr>
</tbody>
</table>

Collect and discuss students’ findings. Answers may include:

Pro: She is still a person, and she hasn’t lost the right to life, she is not a person, or not the same person, but she used to be a person and should still be treated like one, which includes having the “right to life.”

Contra: She is no longer a person, and only persons (not all human beings) can have a “right to life.” She is still a person, but not the same person she was before.
But even if we assume that she has the “right to life,” would she even have wanted to be kept alive? Would she have still considered her life meaningful? And if not, would she have chosen death rather than life? Which brings us to our next question: What is it that makes life meaningful and worth living?

D. QUALITY OF LIFE: WHAT MAKES LIFE MEANINGFUL?

How can we possibly know whether Terri Schiavo would have still considered her life meaningful, or not, or what she would have wanted to happen with her? Since she wasn’t able to communicate with us, there are only indirect ways to find out. First, we could look at evidence from her life before falling into a coma (e.g. written or oral statements, her beliefs, etc.) that may suggest how she would have felt about being in a coma. The other possibility would be to determine whether the life of any person in a permanent vegetative state can still be considered meaningful, or not and use that general assessment as the basis for a decision. We will first consider the second option. Students will list things that they consider to be most important for a meaningful life, and how losing those qualities may change the way they feel about their lives. They will then compare Terri’s life before and after falling into a coma, and use that comparison to determine whether they believe that her life—or that of any person in a permanent vegetative state—should still be considered meaningful, or not. Students will then look at evidence that was used by both parties in the legal dispute to show what Terri would have wanted to happen to her. Finally, students should decide—all things considered—whether or not it was ultimately in Terri Schiavo’s best interest to be removed from life support.

On a worksheet, students will list ten items representing things that make their lives meaningful, ranging from “most meaningful” to “less meaningful” (e.g. family, friends, music, NFL, clothes, Facebook, World of Warcraft, Love, Ben & Jerry’s ice cream, your pet, Philosophy Club, etc.)

Students will share and discuss their findings. Together they should try to come up with three items or categories of items that they both agree add the most meaning to their lives.

Students will share and discuss their findings with the class. What if some, or all, items on the list were taken away from you? What if your life stayed the same, but you had to live in constant pain? How would that change the way you view your life as a whole? Would your life still be meaningful? What would make you want to keep living (e.g. hope for improvement, being of service to others, etc.)?

At this point students should review the information in the introduction about Terri Schiavo’s life before and after falling into a coma, and possibly be provided with additional information about her life and more specific information about her
medical condition (brain activity, ability/inability to experience pain, chances for recovery, etc.).

Students will receive additional information about Terri Schiavo’s life before falling into a coma. Based on that information and the information about her physical and mental state (see previous segment), students should compare her life before and after falling into a coma. What are things that made her life meaningful or worth living before and after she fell into a coma?

<table>
<thead>
<tr>
<th>Before falling into coma</th>
<th>In a vegetative state</th>
</tr>
</thead>
</table>

Students will share and discuss their findings with the class. Based on everything we know about Terri Schiavo’s condition, do you believe that her life in a vegetative state was still meaningful? Whatever our answer is, can we assume that everybody would agree with our conclusion? Should our own view be used as a basis to make decisions in all cases similar to that of Terri Schiavo? Why could this option be problematic, or even dangerous? (Possible answers: every case is unique; there may not be a consensus even among experts as to the exact state of the patient, or the chances for recovery, etc.). And who should have the authority to establish such a general rule? (Possible answers: person, group of people, political body, etc.)

But maybe there is another option: Although Terri Schiavo wasn’t able to express her wishes while in a vegetative state, there may be evidence from the time before she fell into a coma that would indicate what she would have wanted to happen (living will, comments or statements, her general beliefs)?

Based on information used in the legal case, students should consider whether they believe that there is enough evidence for us to know what Terri Schiavo’s wishes were.


Is there sufficient evidence to infer whether or not Terri Schiavo would have wanted to be kept alive, and should that evidence be used to make a decision?

Based on all the considerations in this and the previous segments, do you think that it was ultimately justified to discontinue life support for Terri Schiavo? Or do you think she should have been kept alive?

Whatever conclusion we may have reached, it was obviously not up to us to make a decision. Which brings us to the last (and maybe most important) question: Who should decide in a case like that of Terri Schiavo whether to withdraw life support?

E. AUTONOMY: WHO SHOULD DECIDE?

Finally, independent of all the issues we have discussed in this unit: Who should ultimately make the decision for a person in a permanent vegetative state? Ideally, we would of course want a person to decide for herself (which is also what happens in cases where a person on life support is able to communicate her wishes). Or, a person may have left a “living will.” But without the patient’s ability to communicate with us and without any kind of “hard” evidence concerning her wishes, somebody
else will have to make the decision for her. In Terri Schiavo’s case, a court-appointed guardian ultimately decided what is best for Terri.

In the first activity of this segment, students will list areas in their lives, in which they decide, and those in which other people decide for them. Students will then explore the following questions: Would you prefer to make all decisions yourself? Are there cases in which you want other people to decide for you? Does it matter who makes the decisions for you? Who would you want to decide for you in situations that involve life and death, and why? Based on all these considerations, who would be the best person to decide for Terri Schiavo?

