

“HOW TO LEAD OUR LIVES?” ADVANCE DIRECTIVES (ADS) IN AN ARISTOTELIAN APPROACH: AN ESSAY

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Abstract: The question “how to lead our lives?” is a question about which life to live and is at the center of Aristotle’s ethical investigations in *Nicomachean Ethics*. Such a question seems not to get old, particularly when we express, in advance, decisions about future medical care to consent to or refuse, in advance directives (ADs), when we are unable to decide. The purpose of this investigation is to philosophically approach ADs from the question “how to lead our lives?”, admitting three possible approaches to aspects of Aristotle’s ethical investigation: 1st) emotions and ADs; 2nd) deliberation, deliberate choice, *phronesis* and ADs; 3rd) “How to lead our lives?” and ADs. It is concluded that a) the purpose of human life, according to Aristotle, is not simply to live, but to live humanly; b) the answer to the question “how to lead our lives?”, considering the categories of happiness (*eudaimonia*), emotions, virtues, practical wisdom (*phronesis*), deliberation, deliberate choice, and action, also involves the answer to the question about death and dying; c) Aristotle’s ethical investigation may be an alternative, although limited, to address ADs without the necessary appeal to moral rules.

Keywords: Bioethics, advance directives, personal autonomy, deliberation

“¿Cómo dirigir nuestras vidas?” Directrices anticipadas (DA) desde un enfoque aristotélico: un ensayo

Resumen: La pregunta “¿cómo llevar nuestras vidas?” es una cuestión sobre qué vida vivir y está en el centro de las investigaciones éticas de Aristóteles en la *Ética a Nicómaco*. Tal pregunta no parece envejecer específicamente cuando expresamos, de antemano, decisiones sobre la atención médica futura para consentir o rechazar, en directivas anticipadas (DA), cuando no somos capaces de decidir. El propósito de esta investigación es abordar filosóficamente la DA desde la pregunta “¿cómo vivir nuestra vida?”, admitiendo tres posibles aproximaciones a aspectos de la investigación ética de Aristóteles: 1) las emociones y la DA; 2) deliberación, elección deliberada, *phronesis* y la DA; 3) “¿Cómo llevar nuestra vida?” y el DA. Se concluye que a) el propósito de la vida humana, admitido por Aristóteles, no es simplemente vivir, sino vivir humanamente; b) la respuesta a la pregunta “¿cómo vivir nuestra vida?”, considerando las categorías felicidad (*eudaimonia*), emociones, virtudes, sabiduría práctica (*phronesis*), deliberación, elección deliberada y acción, implica también la respuesta a la pregunta sobre la muerte y el morir; c) La investigación ética de Aristóteles puede ser una alternativa, aunque limitada, para abordar la DA sin la necesaria apelación a reglas morales.

Palabras clave: bioética, directivas anticipadas, autonomía personal, deliberación

“Como conduzir nossas vidas?” Diretivas antecipadas (DA) numa abordagem aristotélica: um ensaio

Resumo: A pergunta “como conduzir nossas vidas?” é uma pergunta sobre qual vida viver e está no centro das investigações éticas de Aristóteles na *Ética a Nicómaco*. Tal pergunta parece não envelhecer, especificamente quando manifestamos, antecipadamente, decisões sobre cuidados médicos futuros a consentir ou a recusar, nas diretivas antecipadas de vontade (DAV), quando não formos capazes de decidir. A proposta desta investigação é abordar, filosoficamente, as DAV a partir da pergunta “como conduzir nossas vidas?”, admitindo três possíveis aproximações a aspectos da investigação ética de Aristóteles: 1^a) emoções e as DAV; 2^a) deliberação, escolha deliberada, *phronesis* e as DAV; 3^a) “Como conduzir nossas vidas?” e as DAV. Conclui-se que a) a finalidade da vida humana, admitida por Aristóteles, não é simplesmente viver, mas viver à maneira humana; b) a resposta à pergunta “como conduzir nossas vidas?”, considerando as categorias felicidade (*eudaimonia*), emoções, virtudes, sabedoria prática (*phronesis*), deliberação, escolha deliberada e ação, envolve também a resposta à pergunta sobre a morte e o morrer; c) A investigação ética de Aristóteles pode ser uma alternativa, ainda que limitada, para abordar as DAV sem o apelo necessário a regras morais.

