What Is Death?

According to the physicalist, a person is just a body that is functioning in the right way, a body capable of thinking and feeling and communicating, loving and planning, being rational and being self-conscious. A body that is \textit{P functioning}, as I have sometimes put the idea. According to the physicalist, a person is just a P functioning body.

If we accept this idea, what should we say about death itself? What \textit{is} it to die, on the physicalist account? That is the question I want to turn to next. And we can approach that question by thinking about a closely related one: \textit{when} do I die?

The basic answer certainly seems like it should be straightforward enough. Roughly speaking, at least, the physicalist should say that I am alive when we’ve got a P functioning body, and so I \textit{die} when we no longer have that—when the body begins to break and it stops functioning properly. That does, in fact, seem to me to be more or less the right answer from the physicalist’s point of view. But as we’ll see, we’re going to need to refine it a bit.

First of all, then, we need to ask: \textit{which} functions are the crucial ones in defining the moment of death? Think about a properly functioning human body—yours, for example. Your body is currently engaged in a wide variety of functions. Some of these have to do with merely digesting food and moving the body around, making the heart beat and having the lungs open and close, and so forth. Call those things the \textit{body} functions, or B
functions for short. In addition, of course, there are also a variety of higher-level cognitive functions, which I’ve been calling the P functions (person functions). Now, roughly speaking, I die when the body’s functioning stops. But which functions are the relevant functions? Is it the B functions or the P functions—or both?

The answer to this question isn’t obvious, because normally, of course, P functioning stops at the same time as B functioning. Science fiction examples aside, P functioning depends on B functioning. So normally we don’t need to ask ourselves which type of functioning is the relevant kind for defining the moment of death. We lose both, more or less simultaneously.

That’s the situation we have in Figure 8.1, where I’ve drawn a schematic history of my body, from the start of its existence (at the left) to the end of its existence (at the right). We can divide that history into three major phases, A, B, and C. During the first two phases—A and B—my body is functioning just fine. At least, it’s carrying out its body functions perfectly well (digesting, breathing, moving, and so on). Initially, though, in phase A, that’s all it’s capable of. It can’t yet engage in the higher cognitive processes we’ve been calling P functioning. For some initial period of time, the brain simply isn’t sufficiently developed to engage in communication, rationality, creativity, self-consciousness, and the like. So we don’t yet have P functioning. That doesn’t start until phase B. Finally, in the last phase, C, my body can no longer P function or B function. It is no longer functioning at all. It’s just a corpse. (Obviously, more fine-grained divisions would be possible as well; but these should suffice for our purposes.)

So that’s the normal case. The body begins to exist, and for a while, in phase A, it is capable of B functioning but not P functioning. But then, after a while, both B functioning and P functioning are going on. That’s phase B. And then, after a considerably longer while, they both stop. Perhaps I’ll be
in a car accident, or have a heart attack, or die from cancer. Whatever the precise cause, my body will no longer be capable of B or P functioning. Of course, my body will still exist—for a while, at least. But it will be a corpse. That’s phase C.

Now, when did I die? The natural suggestion is to say that I died at the very end of phase B, when my body stops functioning. So I’ve drawn a little star there, to mark that point. Since this is the normal case that we’re thinking about, where both my body functions and my person functions stop at the very same time, it is, I suppose, uncontroversial that my death occurs at the moment marked by the star. That’s when I die.

But we can still ask, which loss was the crucial one? The loss of P functioning or the loss of B functioning? Which loss is relevant for defining the moment of my death? You can’t tell by thinking about the normal case, because the B functioning and the P functioning both stop at the same time. But suppose we draw an abnormal case. Imagine that I suffer from some horrible disease that will eventually destroy my ability to engage in any of the higher-level cognitive processes that we are grouping together as P functioning. However—and this is the crucial point—for some period of time after that (months or years), my body will still be able to carry out its B functions in the ordinary way. Eventually, of course, my body will lose its ability to B function as well. But in the case I’ve got in mind, the P functioning stops long before the B functioning does. That’s what we’ve got in Figure 8.2.

