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# Death with Dignity under the Right to Life: Tracing the Path from Living to Leaving

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## ABSTRACT

*After the rapid advancement in the field of medical technology has fundamentally altered the natural course of life and death, enabling the artificial prolongation of life even in cases where recovery is near impossible. These developments has brought to the forefront a very complex and sensitive question, that whether life must be preserved at all costs, even when in the absence of consciousness, dignity and hope of recovery. In this context, the concept of euthanasia emerges as a critical legal and ethical issue, with respect to India, where passive euthanasia is permitted under strict guidelines while active euthanasia continuous to be prohibited. This article examines the evolving concept of right to die with dignity as per Article 21 of the Constitution of India. In India, there are few landmark judgements with regard to euthanasia including Gian Kaur, Aruna Shanbaug, and Common Cause Vs. Union India, as well as recent developments in the case of Harish Rana, the study highlights the legal recognition of passive euthanasia as an extension of the right to life. It further explores the difference between active and passive euthanasia, highlighting the ethical and legal implications of withdrawing life-sustaining treatment. The present article also highlights prolonged cases of irreversible medical conditions. It focuses on the realities of patients and caregivers, with eventually leads to emotional distress, financial strain, and the burden of decision making. It reflects on the shifting of societal mindset towards euthanasia, where the emphasis is gradually moving from mere survival to the quality of life. However, the idea of euthanasia still remains a new concept for the traditional society, which is influenced by cultural, moral and religious beliefs. The normalization of passive euthanasia this demands a cautious and balanced approach, which also requires legal frameworks and safeguards.*

*This article positions euthanasia not merely as a question of death, but also throws light into dignity and compassion at the end of life, urging a re-examination of what it truly means to “let go” in a humane and just society.*

## I. INTRODUCTION

Life is natural and so is death, but whether death remains a natural phenomenon or is a turning

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point remains to be seen. With a rapid growth in healthcare technologies in India, the ability to prolong life artificially through ventilators and other medical equipment has raised uncomfortable yet important questions as to whether, at the cost of physical suffering, life must be preserved even in the absence of hope, dignity or consciousness. The dilemma between life and death has given rise to the term “Euthanasia”. If we go by the Cambridge dictionary for the meaning of the term euthanasia, then it means “the act of killing someone who is very ill or very old so that they do not suffer any more”. Euthanasia is broadly classified under two heads, namely active and passive euthanasia. The distinction between the two is crucial in legal and ethical discourse, as the two differ by only a thin line of difference and are regulated differently under different jurisdictions. To highlight, it is not incorrect to state that passive euthanasia is often permitted under strict safeguards while prohibiting active euthanasia.

## II. HOW IS PASSIVE EUTHANASIA DIFFERENT FROM ACTIVE EUTHANASIA?

Passive euthanasia in simple terms, means the withdrawal of life-sustaining treatment, usually of a person who has no scope of recovery or is in a permanent vegetative state, as happened in a very recent case of Harish Rana. Previously, a constitution Bench of five judges in *Common Cause vs. Union of India (2018)*<sup>2</sup> held that the right to die with dignity is a part of the right to life and liberty under Article 21. In the same case, *Common Cause*, former Chief Justice Dipak Misra concluded that the best interest of the patient overrides the State interest also.<sup>3</sup> The Hon’ble Supreme Court of India in a recent judgement of **Harish Rana Vs. Union of India and Ors.** discussed the essential distinction between Active and Passive euthanasia. It was highlighted by the bench that Active euthanasia involves a positive or overt act, which may include administration of a lethal injection or drugs, which serves to causing of death or accelerating it<sup>4</sup>. In contrast, Passive euthanasia, a term, or rather a sensitive term which reaches the core emotion of a person, occurs when a patient dies because the medical treatment is halted, and an effort to keep the patient alive, stops. It is different from Active euthanasia.<sup>5</sup> It is time and again debated that which method of euthanasia is better and which will make death a little easier or say less painful. Active euthanasia is practiced in less nations as compared to passive euthanasia.