Palavras chave: bioética, diretivas antecipadas, autonomia pessoal, deliberação

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Introduction

Planning our lives and achieving what we want, even if we are not sure we will achieve it, is a widely accepted idea. It is possible to argue that planning our lives stems from the universal capacity for reflection in choosing which life we should live(1,2). This idea is not new and may lead us to the Aristotelian idea of happiness (“the best life for a man to live”(3), the central object of the *Nicomachean Ethics*(4). However, this is about human happiness, human flourishing, not that of the gods. This is significant, as flourishing (or prospering) limits the scope of our capacities and our world: we are rational and mortal, immersed in contingencies, slaves of the sensations and emotions necessary for our survival. These are the conditions under which we can flourish and achieve any happiness, as well as fail(5).

We are not like the gods, noted Aristotle. They are always happy and blissful, they do not need to enter into contracts, return things received, take risks, or moderate their actions(4:X 8 1178b7-16). This is because they are not subject to contingencies, or circumstances; they don’t inhabit the world of indeterminacy(4:X 8 1178b7-16). Planning our lives and deciding which life to live is an eminently human task and we do it because the future is uncertain(4:VI 2 1039a7-8). This task is given to us by our nature, since all human activities, such as choices and actions, aim at a purpose and that is the good(4:I 2 1094a1-2).

“How to lead our lives?” is the question about which life to live, about happiness, and what is in question is not the knowledge of it, but what concerns the actions that lead to it and how we should practice them. Aristotle links happiness to virtue, as happiness seems to be a virtuous life(4:I 13 1102a5). The virtuous life involves practical wisdom (*phronesis*), emotions, deliberation, deliberate choice, and action.

“How to lead our lives?” is a question that does not get old, as we are continually faced with it, even when we are tempted to control the future, specifically when we express decisions about future medical care to consent or refuse, in advance directives (ADs), when we are unable to manifest them. ADs are an important tool for medical care

because, at the very least, they are an emblem of people’s autonomy and self-determination in relation to their own lives – manifest in their values, desires, and preferences – preventing them from undergoing futile clinical treatments.

Thus, the purpose of this investigation is to philosophically approach ADs from the question “how to lead our lives?”, considering three possible approaches to aspects of Aristotle’s ethical investigation: 1st) emotions and ADs; 2nd) deliberation, deliberate choice, *phronesis* and ADs; 3rd) “How to lead our lives?” and ADs.

Rehabilitation of Aristotle’s ethics in contemporary moral thought

The influence of Aristotle’s ethics on contemporary moral thought is recognized, and the reasons are diverse(2,5-7:330-1,8). Among them, the need to overcome the notion of “moral duty” and the recovery of the Aristotelian notion of “virtue”(6); the importance of Aristotle’s approaches to practical reason (along with those of Plato and the Stoics) and deliberation about how to use reason as a guide in human life, rivalling Kantian and utilitarian models(9:12).

The caveat, however, is that Aristotle has little or nothing to say about issues arising from many of our ethical concerns, and this must also be taken into account(5). Three of them are illustrative: 1st) regarding “living well”, the human Good, there is no rational basis that justifies the analytical identification between human happiness (happiness, prosperity, human well-being) and living according to virtue(5); 2nd) Aristotle does not offer us systems of rules for human actions, that is, he does not provide us with basic normative ethics. This is opposed to what modern thought would expect about the main result of the task of a philosophical ethics, to systematize the principles of human conduct(5,10:150); 3rd) the irreducible link between ethics and the structure of the Greek *Polis* can be an obstacle for Aristotelian ethics to gain a place in our world, since details of the explanation of the virtues presuppose the context of a structure that no longer exists(10:163).