![Fig. 8.2](image)

This time, I’ve divided the history of my body into four phases. Once again, in phase A the body is capable of B functioning but not yet capable of P functioning, in phase B it is capable of both, and in phase C it is capable of neither. But now there is a new phase, phase D. That’s the period where the ability to P function has been lost, but the body is still engaged in B
functioning. (Obviously, the phases are no longer in alphabetical order; but I introduced D in the middle so that the other phases could keep their old labels.)

In this case the loss of P functioning and B functioning come apart. Body functioning stops at the end of phase D, person functioning at the end of phase B. That much is clear. But when does death occur? When do I die? There are, it seems, two suggestions worth taking seriously, and I’ve marked each with a star. Either death occurs when person functioning stops, or it occurs when body functioning stops. And interestingly enough, which answer seems more plausible may depend on whether we accept the body view or the personality view.

Suppose we accept the personality view. Then for someone to be me, they’ve got to have the same evolving personality as I have. And this means, of course, that for me to exist, my personality has to be around as well.

One fairly straightforward implication of this view, then, is that in phase C, I don’t exist. After all, during phase C, there’s nothing with my personality. Nobody thinks they’re Shelly Kagan. Nobody has my memories, beliefs, desires, and goals. Pretty clearly, then, on the personality view I don’t exist at phase C. Of course, if we’re speaking loosely, we can say that I am just a corpse. But that’s potentially misleading, insofar as it suggests that I still exist—as a corpse. Strictly speaking, however, that’s just not true. It would be more accurate to say that all that is left of me is a corpse. In phase C, I no longer exist.

But what about phase D? Here, at least, my body is still functioning. Or rather, more precisely, it is engaged in B functioning. But for all that, my personality has been destroyed. Nothing exists with my beliefs, memories, desires, fears, or ambitions. But according to the personality theory, for me to exist at a given time there has to be something at that time that has my personality. And that’s just not true during phase D. So I don’t exist during phase D either. In short, since my personality ended at the close of phase B, it seems that those who accept the personality theory should say that I died at the end of phase B as well. The moment of my death is the one marked by the first star, the moment where my body loses the ability to P function.

All of that is reasonably straightforward. But there is a complication. Suppose that instead of asking whether I exist or not, we ask whether I’m alive. Phase D now seems a bit more puzzling.

Presumably, we’re all agreed that my body is still alive in phase D. After all, it’s fully engaged in B functioning. But what about me? Am I
alive? That’s rather hard to believe. Think about what we would be saying: I don’t exist, but I’m alive! That seems like a very unpalatable combination of views. How can I be alive if I don’t even exist? So it looks like we’re going to have to say that I am not alive during phase D. Not only don’t I exist, I’m not alive either.

Yet even though I’m not alive, my body is. So the personality theorist needs to draw a distinction between my being alive, on the one hand, and my body being alive, on the other. In the normal case—Figure 8.1—my body stops being alive at the very same moment that I stop being alive. The two deaths occur simultaneously. But in the abnormal case—Figure 8.2—the two deaths come apart. The death of my body occurs at the second star; my death occurs at the first.

That, at least, is what we should say if we accept the personality view. But what if, instead, we accept the body view? Now things really get interesting. According to the body view, for me to exist at a given time there’s got to be somebody around with my body at the relevant time. They don’t have to have my personality; having my body suffices. (“Follow the body.”) So consider phase C. All that’s left of me is a corpse. But what is a corpse? It’s a body, and indeed, my corpse is my body. Since my corpse is still around, that means that my body is still around. And so—given the body view—that means that I’m still around. I’m dead, of course, but I still exist.

(Why does the body theorist agree that in phase C I’m dead? Unlike the personality theorist, the body theorist has no need to distinguish between my being alive and my body’s being alive. Since my body is not alive in phase C, the body theorist reasonably holds that I am not alive either.)