On a worksheet, give examples of areas of your life in which you are able to decide for yourself, and those in which others make decisions for you.

<table>
<thead>
<tr>
<th>I Decide</th>
<th>Others Decide</th>
</tr>
</thead>
</table>

Collect students’ findings. In which of these cases would you wish you could make your own decisions? In which cases do you want other people to make decisions for you? Why? Does it matter who makes the decision for you?

With a partner, students should discuss if there is a person in their lives they would trust more than anybody else to make important decisions for them (e.g. boy/girlfriend, mother, father, siblings, etc.), and why.

Students will share their findings and explain the reason for their choices. What makes the person they chose most qualified to decide for you? Ask students if they would trust the same person to make decisions for them if they were in a coma or a vegetative state, like Terri Schiavo. And if not, who would they want to make the decision instead (e.g. a physician or a group of physicians, a friend, a family member, a politician, the state, etc.)?

At this point, students should receive additional information about the people involved in the Schiavo case: Terri’s parents and brother, her husband, her legal guardian, then-Florida governor Jeb Bush, etc.

Students will split into small groups. Each group will be assigned one of the main players in the Schiavo case and will come up with arguments for why that person is the most suitable person to decide for Terri Schiavo.

Groups will present to the class. How does the fact that we have a personal interest in a situation, influence our views and decisions? Should the person who makes the decision be a friend or family member (spouse, mother, father, sibling)? Or should it be a person or group of people who has no personal connection to her (e.g. a physician, a group of physicians, a politician, a bioethicist, a group of bioethicists, etc.)?
4. CONCLUSION

Students will take another survey to see if their opinions have changed

Ask students what led them to change their opinion. If they did: What was the decisive element of our discussion of the cases that led them to reconsider. If not, did the reasons for their decision change? And for the students who were undecided at the beginning of the unit: If they are still undecided: What additional information would they need to make a decision? If they made a decision: What about our discussion of the case enabled them to reach a conclusion in the case.

5. REFERENCES AND ADDITIONAL RESOURCES

Caplan, Arthur L. The Case of Terri Schiavo: Ethics at the End of Life. Amherst, N.Y.: Prometheus, 2006


Frankl, Viktor E. Man’s Search for Meaning. Boston: Beacon, 2006. Print. [For select quotes see the Wikipedia page devoted to Man’s Search for Meaning: https://en.wikipedia.org/wiki/Man%27s_Search_for_Meaning]


6: APPENDIX: LIST OF ARGUMENTS, INCLUDING UNSTATED OR HIDDEN PREMISES (PART 1, ACTIVITY 2)

“Everybody has a right to life”
• Terri Schiavo is somebody.
• Terri Schiavo is alive.
• Terri Schiavo has a right to life.
• If somebody has a right to life he or she should be kept alive.
• Disconnecting Terri Schiavo from life support would result in for death, i.e. she would not be kept alive.

• **Terri should not be disconnected from life support.**

"... the intrinsic value and personal dignity of every human being do not change, no matter what the concrete circumstances of his or her life..."

• Every human being has an intrinsic value and personal dignity.
• The circumstance of a human being’s life have no influence on a person's value and dignity.
• Although the circumstances of Terri Schiavo’s life have changed drastically, her value and personal dignity have not.
• Disconnecting a person's life means to violate that person's intrinsic value and her personal dignity.

• **Terri should not be disconnected from life support.**

“... I think society...has been confused over what compassion is. We’re here to love and take care of these people and not kill them.”

• Compassion means to love and take care of people.
• Compassion never means killing people.
• Disconnecting Terri from life support means to kill her.
• If we kill Terri we are not being compassionate.
• **Terri should not be disconnected from life support.**

“...What’s there is a shell of Terri. There’s nothing there anymore.”

• Terri is only a shell, i.e. the body.
• A human being that is only a shell and has lost all internal life, has lost what it means for a human being to be alive.
• Having lost what it means for a human being to be alive is equivalent to being dead.
• Terri is dead.

• Disconnecting Terri Schiavo from life support doesn’t kill her because she is already dead.

• **Terri should be disconnected from life support.**

“Terri died 15 years ago.”

• There are two different entities: One is Terri before she fell into a coma (Terri 1), the other one is Terri after falling into a coma (Terri 2).
• Although we call both of them Terri, and they both share the same body, one of them (Terri 1) is dead, whereas the other (Terri 2) is still alive.
• The human being whose life support will be disconnected (Terri 2) is not Terri 1.

• **Terri should be disconnected from life support.**

“She wouldn’t like to live like that and that’s all she’s doing—surviving.”

• Terri is alive.
• We have reason to believe that before she fell into a coma she wouldn’t have wanted to live the way she is living now, i.e. merely “surviving.”
• She is still the same person | she was before she fell into a coma.
• Since she is the same person, we must assume that she feels (or would feel) the same way about her situation now as she did before she fell into a coma.
• The wishes of a person with regard to whether or not they should be disconnected from life support or not should be respected.
• If she is not disconnected from life support her wishes will not be respected.

• **Terri should be disconnected from life support.**

**Acknowledgements**

Support for the High School Bioethics Project at NYU School of Medicine was provided by the Squire Foundation. Igor Jasinski would like to thank Michele Dixon for her valuable contributions to the development of this unit, and Craig Merow for inspiring the logic component.