In this sense, some internal difficulties and the limited scope of Aristotle’s ethical investigation, in

relation to contemporary moral conflicts, pointed out by scholars of Aristotle's ethical thought, undo any minimal claim to find in the answer to the question "how to lead our lives?" some trace of a guide to rules of action for ADs. If there are frustrations for anyone approaching Aristotle's ethical investigation, one of them is not finding, in a forceful way, rules of action (11,12). In this sense, following, as a reader, some aspects of his ethics is enough to give credence to MacDowell's consideration of the advantage of studying an important philosopher of another era because it is possible to perceive that we do not need to swim with the tides of our own time (11).

Purpose of human life: the human good, happiness and a peculiar way of living...

If we can plan our lives considering them as a complete life, as a process, is there a purpose for human life? A purpose? If so, what is it? Is it one's own way of living? Is there a better life to be lived? Are there reasons to seek it out? If there is a better life to be lived, then it seems reasonable to pursue it and unreasonable not to pursue it. After all, is there anything better to be desired than to live well? (13). But what does this good consist of?

The clue to investigate such questions is given by Aristotle at the beginning of the *Nicomachean Ethics* (4), starting from a common opinion about human things, that all activity and all investigation, as well as all choice and action, aim at a good, an end. As are many arts and sciences activities, so are their purposes. Medicine is health, just as strategy is victory. However, about our actions, there is a good before all others, a good desired by itself and all other goods are sought in terms of it. If the knowledge of this good brings great influence on human life, then Aristotle undertakes an investigation with the aim of determining what this good is, as well as which science or activity it is the object of. This must be political science, for it embraces all others and its purpose also includes that of others (4:I 1-2). The human good is the end of political science. But still, what does this good consist of?

Aristotle's investigation is faced with another common opinion, that the beautiful and just actions seem varied and vague, and can be consid-

ered in a conventional and unnatural way. The same also happens with goods, since it is observed that some people have already perished because of wealth. Starting from this premise - fine and fair actions seem to be constituted in a conventional way and not in a natural way - Aristotle claims that such an investigation will reach truths in general, approximate lines, as well as goods, since the nature of the subject does not allow more than that (4:I 3 1904b11-27), which is a distinctive aspect of his ethics.

The good, the end to which all actions aim, is identified with happiness. Both common people and sages believe that living well and taking action equal happiness. However, opinions differ about what happiness really is. Some link it to pleasure, wealth, or health; others to honours, and still others to the contemplative life. But these goods seem not to be chosen for their own sake, but chosen for the sake of happiness (4:I 7 1095a218-26). There must be, for Aristotle, something peculiar to the human being, something that distinguishes him. And he concludes that happiness is established as an activity of the soul in conformity with virtue. It involves a certain way of life that spans a lifetime, just as one swallow does not make a summer, just as one day does not make a human being happy (4:I 7 1098a7-19).

It is not just any way of life as noted by Lawrence, but a way peculiar to human beings, acting rationally (thinking and emotions), implying a rational choice and the virtues of that choice. It is what distinguishes us from other living beings. One of the sophistications of the human function, living well or acting well, is that it refers to real living (13). According to Kraut, even if a theory about how to conduct our lives must be submitted to intellectual tests, it must do even more: it must be able to be lived and, in a way, the human good defined by Aristotle points in this direction (14).

A door is opened here to approach, in general terms, an aspect involving ADs. If Aristotle is correct in considering happiness to be living well in a complete life, not episodic, then living in a certain way may also imply dying in a certain way. Perhaps it is less about consenting or refusing treatments in future medical care and more

about which life we want to live. It is less about treatment and more about which life to live.

Virtues, emotions, deliberation, deliberate choice, actions, practical wisdom (*phronesis*) and the prudent person (*phronimos*): what is within reach of our choices and actions?

If living well and being happy involve virtuous actions, then what constitutes happiness? Aristotle’s task, after defining happiness as an activity of the soul in accordance with virtue, is to investigate it(4:I 13 1102a6-7). Rather, he approaches the human soul in general terms and divides it into two parts: a rational one; another non-rational. Of this, there are two parts: the vegetative, and the appetitive and desiring, participating in a certain way in reason. The vegetative part is concerned with nutrition and food; the appetitive and desiring partakes, to a certain extent, of reason, for it is capable of obeying reason, as well as capable of not obeying it. If there are people who act well, obeying reason and the rational part of reason, in the same way, they can act against reason. As for virtue, it is also divided into two kinds: intellectual and moral virtues. The first is mostly given by teaching, such as wisdom (*sophia*) and practical wisdom (*phronesis*); the second is given by habit, like generosity, temperance, courage, and justice. These virtues we acquire by their exercise, for we learn to act virtuously by acting virtuously. In the same way, we learn to be courageous by acting courageously. However, the same things that make us courageous can make us vicious, acting cowardly, as we get used to facing dangerous situations or fearing them(4:I 13 1102a25-II I 1103b26).