Think about the question with which this book began. Can you survive your death? Will you still exist after you die? According to the body view, there’s good news and there’s bad news. The good news is, you will exist after your death. The bad news is, you’ll be a corpse. That seems like a bad joke, but if the body view is right, it’s not a joke at all. It’s the literal truth. After I die, I will continue to exist, at least for a while. Eventually, of course, my body will decay, turn into atoms, decompose. At that point my body will no longer exist, and I will no longer exist. But at least for a while, during phase C, the body theorist should say, “Yes, Shelly Kagan still exists. He exists, but he’s not alive.”

This just reinforces the point I was making in the last chapter, that the crucial question is not survival per se. The crucial question is, what do you want out of survival? And one of the things I want out of survival is to be
alive. Admittedly, according to the body view, I will still exist during phase C. But I won’t be alive. And so I won’t have what matters. That, I take it, is what a body theorist should say. (In contrast, of course, on the personality view, I don’t even exist when all that’s left is my corpse.)

And what should the body theorist say about phase D? Something similar. Here too, of course, I exist, since my body exists. What’s more, in phase D, unlike phase C, I am alive—since my body is alive. Sadly, however, I am still not a person. My body cannot P function. Thus, it is still the case that I fail to have what matters. It isn’t enough to exist, and it isn’t enough to be alive. Rather, I want to be a living person—and we only have that in phase B.

In short, according to the body view, I die at the moment marked by the second star, when my body is no longer alive. But I lose what matters at the moment marked by the first star, when I stop being a person.

“When I stop being a person.” That’s an odd and rather surprising turn of phrase. Most of us, I imagine, think that being a person is the sort of thing I cannot stop being until I stop existing altogether. In the jargon of philosophy, being a person is one of my essential properties: it is a property I must have if I am to exist at all. But it seems that if we accept the body view, we will have to say that being a person is not one of my essential properties. I can stop being a person and yet continue to exist.

I am, of course, in fact a person, but according to the body view that won’t always be true of me. When I am a corpse, I will cease to be a person, but I will still exist. And if I end up in one of the abnormal cases—where my body continues to digest, pump blood, and respirate, but it is no longer capable of thinking and reasoning and so forth—then there too we will have to say that I exist, indeed I am alive, but I am not a person.

On this view, then, being a person is something you can “do” for a period of time and then stop doing, without going out of existence. It is like being a child, or being a professor. These are things that you can be, for a while, and then stop being, without ceasing to exist. I was a child once, and I no longer am; but I still exist. Being a child was just a “phase” I went through. Similarly, then, on the body view, being a person is just a phase that I—that is to say, my body—can go through. Being a person is something that my body can do for a while. It wasn’t doing that during phase A. It certainly won’t be doing that in phase C. And if I find myself in one of the abnormal cases, then it won’t be doing that in phase D either. Being a person isn’t something that I am essentially; rather, I am a person for only part
of my existence—and, indeed, for only part of my life. That, at least, is what the body view says. (For the personality view, in contrast, it seems that being a person is indeed one of my essential properties. I cannot exist at all, unless I exist as a person.)

Notice, incidentally, that if we do adopt this sort of position, then there is something somewhat misleading about the standard philosophical label for the set of problems we've been thinking about for the last few chapters. We've been worrying about the nature of personal identity—that is to say, what it is for somebody to be me. But notice that this very label, “personal identity,” seems to have built into it the assumption that whatever it is that’s me is going to be a person (and so the relevant question is only whether a given person is the same person as me or not). But now, it turns out, this assumption—built right into this standard label—may well be false. On the body view, something could still be me without being a person at all. Perhaps, then, philosophers shouldn’t call our topic the problem of personal identity after all, but simply the problem of identity. (Earlier parts of our discussion of personal identity may have been misleading in just the same way. For example, in Chapter 6 I said that I will survive provided that there is some person in the future who is the same person as me. As we now can see, however, that may be more than what my bare survival actually requires.)

