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Original Article

Ethics Without Personhood? Buddhist Arguments Against the Ontology of the Individual in Bioethical Debates

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Abstract - This paper explores how classical and contemporary Buddhist philosophy challenges the Western bioethical emphasis on individual personhood as the foundational unit of moral consideration. In many Western bioethical frameworks particularly those influenced by Kantian and liberal traditions the moral status of an entity often hinges on characteristics such as rationality, autonomy, and continuity of identity. Buddhism, however, fundamentally rejects the metaphysical notion of a permanent, enduring self (ātman), advancing instead a doctrine of anattā (non-self). By drawing on Pali canonical texts, Madhyamaka philosophy, and contemporary Buddhist ethics, this paper argues that Buddhist thought offers an alternative ethical framework grounded in dependent origination (paticca-samuppāda), compassion (karuṇā), and the interdependence of all sentient life. This perspective disrupts dominant bioethical categories, particularly in debates over abortion, end-of-life care, personhood in brain death, and animal ethics. Instead of moral worth being tied to personhood or individual identity, Buddhist ethics focuses on alleviating suffering and respecting the conditions of sentient experience. This decentering of the "individual" opens up possibilities for a more relational, process-oriented approach to bioethical reasoning one that critiques the ontological assumptions of mainstream liberal bioethics and offers a globally inclusive ethical vision.

Keywords - Buddhist Ethics, Personhood, Non-Self (*Anattā*), Bioethics, Dependent Origination (*Paṭicca-Samuppāda*) Abortion, End-Of-Life Decisions, Brain Death, Moral Ontology, Compassion (*Karuṇā*), Interdependence, Buddhist Philosophy.

1. Introduction

1.1. The centrality of personhood in Western bioethical debates

In modern Western bioethics, the concept of "personhood" plays a foundational role in determining moral status and guiding ethical decision-making. Philosophers and bioethicists often use personhood as a threshold concept granting moral rights, autonomy, and protections to those beings who meet specific criteria, such as self-awareness, rationality, and the capacity for moral agency. The debates surrounding abortion, euthanasia, brain death, and animal rights frequently hinge on whether or not the subject in question can be categorized as a "person." This dominant framework draws on Enlightenment-era notions of the individual, heavily influenced by liberal political thought and Kantian ethics. It assumes that the moral subject is an autonomous, continuous, and self-conscious agent who exists as a discrete entity, separate from others and from the environment. As a result, entities that do not neatly fit into this framework fetuses, individuals in persistent vegetative states, non-human animals are often treated as morally ambiguous or less worthy of ethical consideration.

Table 1: Western Personhood vs. Buddhist Non-Self Ethics

Dimension	Western Personhood	Buddhist Non-Self Ethics	
Metaphysical	Stable, autonomous self rooted in	Impermanent self, five aggregates; doctrine of	
Basis	Enlightenment & Kantian thought	non-self (anattā)	

Ethical Orientation	Rights, autonomy, moral agency	Relief of suffering (dukkha), compassion (karuṇā), relational focus	
Moral Status Criteria	Self-awareness, rationality, continuity	Presence of suffering, contexts of interdependence, processual existence	
Inclusion Approach	Excludes beings without personhood (fetuses, PVS, animals)	Embraces vulnerable or transitional beings through compassion	
Strengths	Clear legal thresholds, emphasis on autonomy	Inclusive, sensitive, non-anthropocentric	
Limitations	Excludes borderline/marginal beings;	Less straightforward legal applicability;	
	anthropocentric	requires contextual discernment	

1.2. Contrasting Buddhist views on the self and identity

Buddhism, in contrast, presents a radically different metaphysical foundation that undermines the very idea of a stable, autonomous self. Central to all major Buddhist traditions is the doctrine of *anattā* (non-self), which asserts that there is no permanent, unchanging essence within any living being. Instead of an enduring soul or person, Buddhism posits that all phenomena, including what we call the "self," are impermanent and composed of constantly shifting aggregates (skandhas) form, sensation, perception, mental formations, and consciousness. This understanding radically alters ethical orientation: rather than emphasizing rights derived from personhood, Buddhist ethics foregrounds the dynamics of suffering (*dukkha*), compassion (*karuṇā*), and the interdependent nature of existence. The absence of a permanent self does not negate ethical responsibility; rather, it reorients it toward minimizing harm within a relational, interconnected world.