Aristotle’s investigation of virtue proceeds from the premise that it does not aim at theoretical knowledge but at how we become good. Therefore, it is necessary to investigate what they refer to and how we should practice them(4:II 2 1103b27-1104a26). It also starts from an accepted principle: “acting according to right rule”(4:II 2 1103b32). However, it must also be admitted, such an investigation is limited in scope, for what involves particular actions and useful things is not exact. The agent does not have a precept or rule on which he must act as a basis; he will consider the circumstances.

Moral virtues can be destroyed by excess and defect, just as vigour and health can. Too much exercise or too little food destroys vigour and health, and so does too little exercise and too little food. As for courage, he who fears all things becomes a coward; he who fears nothing becomes reckless. Courage, a virtue, is destroyed by excess and defect and preserved by the mean. One who accustoms himself to enduring fears and facing them is courageous, and by acting in this way, he becomes more capable of bearing and facing fears. The brave man rejoices, or at least does not suffer, with the fear he faces; the coward suffers from fears. Thus, the moral virtues relate to pleasure and suffering. Because of this, we do evil deeds; because of that, we stop doing beautiful deeds. And if the moral virtues relate to actions and emotions and if these are accompanied by pleasure and suffering, then it confirms that moral virtues concern pleasure and suffering(4:II 2 1104a11-3 1104b28).

In the direction of understanding what virtue is, Aristotle will investigate whether it is even a certain type of disposition. Regarding the generated states of the soul, virtue must be one of them: emotions, capacities and dispositions. By emotions, Aristotle considers anger, fear, envy, hatred, pity, ambition, among others, and, in general, everything that results from pleasure and suffering; by capacity, the way we are affected by emotions, the capacity to feel pity, to feel hate; by disposition, the way we behave in the face of emotions. Regarding anger, if we feel it excessively, we act badly; if we feel it moderately, we act well. So, the virtues are not emotions, as we are not virtuous or vicious because of emotions. Also, virtues are not capacities, first, because they are independent of deliberate choices, and virtues involve certain choices; second, because we don’t say that we are good or bad by the capacity of feeling emotions. It remains for virtue to be a certain type of disposition, and this will be the one by which the human being becomes good, acts well, performing what is proper to him, the human good(4:II 5-6 1107a3).

But what is the nature of moral virtue? What justifies it as a means (middle ground, middle term)? Aristotle considers that over everything that “is continuous and divisible it is possible to take

more, less, or an equal amount, and that either in terms of the thing itself or relatively to us; and the equal is an intermediate between excess and defect” (4:II 6 1106a26-28). By the intermediate, in relation to the object itself, he understands it to be the same in all cases, according to arithmetic proportion. Between 10 and 2, which represent a lot and a little, 6 is the middle term. By the intermediate relative to us, he understands it not to be fixed in all cases. The coach will not prescribe heavy exercise for a beginner athlete, just as he will not indicate light exercise for an experienced athlete. What is excess for one will seem light to another (4:II 6 1106a29-b4). In this sense, one can feel fear, confidence, and anger too much or too little, and both are not the right way to feel, but it is the right way, the middle ground, “to feel them at the time, with reference to the right objects, towards the right people, with the right motive, and in the right way” (4:II 6 1106b20-22). For Aristotle, the virtues are related to emotions and actions, aiming for the middle ground. Missing the target is easy, hitting it is difficult. From this path, virtue is defined by Aristotle as:

is a state of character concerned with choice, lying in a mean, i.e., the mean relative to us, this being determined by a rational principle, and by that principle by which the man of practical wisdom would determine it. Now it is a mean between two vices, that which depends on excess and that which depends on defect (4:II 6 1106b36-a1-4).