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<sup>2</sup> *Common Cause vs. Union of India*, (2018) 5 SCC 1

<sup>3</sup> Advay Vora, In a First, Supreme Court gives Green Signal for Passive Euthanasia, *Supreme Court Observer* (Mar. 16, 2026) <https://www.scobserver.in/journal/in-a-first-supreme-court-gives-green-signal-for-passive-euthanasia/>

<sup>4</sup> *Judgement of Harish Rana Vs. Union of India and Ors.* SLP (C) No. 18225 of 2024, (neutral citation 2026 INSC 222)

<sup>5</sup> Active and Passive Euthanasia, BBC Ethics, [https://www.bbc.co.uk/ethics/euthanasia/overview/activepassive\\_1.shtml](https://www.bbc.co.uk/ethics/euthanasia/overview/activepassive_1.shtml)

### III. RIGHT TO DIE UNDER THE UMBRELLA OF ARTICLE 21

Through various precedents and regular discussions by the apex court, it can be concluded that every person deserves a dignified life. But do they also deserve a dignified death? Is Passive euthanasia permissible under Article 21 of the Constitution of India? The answer to this issue was discussed in the case of Harish Rana, which reaffirmed the jurisprudence developed in Gian Kaur<sup>6</sup>, Aruna Ramchandra Shanbaug<sup>7</sup>, and the constitution bench decision in Common Cause Vs. Union of India, where the court held that the right to die with dignity forms part of the right to life under Article 21 of the Constitution. It is also to be highlighted that the court specifically reiterated that active euthanasia remains impermissible under Indian laws.<sup>8</sup>

Right to life is guaranteed by the Constitution of India. This right indicates that nobody should be deprived of a peaceful and happy life. Article 21 clearly covers the right to life, but does it also cover the right to die? The idea behind this right is to end life at one's own will to avoid unbearable pain or terminal illness. This issue is not only limited to the sufferers, but also to their near one's and relatives. Does the denial of right to die to a terminally ill person who has no scope of recovery hampers the right to life of his close relatives, say parents, spouse or children who are their care givers? When a terminally ill person is compelled to prolonged sufferings due to legal and medical restrictions, the emotional, psychological and even financial burden is often borne by their family members or close relatives. The quality of life of the entire family is compromised. Right to life not only focuses on mere existence of a person, but it also ensures a dignified life.

It is not less than a curse for a parent to see his child suffer unbearable pain, merely existing and not living his life to the fullest. Now imagine being trapped in your own body for years and not able to move or speak or even recognize your dear ones. We may only imagine this, but a 32-year-old male has suffered unbearable pain for as long as 13 years. Harish was a student of Punjab University when his life changed forever in 2013. He was staying in a paying guest accommodation and fell from fourth floor and suffered serious brain injuries, which ultimately led to his permanent vegetative state. He was forced to remain confined to his bed due to his health condition and 100% disability.<sup>9</sup> Death comes naturally, sometimes even without any

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<sup>6</sup> Gian Kaur Vs. State of Punjab (1996) 2 SCC 648

<sup>7</sup> Aruna Ramachandra Shanbaug v. Union of India, (2011) 4 SCC 454

<sup>8</sup> Supreme Court Reaffirms Right to Die with Dignity under Article 21: Upholds validity of Passive Euthanasia and living wills, The Mentorship Project, (Mar. 11, 2026), <https://www.thementorshipproject.in/news-details/AWUMNA==/Supreme-Court-Reaffirms-Right-to-Die-with-Dignity-Under-Article-21-Upholds-Validity-of-Passive-Euthanasia-and-Living-Wills>

<sup>9</sup> Who is Harish Rana? The Man Behind The SC Life Support Case, Brut (Mar. 25 2026 ), <https://www.brut.media/in/articles/india/justice/who-is-harish-rana-the-man-behind-the-sc-life-support-case>

signs or signals, but Harish Rana, who was in a permanent vegetative state, in his situation, all such signs and signals of death which were seen at his stage of health, miserably failed the occurrence of death. His parents in various interviews and local media interactions mentioned that they have exhausted almost all of their savings for the survival of their son and were worried about what would happen to him after them. There is a continuous need for day and night care, including feeding, hygiene, and medical supervision, which often leads to severe physical and mental exertion of the care givers. The care givers also experience grief as they suffer from a continuous uncertainty and absence of any hope for recovery of their loved ones, which results in anxiety, stress and also social isolation. Another major aspect is the decision-making pressure regarding the continuation or withdrawal of life-sustaining treatment, often without clear guidance. In the case of Harish Rana, his parents left no stone unturned in seeking relief for their son. From approaching the Delhi High court in 2024 and seeking passive euthanasia for their son, to approaching the Hon'ble Supreme Court of India for the same, the plea was rejected by both the courts on the ground that Rana was not placed on life-support machines. In 2025, they again approached the Supreme Court, and informed the court that the condition of their son had deteriorated and that he was being kept alive "artificially" through life support equipment's.<sup>10</sup>