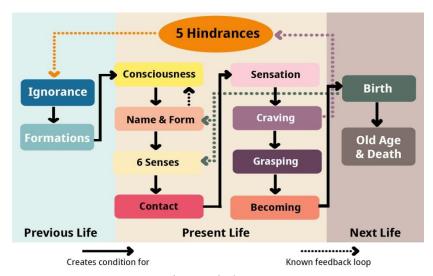


Fig. 15 Hindrances

1.3. Purpose and significance of exploring Buddhist contributions to bioethics

This paper seeks to explore how the Buddhist rejection of essential personhood can contribute to and critique contemporary bioethical debates. By deconstructing the metaphysical assumptions underlying mainstream ethical models, Buddhism opens up an alternative approach one that is not based on the autonomous individual, but rather on a processual and relational understanding of life and morality. Such an approach may offer more inclusive ethical insights, especially in cases where rigid person-based models fail to address the moral complexity of beings that are vulnerable, marginal, or transitional. The significance of this inquiry lies not only in expanding the scope of bioethics beyond its Western roots but also in cultivating a pluralistic moral discourse that incorporates non-dualistic, non-anthropocentric worldviews.

1.4. Methodology and scope

This study adopts an interdisciplinary and comparative approach, drawing from primary Buddhist scriptures (mainly Theravāda Pali texts and Mahāyāna philosophical writings), contemporary Buddhist ethical scholarship, and key debates in Western bioethics. Rather than attempting to synthesize the two traditions superficially, the paper aims to highlight points of philosophical divergence and ethical insight. Case studies from biomedical ethics such as abortion, brain death, and end-of-life care serve as applied contexts through which the metaphysical and ethical implications of Buddhist thought can be evaluated. The scope is not to replace person-based ethics but to critically interrogate its limits and to showcase the possibilities of an ethics grounded in non-self and dependent origination.

2. Personhood in Western Bioethics: A Critical Overview

2.1. Kantian and liberal notions of autonomy and moral agency

Western bioethics often derives its normative frameworks from Enlightenment-era liberal thought, especially the work of Immanuel Kant, who posited that moral agents are ends in themselves due to their capacity for rational autonomy. In this view, a being becomes morally considerable when it can act according to reason and moral law, independently of external coercion. This emphasis on autonomy has been foundational to modern biomedical ethics, particularly in the principles of informed consent, individual rights, and personal dignity. Liberal theories extend these ideas to prioritize self-determination and liberty, seeing the individual as the locus of moral and political authority. However, such models often presuppose a coherent and stable self who exercises free will a concept that is taken for granted but rarely interrogated.

2.2. Criteria for moral status: rationality, self-awareness, continuity

Within this framework, moral status is typically granted to beings who exhibit specific cognitive and psychological traits. Common criteria include rationality, self-awareness, the ability to make future-oriented decisions, and continuity of personal identity over time. These thresholds serve to include adult human beings as moral subjects while casting doubt on the moral status of fetuses, infants, animals, and cognitively impaired individuals. The emphasis on individual cognitive capacity introduces a hierarchy of moral value, often privileging fully developed human agents over others. This system is not only exclusionary but also assumes a problematic fixity in identity overlooking the contingent, relational, and impermanent aspects of being.

2.3. Applications in debates: abortion, brain death, euthanasia

These assumptions have concrete implications in several major bioethical debates. In abortion discourse, the question of when the fetus becomes a "person" with rights is central, and opinions vary based on developmental milestones such as viability or sentience. In brain death controversies, the persistence of cardiac function without higher brain activity challenges the notion of personal identity and agency. Similarly, in euthanasia debates, autonomy and rational consent are often treated as prerequisites for morally permissible death. In each case, the ethical dilemma hinges on the contested presence or absence of personhood, often marginalizing perspectives that do not adhere to this ontological model.

2.4. Problems and exclusions in person-based ethical models

Person-based models, though influential, are increasingly critiqued for their limited applicability across cultures and contexts. They risk excluding vulnerable populations infants, the comatose, the elderly, animals not because they lack moral worth, but because they do not meet narrow philosophical definitions of personhood. Moreover, such models tend to isolate individuals from their social and environmental contexts, ignoring the relational nature of human existence. In privileging autonomy and cognitive function, Western bioethics can inadvertently overlook suffering, dependency, and the importance of care. These problems invite alternative

frameworks such as Buddhist ethics that decenter the individual and ground morality in interdependence, compassion, and context-sensitive judgment.