If moral virtue is a deliberate choice, what constitutes a deliberate choice? Aristotle’s investigation of deliberate choice begins by considering what does not constitute it (4:III 2). It is not common to irrational animals; it is not appetite, since the latter is opposed to the former; it is not wanting, because we don’t deliberately choose impossible things. Likewise, they are not opinions. In this sense, it seems that deliberate choices concern the deliberative desire of what is in our power and that they are directed towards an end and the means to that end (12). Aristotle establishes deliberate choice as involving thought and reflection, and seems to refer to that which is chosen in preference to other things (4:2 1112a17).

Deliberate choice is preceded by deliberation. This is a kind of investigation, and Aristotle asks himself about what is possible to deliberate (4:III 3). Not much remains for deliberation. Among those listed by Aristotle, the following stand out: one does not deliberate on eternal objects, the universe, for example; nor in relation to what happens sometimes one way, sometimes another, rains and droughts, for example; One does not deliberate about all human things, as the way for a people to govern itself. The ones that remain are those that are in our power, within our reach to do. Deliberation “is concerned with things that happen in a certain way for the most part, but in which the event is obscure, and with things in which it is indeterminate” (4:III 3 1112b8-10). Deliberation is not about ends, but about means. The purpose of medicine is health, and a doctor does not decide whether or not to achieve this end; he decides what means to use to achieve this end more easily and in the best way. The principle of action is in us, but the object of deliberation is not the end to be attained, but the means conducive to it (4:III 3 1112b12-1113a8). Price considers deliberation to be an intentional activity directed towards an intentional action (15).

The object of deliberation is the same as that of deliberate choice, but that of deliberate choice is determined by deliberation (4:III 3 1113a3-4). However, Bobzien points out that, although the things in our power are common among them, the object of deliberate choice is not the same as that of deliberation, since the object of deliberation is what the agent deliberates about; that of deliberate choice is what the agent came to choose. The first is undefined; the second is determined. Deliberation offers the courses of action resulting from the investigation. Deliberate choice decides on the course of action established by the deliberation or not, and this will imply voluntary action. Voluntary actions are the object of praise or censure; the involuntary ones of forgiveness and sometimes pity. These happen because they are forced or out of ignorance and their principle is external to the agent; and no responsibility can be attributed (12). Voluntary actions are those whose principle of action is in the agent, it is in his power to act or not (4:III 1110a15-18). Thus, human agency involves deliberate choice and, through it,

the connection between voluntary actions, virtues, and vices is drawn(12).

If it is right for us to choose the middle ground (mean), avoiding excess and lack, and if this concerns the right rule (right reasoning), then what is the nature of this? This is Aristotle’s investigation in Book VI of the *Nicomachean Ethics*(4): what is the right rule (right reasoning) and the standard that determines it(4:VI 1 1138b34). He begins his examination by considering some observations about the soul and its two parts: a rational one and another non-rational(4:I 13). Regarding the part of the soul endowed with reason, he separates it into two parts: one that enables us to contemplate immutable things and the other that enables us to contemplate variable things, which are subject to changes. The first can be called scientific and the second calculative, since calculating and deliberating are the same, and one does not deliberate about immutable things(4:VI 1 1139a5-14). According to Bobzien, this explains why the second part is responsible for deliberation, and through it, determines the means by which the ends will be achieved. Practical wisdom (*phronesis*) is the virtue of the deliberative part(12).

Practical wisdom (*phronesis*) is one of the intellectual virtues. In general terms, Aristotle considers it good deliberation, and the person endowed with practical wisdom (the *phronimos*) is the one who deliberates well. However, practical wisdom cannot be scientific knowledge and cannot be art (*techne*). First, because variations in knowledge are not allowed; second, because in art, what is in question is making and not acting. What remains, then, is that practical wisdom, with regard to actions taken for the sake of human good, is a rational quality that leads to truth, but not to immutable truths(4:VI 5), since there is another kind of wisdom, according to Aristotle. This is philosophical wisdom (*sophia*). It combines intelligence and scientific knowledge, the knowledge of the most sublime things. Practical wisdom relates to human actions and things amenable to deliberation(4:VI 7).