In addition to the questions we have been asking about the end of life, there are, of course, corresponding questions concerning the beginnings of life. In particular, what should we say about phase A, when the body is engaged in B functioning but the brain has not yet gotten to the stage at which it is capable of P functioning? Do I exist during that phase or don’t I? Presumably, if we accept the body view we should say that I do exist in phase A. Admittedly, I am not yet a person in phase A, but no matter; as we have already seen, according to the body view I can exist without being a person. In contrast, if we accept the personality view, then we should say that I do not yet exist in phase A, even though my body does, since my evolving-through-time personality has not yet begun. There are further complications even here (for example, when exactly does my body begin to exist?), but since the start of life is not, strictly, our topic, I am going to have to leave these fascinating and difficult questions aside.

Instead, let’s think a bit more about phase D. Imagine that my body’s ability to P function has been destroyed, but its ability to B function continues unabated. So there’s my body, lying in the hospital bed: the heart’s pumping, the lungs are breathing, it is able to digest food, and so forth, but
it will never again be able to think, to reason, to communicate, to love or be aware.

Next, imagine that you have someone who needs a heart transplant. Tissue compatibility tests reveal that my body is a suitable donor. So what you need to know now is, is it morally permissible to take the heart out of my body or not?

In the normal case, of course, when thinking about whether it is morally permissible to remove someone’s heart from their body, all we need to ask is, “Is the potential donor still alive?” After all, if she is alive, and you remove her heart, she’ll end up dead; you will have killed her. And obviously enough, that’s morally forbidden: people have a right to life, which certainly seems to include (among other things) a right not to be killed.

But thinking about the abnormal case helps us realize that things are actually somewhat less straightforward than we might otherwise recognize. Suppose, for example, that we accept the personality view. Then, as we have seen, the correct thing to say about phase D seems to be that I am no longer alive, but my body is. And this means, of course, that even if you remove my beating heart from my chest, you won’t actually kill me—after all, I am already dead—you will only kill my body. And it isn’t at all obvious whether doing something like that is morally impermissible or not.

Most of us, no doubt, would feel uncomfortable—to say the least!—in taking a beating heart out of a living body. It just seems horrendously immoral to even contemplate doing something like that. But perhaps that is just confusion on our part, brought on by our failure to think the issues through sufficiently carefully.

What we need to decide, presumably, is who or what it is that actually has the right not to be killed. Do I have the right to life, or does my body have the right in question? (Or are there, perhaps, two such rights—one had by me and one had by my body?) On the one hand, if my body has a right to life, then it is indeed immoral to take my heart, even though I am already dead! But on the other hand, if it is just me that has a right to life—if the person is the rightholder, not the body—then it may well be permissible for you to remove my heart after all (perhaps after getting my family’s consent), even though this will kill my body, since doing so won’t actually violate my right to life at all. Admittedly, accepting the personality view doesn’t settle this question (we’d need to turn to a lengthy discussion in moral philosophy to try to do that), but it is striking to realize that it at least opens the door to saying that it is permissible to kill the body, so long as doing so doesn’t actually kill the person.
And what if it is the body view that we accept, rather than the personality view? According to the body view, of course, I am still alive in phase D. So it may seem obvious that here, at least, we do indeed need to say that it would be wrong to harvest the heart, since doing so would kill my body, and thus kill me. Surely, we may find ourselves wanting to say, if anything violates my right to life, removing my beating heart while I am still alive does that, and thus is morally forbidden.

But even here, things are not so simple. As we have already seen, being alive is not all that it’s cracked up to be! In terms of getting what matters, the important question is not whether I am alive or not, but whether or not I am a person. And in phase D, even though I am still alive, I am not a person anymore. Conceivably, then, sufficient reflection on this sort of case might eventually persuade us that the so-called right to “life” is somewhat misleadingly named. Maybe it’s not so much that I have a right not to be killed, as that I have a right not to be “depersonified”—a right not to have my personality destroyed. If that’s the real right, then here too there would be nothing unacceptable about removing my heart, given that my personality has already been destroyed. To be sure, in the normal case killing someone does destroy their personality, and so is impermissible. But in the abnormal case, where I am still alive though no longer a person, perhaps killing me can be morally justified after all.