3. Buddhist Metaphysics of Non-Self (Anattā) and Dependent Origination

3.1. The denial of an enduring self in Theravāda and Mahāyāna traditions

At the heart of Buddhist philosophy lies a radical departure from the notion of a permanent, unchanging self. Both Theravāda and Mahāyāna traditions reject the idea of an eternal soul (ātman), emphasizing instead the doctrine of anattā or non-self. According to this view, what we conventionally call a "person" is in fact a temporary assemblage of five aggregates (pañca khandha) form, sensation, perception, mental formations, and consciousness all of which are impermanent and interdependent. This understanding dissolves the idea of a singular moral subject as the bearer of rights and obligations. While Theravāda tends to focus more on psychological deconstruction of the self for meditative and ethical purposes, Mahāyāna extends this to an ontological claim about the emptiness (śūnyatā) of all phenomena, including ethical categories. The absence of a fixed self is not nihilistic but liberating, opening the path to universal compassion unbounded by ego or self-interest.

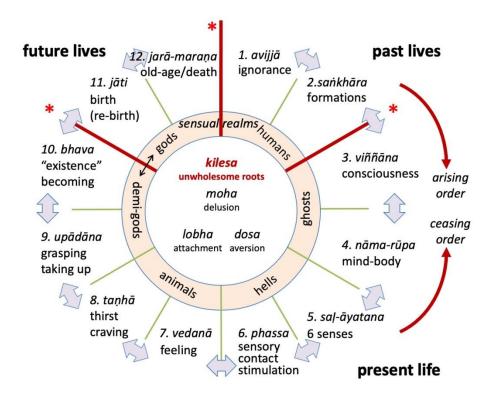


Fig. 2 Kilesa unwholesome roots

3.2. Paţicca-samuppāda as an alternative to individualism

Closely related to the doctrine of non-self is the principle of *paţicca-samuppāda*, or dependent origination. This teaching posits that all phenomena arise in dependence on multiple causes and conditions; nothing exists in isolation or by itself. Applied ethically, this means that actions, identities, and responsibilities must be understood as relational and context-dependent. Rather than seeing the individual as a discrete moral agent, dependent origination emphasizes interconnectedness and the mutual conditioning of all beings. Moral action, from this perspective, is not about asserting individual rights but about responding skillfully to complex causal conditions to

reduce suffering. This challenges the autonomy-centered ethics of Western bioethics and offers a model more attuned to relationality, impermanence, and compassion.

3.3. Ethics as relational and situational rather than rights-based

Given its metaphysical foundations, Buddhist ethics is not grounded in fixed rules or universal rights, but in the careful consideration of context, intention, and consequences. Actions are evaluated based on their karmic impact and their ability to reduce suffering rather than on whether they uphold individual autonomy or categorical imperatives. Ethical decisions are seen as relational and fluid, requiring mindfulness and discernment rather than abstract principle-following. For example, an act of abortion may be judged not solely by whether a fetus is a "person," but by examining the intentions, the likely outcomes, and the compassion involved in the decision. This approach is inherently situational and circumstantial, making it adaptable to the complexities of real-life moral dilemmas.

3.4. Consequences for moral reasoning: fluidity, impermanence, context

The denial of a permanent self and the emphasis on interdependence lead to a form of moral reasoning that is dynamic and context-sensitive. Ethical decisions must take into account the impermanence of all beings, the relational matrix in which they exist, and the specific causes and conditions at play. This stands in contrast to static, rights-based systems that apply fixed criteria across all cases. Buddhist moral reasoning thus allows for nuance and compassion, recognizing that suffering cannot always be addressed through rigid application of rules. It calls for ethical flexibility, spiritual humility, and a deep sensitivity to the interconnectedness of life.

Table 2: Tajicca-samuppada (Dependent Origination)				
Feature	Summary Description			
Definition	All things arise in dependence; nothing is inherently independent			
12 Nidānas	Ignorance \rightarrow formations \rightarrow consciousness \rightarrow name-form \rightarrow six sense bases \rightarrow contact \rightarrow			
	feeling \rightarrow craving \rightarrow clinging \rightarrow becoming \rightarrow birth \rightarrow old age & death			
School Integration	- Theravāda: Explains interdependence of suffering and selflessness - Mahāyāna:			
	Supports emptiness doctrine, deconstructing perceived reality			
Ethical Function	Reveals relational causality; disrupting craving & ignorance interrupts suffering			
Cessation Path	"Reverse" chain (pațiloma): cultivate wisdom to stop suffering cycle			