If practical wisdom (*phronesis*) relates to human things, then it relates to moral virtue. Aristotle considers that moral virtue is the disposition in which right rule (right reasoning) is, and practical

wisdom (*phronesis*) is right rule (right reasoning) concerning action. Thus, moral virtue is a disposition in accordance with practical wisdom (*phronesis*)(4:VI 13 1144b24-27). According to Aristotle, although practical wisdom (*phronesis*) had no practical value, “we should have needed it because it is the virtue of the part of us in question; plain too that the choice will not be right without practical wisdom any more than without virtue; for the one determines the end and the other makes us do the things that lead to the end”(4:VI 13 1145a3-5).

Another door opens to approach ADs through Aristotle’s ethical investigation. From the ingenious articulation between happiness (living well), virtues, emotions, practical wisdom, deliberation, deliberate choice, action and the moral agent, it is possible to analyse the role of emotions in ADs and their relationship in the manifestation of desires, values, and preferences of people, as well as what is in our power to deliberate about ADs.

ADs in an Aristotelian approach

The common frustration in modern philosophy with regard to Aristotle’s ethical inquiry not providing external justification of ethics, that is, its objective correctness, is clear(11). The question about such accuracy was not asked by Aristotle. Aristotle’s ethical investigation does not provide us with recourse to universal rules of action, in a robust theory of action, because, at least, a rule of action is not extracted from the controversial doctrine of the middle term (mean), even if virtue as a middle ground between two vices guides virtuous action(13). Furthermore, the origin of the action is in the agent, and it is up to him, in a way, to be the “rule” of the action. If this is correct, what can Aristotle’s ethical investigation offer to the approaches about ADs if their foundations rest on theories based on moral principles such as the principle of respect for people’s autonomy?

We intend here, in general terms, to consider the ADs, based on some of Aristotle’s claims in the *Nicomachean Ethics*(4) about feeling and acting, admitting three possible approximations: 1st) emotions and the ADs; 2nd) deliberate deliberation and choice, and ADs; 3rd) “How to lead our lives?” and the ADs.

Emotions and ADs

ADs represent the human capacity to choose and act autonomously (as self-government). Such autonomy implies, in a sense, not succumbing to inclinations, emotions, so that anticipated choices about future medical care rationally express the desires, values and preferences of the people who elaborate them. In addition, anticipated choices can reveal a certain justified security about an uncertain future without all the risks that result from facing sensitive situations about death and dying. So, what does it mean to integrate emotions closer to the ADs process?

Emotions occupy an important place in Aristotle's ethical investigation. As noted by Zingano, in the practical domain, emotions play a significant role in moral action, even though they contrast with reason. In moral action, it follows that emotional and non-cognitive elements are present. Emotions, he goes on, must be previously educated by moral habit, so that reason can give them the correct direction(16:23-4). In the same sense, Molewijk et al., consider that in Aristotle, emotions move human thought and actions, and practical wisdom is not constituted by the abandonment of emotions, but by the development of emotions adequate to the concrete situation, where the choices and actions operate(17).

With regard to emotions, what considerations are possible about ADs? One of them is the instability of the decisions expressed in ADs, one of the most common criticisms. If people's desires, values and preferences can change over time, what guarantees the ADs moral authority to be required in the future? Stability in ADs decisions is one of the criteria for their support, and the manifest expression of self-determination by people assumes that they are free and reasonable. However, what is the role of emotions in the ADs process? Would they indicate the inevitable instability of decisions? Yes, if we admit, at the origin of ADs, that the idea of rationally controlling decisions about future medical care is correct. No, 1st) if we consider the expectation of control over such care as unrealistic (perhaps it would be more effective to admit that human decisions are permeated by feeling, acting and indeterminate contexts); no, 2nd) if we admit with Bobzien that emotions are as

human as reason(12). People's desires, values, and preferences do not seem to arise exclusively from rational inquiry.