I hope it is obvious that these are all important and difficult questions. But we don’t have the space to pursue them properly here. And so, having merely gestured in the direction of some possible answers, I am going to put these further questions aside as well.

**Ability**

As we have seen, if we accept the personality view then the moment of death should be defined in terms of P functioning, rather than B functioning. Roughly speaking, I am alive only as long as my body is a P functioning body. If it isn’t still P functioning, then even though my body may still be alive, I am no longer alive: I am dead.

Surely something along those lines is what we are going to want to say about death, given the personality view. But it can’t be quite right as it stands. To see this, think about last night. Let me suppose that last night, at 3:20 A.M., you were fast asleep; indeed, let’s suppose you were in a deep, dreamless sleep. You weren’t thinking. You weren’t reasoning. You weren’t...
communicating. You weren’t remembering. You weren’t making plans. You weren’t being creative. You weren’t engaged in any form of P functioning at all.

But if we accept the idea that when your body stops P functioning you’re dead, then we have to say—unacceptably—that you were dead last night at 3:20 a.m.! Indeed, since you doubtless went through various cycles of dreamless sleep followed by dreaming, we’ll have to say that you were dead and then alive and then dead again, on and off and on and off all through the night. That’s clearly not the right thing to say. So we are going to have to be a bit more careful in defining the idea of death. We cannot simply say that if your body isn’t P functioning, you’re dead. We need a more subtle approach.

One natural suggestion for the personality theorist to make is to say that it’s okay if you aren’t P functioning, as long as your failure to P function is temporary. If your body has been P functioning in the past (and so you already are a person) and it will P function again in the future, then you are still alive, even if it isn’t P functioning now. That nicely handles our case of dreamless sleep, since even though you weren’t P functioning at 3:20 a.m., you did indeed resume P functioning later; so we are able to say, appropriately, that you remained alive even during dreamless sleep. According to this suggestion, then, death requires more than the lack of P functioning: P functioning has to have stopped permanently.

But this revision won’t quite do either. It still misclassifies certain examples, calling some people dead that intuitively we take to still be alive, and calling other people alive that intuitively we take to be dead. For an example of the first sort, consider a modification of our example of dreamless sleep. Imagine that Frank was in a period of dreamless sleep last night, from 2:00 a.m. until 2:30 a.m., and then, tragically, at 2:30 a.m. he had a heart attack and died in his sleep, never regaining consciousness, indeed never resuming P functioning of any sort. According to our current proposal Frank died at 2:00, since it was at 2:00 that he stopped P functioning for the very last time. Intuitively, however, that seems to be the wrong answer. Frank was still alive, albeit in dreamless sleep, at 2:15. He didn’t die until 2:30, when he suffered the heart attack. So the mere fact that P functioning has stopped, never to resume, is not sufficient for death.

Nor is it necessary. That is to say, in at least some imaginable cases a person can be dead despite the fact that P functioning will eventually resume! Suppose, for example, that come Judgment Day, God will resurrect
the dead. In particular, then, after the resurrection there will be someone (and only one someone) who has the very same personality as you had just before your death. According to the personality view, as we know, that postresurrection person will be you. You will be alive; you will have been resurrected. And the same thing is true, let us suppose, for everyone: everyone who has ever died will once again be alive.

That’s what we want to say. But according to our current proposal, to say this is a mistake—for despite what we may have thought, none of these people were ever really dead in the first place! After all, after the resurrection all of these formerly “dead” people will be P functioning. And that means, of course, that despite the fact that P functioning had stopped—in some cases for hundreds or thousands of years—it never stopped permanently. The break in P functioning was only temporary, like when we are in dreamless sleep, only for a much longer period. So all these people were alive all along; they never died at all.