Table 2: Pațicca-samuppāda (Dependent Origination)

4. Compassion and Suffering: The Foundation of Buddhist Ethics

In Buddhist ethical thought, compassion (karuṇā) and loving-kindness (mettā) form the cornerstone of moral reflection and action. Unlike Western moral frameworks that often begin with rights, duties, or principles derived from individual autonomy, Buddhism begins with the recognition of suffering (dukkha) as the universal condition and the alleviation of that suffering as the primary ethical imperative. Compassion in Buddhism is not a mere emotional response, but a cultivated moral stance rooted in mindfulness, empathy, and non-attachment. This has profound implications for bioethical discourse, particularly in cases that involve moral ambiguity and vulnerability. For example, abortion in a Buddhist context is not judged solely through metaphysical questions of fetal personhood but evaluated in terms of the intention behind the act, the conditions surrounding it, and the degree of suffering it causes or prevents. If a pregnancy endangers a mother's life or causes psychological and social hardship, compassionate abortion may be understood not as ethically ideal but as contextually justifiable. Moreover, because moral concern in Buddhism is not confined to rational beings or those with self-consciousness, the ethical circle naturally includes non-human animals and so-called "non-persons" such as the severely disabled or comatose. These beings are considered part of the broader web of sentience and are deserving of moral consideration, not because they possess traits of personhood, but because they can suffer. Thus, Buddhist ethics opens a pathway for a more expansive, sentience-centered moral vision that prioritizes compassion over cognitive capacity.

5. Reframing Bioethical Case Studies through a Buddhist Lens

Applying Buddhist metaphysical and ethical insights to contemporary bioethical dilemmas reveals alternative interpretive frameworks that go beyond the limitations of personhood-based models. In the case of abortion, rather than focusing exclusively on whether the fetus qualifies as a moral subject, Buddhist reasoning evaluates the relational dynamics, karmic consequences, and compassionate intentions of all involved. The fetus is seen as a sentient being in a cycle of rebirth, deserving of moral concern, but its interests are not absolute and must be weighed within the relational matrix involving the mother, family, and society. Regarding end-of-life decisions, Buddhism emphasizes the impermanence of life and the non-duality of death, viewing dying as a process rather than a fixed boundary. Non-attachment to the body and the ego allows space for ethical euthanasia when prolonged suffering and lack of conscious awareness are involved, although intentional killing is still karmically significant. In brain death and organ donation, the Buddhist view of transitional consciousness (gandhabba) raises concerns about declaring death prematurely, as consciousness may not yet have fully departed the body. Thus, timing, intention, and awareness during the death process are ethically crucial. Animal ethics in Buddhism departs from species-based hierarchies. Animals are moral subjects by virtue of their sentience and their place within the samsaric cycle. Ethical treatment of animals, vegetarianism, and prohibitions against cruelty are not justified by personhood but by compassion and karmic interconnection. When compared with Western approaches, these Buddhist perspectives offer a non-essentialist and relational ethics that reframes biomedical issues not as questions of legal status but as opportunities for compassionate responsiveness in fluid, impermanent contexts.

Table 3: Summary of Buddhist Bioethical Decision Factors

Dilemma	Metaphysical Lens	Key Ethical Questions	Buddhist Criteria Applied
Abortion	Continuum of rebirth	Is intention compassionate? Does it	First Precept; karmic outcomes;
		minimize harm?	relational interdependence
Euthanasia	Impermanence;	Is suffering prolonged unduly? Is	Reject intentional killing; permit
End-of-Life	transitional consciousness	consciousness respected at death?	withholding disproportionate care
Organ	Generosity & karma	Is donor's intention compassionate?	Affirmative: dāna & karuṇā; mindful
Donation		Is moment of death honored?	timing for consciousness departure
Animal Ethics	Sentience & rebirth	Does action reduce suffering across	Practice compassion beyond species,
		beings?	avoid harming