Bringing ADs closer to an Aristotelian approach here may imply their shift to the practical domain of Aristotle's ethical investigation, recognizing that emotions are part of human choices and actions. This is an unavoidable risk. The process that constitutes the elaboration of ADs involves emotions that do not weaken them but make them authentic. ADs are fixed in relation to the stability of decisions, but are always required in the indeterminacy of circumstances. When choosing in advance about future medical care, people deposit in them not only the ways of understanding life and a happy life, but also the ways of feeling and acting. Decisions in ADs do not seem to occur despite emotions, but with them.

Deliberation, deliberate choice, phronesis and ADs

What constitutes the ADs elaboration process? What kind of decisions are involved? What is in people's power to decide? The ADs express, among other things, the idea of controlling our lives, determining, when possible, which life to live and which death to die, including. Decision-making strategies in medical care are common(18). For end-of-life care, which involves ADs, such strategies serve as a guide so that decisions involving the patient, family, and health care professionals express the patient's desires, values, and preferences and cause the least possible suffering to the family and to the professionals. As previously highlighted, the intended approach here is not intended to consider such strategies, but to address the process of elaborating ADs from what is within our power to deliberate, as formulated by Aristotle.

Deliberation is an inquiry that precedes deliberate choice. In Aristotle, only things within our power, and which may be different from what they are, are subject to deliberation. Death is an end set by nature, and if it is not within our power to decide whether to die or not, then what would be left for ADs if we restrict them to end-of-life care? Perhaps just deliberating about the means by which we wish to deal with death and dying, here and now, and projected into the uncertain future. It is

an attractive idea, but it seems ineffective, because for the moral agent, the field of manoeuvre for deliberation in ADs is restricted, since it remains for us to deliberate on the means and not on the ends, in the same way that the doctor does not deliberate whether he will cure or not, but only about the means by which he will reach the established end: the health of the patient.

Thus, in relation to the process of elaborating the ADs, it seems clear that it is up to the person in this process to deliberate and choose the course of action for the future since they know the current circumstances where their manifestations about consent or refusal of future medical care rest. However, it is worth mentioning that the agent deliberates and chooses something that will happen in the future, they do not have control over the action, as it is about the control over the choice. We can consider, on the other hand, that if deliberate choices operate in contingencies, in particular circumstances, it is impossible to assume what the person would want in the situation of no longer choosing which medical care to consent to and which to refuse; they would need to be in a future situation. In this way, we deliberate and choose in ADs in view of the circumstances in which we are.

In the practical domain established, we deliberate, choose, and act, here and now, and nothing else. In this domain of uncertainties, the practical wisdom (*phronesis*) of the virtuous person (the *phronimos*) will indicate, weighing reasons, which emotions and actions are correct, taking into account what is appropriate in each situation, in what way, in relation to whom and with what end(4:II 2 1104a32;3 1104b21-24;6 1106b20-23). In a sense, it is the yardstick for good deliberation, deliberate choice, and good action(15). Roughly speaking, it is up to the person in the process of preparing an ADs to establish, in the manner of a virtuous person, 1st) whether or not to prepare the AD; 2nd) through deliberation, weighing reasons, what is the most appropriate course of action for the circumstance, in view of the desired end; 3rd) deliberate choice, deciding whether the course of action offered by the deliberation will be chosen; 4th) that the choice made will be fulfilled in the future, but still dependent on a concrete circumstance. Despite the AD be-

ing constituted in view of the uncertain future, it will always be required in the present.

Good deliberation, deliberate choice, and good action, according to Aristotle, will always depend on the pairing of moral virtues with practical wisdom (*phronesis*), as noted by Russell(19). Roughly speaking, good deliberation, deliberate choice and good action in ADs require education for virtues (morals and *phronesis*), not to learn deliberative strategies, but of learning how to live well and die well, becoming in people sensitive to circumstances and facts(19). As rational agents, Lawrence highlighted, we aim to obtain the best, and this seems to be good living. The task of reason is both to seek what correctly constitutes good living and to maintain it. Good living is expressed by the constancy of virtuous actions(13).