#### **IV. CONNECTING THE DOTS BETWEEN ARUNA SHANBAUG AND HARISH RANA**

In the case of Harish Rana, staying and lying on bed in the same position for 13 years sounds a long wait before relief in the form of death, but Harish is not the only one who suffered this long. For over a period of 40 years, without any hope of recovery, Aruna Shanbaug was trapped in her own body in ward number 4 of KEM hospital, Parel, Mumbai.<sup>11</sup> Aruna, a 25-year-old nurse was raped by a KEM hospital cleaner who strangled her with metal chains and left her to die in November 1973. She survived this heinous crime against not just her body, but her strength, her power, her wisdom, her commitment and most importantly her dignity. But the survival was merely breathing and being subjected to force feeding through her nose to keep her alive. This case brought the Indian Euthanasia laws into a broader picture. Though in her case the apex court declined to permit euthanasia, it took a significant step by recognizing passive euthanasia under strict judicial safe guards. The court also highlighted the need to prevent unnecessary sufferings, and laid down procedural guidelines giving importance to the

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<sup>10</sup> Cherylann Mollan, India's Top Court Allows Removal of Life Support of Man in Vegetative State, BBC News (Mar. 11, 2026) <https://www.bbc.com/news/articles/c62v64rz6mko>

<sup>11</sup> Rohini Shukla, Passive Euthanasia in India: A Critique, *Indian J. Med. Ethics* (Aug. 5, 2015) <https://ijme.in/articles/passive-euthanasia-in-india-a-critique/?galley=html>

medical opinion and judicial oversight. “My broken, battered baby bird finally flew away. And she gave India a passive euthanasia law before doing so” this was said by a journalist and author Pinki Virani, who wrote *Aruna’s Story*, a book on the nurse’s plight, told the BBC in an interview after the death of Aruna Shanbaug.<sup>12</sup>

## **V. EFFECT OF EUTHANASIA ON THE SOCIETAL MINDSET**

In today’s time the concept of euthanasia more importantly passive euthanasia is not just limited to terminally ill patients, doctors and hospital, but this is also affecting the thought process of the society. From the eyes of the sufferer, it may sound valid and justified to end a life with dignity, but does it fit in the traditional beliefs of the Indian society? There has been a societal shift on the idea of passive euthanasia reflecting more on quality of life rather than counting of years a person has survived. In last two to three decades medical science has developed ways to prolong life through artificial means, where there is less or absolutely no chance of survival. While these life sustaining machines have saved countless lives, it has also created situations where patients have remained in unconscious state, and they suffer for years depending entirely on medical support. In such a scenario, passive euthanasia emerges as a way to protect the dignity of the patient, allowing them to avoid unnecessary pain and a prolonged dying process. This approach makes the healthcare system more patient centric and humane, where the wishes and well-being of the patients takes the front seat. However, it is also relevant to say that acceptance of passive euthanasia within the society is not absolute, and is often shaped by morals and traditional beliefs. It is often believed that life and death is destined by a higher power, and act of euthanasia may interfere with the natural processes. Also, in situations where the patient is unresponsive the burden of deciding the future lies on the family. This burden can emotionally damage the very will power of the family, from which they may never recover. The decision is to choose between preserving a life or giving him relief from his sufferings and unbearable pain. Not just society, passive euthanasia also has his significance in medical ethics, particularly the principle of preserving life at any cost. Normalization of passive euthanasia can contribute to a more compassionate healthcare system, but it also needs proper guidelines and safeguards to prevent misuse and misinterpretation. It won’t be wrong to state that passive euthanasia has various impact on society and medical ethics. It is not only about death, it also the idea of quality of life, and how the society understands the importance and value of life, and how it assesses and addresses the sufferings of a terminally ill person.

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<sup>12</sup> Aruna Shanbaug : Brain-Damaged India Nurse Dies 42 Years After Rape, BBC News, (May 18, 2015) <https://www.bbc.com/news/world-asia-india-32776897>

Hence, be it Harish or Aruna, nobody deserves such an ending before even experiencing the different phases of life. Their death is not only limited to leaving their physical bodies, but also death of their dreams, their commitment to the families and their valuable contribution to the society. It's hard to leave and to let go, but at times letting go is the only option left, and the classic case of Harish Rana is an example of the acceptable way of letting go in the form of passive euthanasia. Witnessing such cases are though provoking, forcing us to rethink about the idea of life, dignity and the real meaning of "letting go".

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