6. Challenges and Possibilities of Integrating Buddhist Ethics into Global Bioethics

While Buddhist ethics provides profound alternatives to dominant Western bioethical models, integrating these insights into a global ethical framework is not without challenges. One major obstacle is the issue of cultural translation: Buddhist concepts such as anattā (non-self), dukkha (suffering), or kamma (karma) do not have direct equivalents in Western philosophical languages and may be misunderstood or diluted when applied in secular contexts. Similarly, philosophical incompatibilities arise when attempting to reconcile relational, context-sensitive ethics with rights-based, universalist approaches rooted in individualism. There is also the risk of essentializing or oversimplifying Buddhist thought, reducing it to slogans about compassion or non-violence without appreciating its complex metaphysical foundations and internal diversity across traditions. Nevertheless, Buddhism offers real possibilities for developing a non-anthropocentric, interrelational ethics that speaks to contemporary concerns such as climate change, animal rights, and global health inequities. By focusing on alleviating suffering rather than asserting rights, and by attending to the interconnectedness of all sentient beings, Buddhist ethics can enrich global bioethics with a spiritual, ecological, and holistic sensibility. It can serve both as a complement to liberal frameworks, offering a more nuanced approach to vulnerability, and as a critique of their limitations, calling attention to the ethical blind spots that emerge when personhood is treated as the sole criterion of moral concern.

7. Conclusion

This paper has argued that Buddhist philosophy, particularly its metaphysical doctrines of non-self and dependent origination, offers a compelling critique of the dominant role of personhood in Western bioethical reasoning. By reframing ethical concerns around suffering, impermanence, and relational interdependence, Buddhism questions the assumption that moral status depends on cognitive traits or autonomous agency. Instead, it invites an ethics grounded in compassion and context, where all sentient beings are worthy of moral consideration, regardless of their proximity to human rationality. The Buddhist critique challenges the ontology of the individual that underpins much of liberal bioethics and opens space for more inclusive, non-dualistic ethical frameworks. This contribution is not merely of comparative interest but has real implications for creating a pluralistic global bioethics one that takes seriously the moral insights of non-Western traditions and moves beyond a narrow focus on individual rights toward a broader, more compassionate engagement with suffering and interdependence. Further research might explore how Buddhist-inspired relational ethics could inform practical guidelines in healthcare, palliative care, and public health policy, while continuing to engage with and critique the structural assumptions of contemporary biomedicine.

References

- [1] Keown, D. (2001). The Nature of Buddhist Ethics. Palgrave Macmillan. | Google Scholar | Publisher Site |
- [2] Harvey, P. (2000). An Introduction to Buddhist Ethics: Foundations, Values and Issues. Cambridge University Press. |Google Scholar| Publisher Site|
- [3] Maguire, D. C. (2001). "A New American Perspective on Abortion and Ethics." Journal of Buddhist Ethics, 8.
- [4] Siderits, M. (2007). Buddhism as Philosophy: An Introduction. Ashgate. | Google Scholar | Publisher Site |
- [5] Gyatso, T. (1995). The World of Tibetan Buddhism. Wisdom Publications. | Google Scholar | Publisher Site |
- [6] Powers, J. (2007). Introduction to Tibetan Buddhism. Snow Lion Publications. | Google Scholar | Publisher Site |
- [7] LaFleur, W. R. (1994). Liquid Life: Abortion and Buddhism in Japan. Princeton University Press. | Google Scholar | Publisher Site |
- [8] Tenzin Gyatso (14th Dalai Lama). (1999). Ethics for the New Millennium. Riverhead Books. | Google Scholar |
- [9] Kretz, L. (2012). "Climate Change: A Moral Issue." Ethics & the Environment, 17(2), 113–124.
- [10] MacCormack, P. (2012). The Animal Catalyst: Towards Ahuman Theory. Bloomsbury. | Publisher Site|
- [11] Wallace, B. A. (2005). Contemplative Science: Where Buddhism and Neuroscience Converge. Columbia University Press. | Google Scholar | Publisher Site |
- [12] Jay Garfield (Ed.). (2015). The Oxford Handbook of World Philosophy. Oxford University Press. | Google Scholar | Publisher Site |
- [13] McCormick, A. J. (2013). Buddhist Ethics and End-of-Life Care Decisions. Journal of Social Work in End-of-Life & Palliative Care, 9(2–3), 209–225. https://doi.org/10.1080/15524256.2013.794060 | Google Scholar | Publisher Site |
- [14] Gethin, R. (1998). The Foundations of Buddhism. Oxford University Press. | Google Scholar | Publisher Site |
- [15] Cozort, D., & Shields, J. M. (Eds.). (2020). *The Oxford Handbook of Buddhist Ethics*. Oxford University Press. | Google Scholar | Publisher Site |