“How to lead our lives?” and the ADs

“How to lead our lives?” seems to encompass, in a broad sense, the human capacity to elaborate projects on which to live and carry them out through choices and actions. Although it leads us to elegant ideals for these projects, such as the perfect life or what life should be, the question that never gets old seems to be limited to the contexts of the human world. This seems to be that of the possible, the contingent, subject to the indeterminacies of the human being. Not without purpose, Aristotle considered that ethical investigation does not aim at knowledge, such as knowing what virtue is, but aims to make us good(4:II 2 1103b26-28).

The central place assigned to reason in the contemporary world, as pointed out by Thiel, prompts people to take responsibility for their lives and deaths, extending this place to the point where subjective approaches to death and dying are no longer possible(20). ADs, to a certain extent, express part of this perspective, as they create the feeling that even death can be dominated, neglecting the existence of a body, with its desires, values, and preferences. The search for mastery of the future, although far from being achieved, is a human need.

The manifestation of wills, desires, values, and preferences, through ADs, comes close to the

determination of conduct for an uncertain risk situation, in which the patient, family members, and the health team contribute to the predictions. However, the virtual reality that is planned may not be the reality that will actually be presented. Possible safety mechanisms include the adoption of precautionary measures, such as that consist of designating a well-informed legal representative (substitute decision-maker), as well as care by health care professionals who are prepared to interpret unforeseen situations, so that they can be adapted as closely as possible to the person's wishes. With this, the total control of the person's autonomy through the ADs, although it can contribute decisively to their benefit, does not fail to present clear limitations. Perhaps this is one of the challenges to the principle of individual autonomy: not neglecting concrete contexts, real people, and existing relationships.

Aristotle's ethical investigation in *Nicomachean Ethics*(4) expresses the recognition that the practical domain is a field of imprecision and, therefore, the truth is by approximation. Perhaps the possible approach to the question "how to lead our lives?" in the context of ADs is to recognize that a happy life is a long process of virtuous choices and actions, here and now, and that even in the face of their consistency, we are always subject to failure. Therefore, Aristotle insists on education for virtues from an early age. However, nothing is guaranteed. Perhaps this is one of the few possible contributions of the Aristotelian approach to ADs, considering the question "how to lead our lives?", Wiggins points out that under no circumstances can the moral agent resort to a rule to determine what to do(21). Like the archer who aims his arrow at the target, maybe we also aim at which life to live. Just as the archer is not sure if he will hit the target before shooting the arrow in its direction, we will not know how to lead our lives without the choices and actions that lead to it. The aim is a happy life and good living.

Final considerations

In a way, this is the framework in which we intend to draw lines of approximation between the Aristotelian question "how to conduct our lives?" and ADs. In this investigation, we were interested in what is involved in the question "how to lead

our lives?" in a complete life, in each choice, here and now, with human limitations, with the indeterminacy of circumstances, with the uncertainty of the future, with death and dying.

Therefore, perhaps the ambitions to control future scenarios that address ADs derive from the desire to control the practical domain in which our choices and actions operate. Perhaps, also, ADs can contribute to making the life we live complete, through the most appropriate way of consenting to or refusing future medical care, with our desires, values and preferences, in short, with our biographies, in the appropriate context, in relation to the appropriate things, in the appropriate way, in relation to the appropriate people, with the appropriate emotions, at the appropriate time. Perhaps the ADs involve decisions with deliberate choice preceded by desire, deliberation, weighing reasons, to find the most appropriate course of action and achieve the desired end, such as dying without suffering. Aristotle, agreeing with Plato, emphasizes the importance of being educated from an early age to rejoice and suffer with to appropriate things, as noted by Hursthouse(22,4:II 3 1104b13).

Thus, we conclude that the purpose of human life, according to Aristotle, is not simply to live, but to live humanly; that the answer to the question "how to lead our lives?" also involves considering death and dying; and that Aristotle's ethical investigation may be an alternative, although limited, to address ADs without the necessary appeal to moral rules.

These were the approaches considered and pursued, from an uncontroversial position of Aristotle's ethical investigation in *Nicomachean Ethics*(4): we do not deliberate well, choose deliberately and act well despite emotions, but with them.

Conflicts of interest: The authors have no conflict to declare.

Authors' contributions: All authors contributed to investigation, and manuscript draft/editing/revision. This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

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Received: November 27, 2024

Accepted: January 22, 2025