That’s what the current proposal has to say, and it just doesn’t seem right. On Judgment Day, God resurrects the dead. It’s not that he simply wakes up those in a deep, deep “sleep.” So the current proposal—that death is a matter of permanent (rather than temporary) cessation of P functioning—doesn’t seem quite right either.

Here’s a different proposal, one that I think is probably closer to the right account. It starts with the important observation that when you are asleep, even if you are not actually engaged in P functioning, nonetheless it remains the case that you are capable of P functioning. For example, when you are sleeping you are not doing your multiplication tables. And yet, for all that, you could still do your multiplication tables. How do we know that? All we have to do is wake you up! We wake you up and we say, “What’s three times three?” And after you stop swearing at us, you’ll say, “Well, it’s nine.” Similarly, if you know a foreign language—French, let’s suppose—then even though you aren’t speaking it while you are asleep, it is still true of you while you are asleep that you can or could speak French. We could wake you up, ask you to conjugate such and such a verb, and you could do it. More generally, then, even if you are not engaged in P functioning while you are asleep, it is still true of you, even while asleep, that you have the ability to engage in P functioning.

Abilities aren’t always actualized. Your P functioning is actualized now, because you’re engaged in thought, but you don’t lose the ability to think during those moments when you’re not thinking. Suppose, then, that the personality theorist says that for you to be alive is for you to be able to
engage in P functioning. And to be dead is to be unable to engage in P functioning. Why are you unable? Presumably because the cognitive structures in your brain that underwrite the ability to P function have been broken, so that they no longer work. When you are dead, your brain is broken. It’s not just that you’re not currently engaged in P functioning, it’s that you’re no longer able to engage in P functioning.

An account along these lines seems to handle our various cases properly. In dreamless sleep, you are still able to P function, even if you aren’t actively engaged in P functioning, and so you are not dead. Even Frank, who tragically will soon die of a heart attack in his sleep, isn’t dead until the heart attack, since during his last half hour of dreamless sleep he too is capable of P functioning (though he isn’t engaged in any). So the account doesn’t inappropriately misclassify the living as dead. Nor does it misclassify the dead as living. If God will resurrect the dead on Judgment Day, then it’s true that at that point in the future they will once again engage in P functioning. But for all that, it isn’t true right now, of those who have died, that they can engage in P functioning. On the contrary, right now they can’t engage in P functioning; their brains are broken—or worse! So until God fixes them, until God resurrects them, the dead are indeed dead, just as we thought.

An account along these lines also gives us some helpful guidance when thinking about still other potentially puzzling cases. Take somebody who is in a coma, not engaged in P functioning. Their body, let’s stipulate, is still alive. (The heart is still beating, the lungs are still breathing, and so forth.) But we wonder, is the person still alive? They are certainly not actively engaged in P functioning. But the relevant question, we now realize, is this: can they still engage in P functioning?

To answer that, of course, we will need to know more about the underlying physical situation. It will depend on the details. Are the relevant cognitive structures still there? Or have they been broken or destroyed? Think for another moment about what’s going on in sleep. When someone is asleep, we need to do something to wake them up, something to turn the P functioning back on. The cognitive structures are still there, but the on-off switch is switched to off. Perhaps that’s what it’s like when someone is in a coma, or certain types of comas. Suppose, then, that the right way to think of the case is something like this, Coma Case One: the cognitive structures in the brain relevant for P functioning are still in place, it’s just that the on-off switch is stuck in the off position (or perhaps, to shift the metaphor slightly, there’s a lock on the switch). And so we can’t turn the
switch on in the normal way. Shaking the person in the coma and saying, “Wake up, Jimmy” doesn’t do the trick. But for all that, although the on-off switch may be stuck in off, if the underlying cognitive structures of the brain are such as to still make it true that if we were to flip the on-off switch back to on, the person could still engage in P functioning, then maybe the right thing to say is that the person is still alive.

Contrast that with Coma Case Two. (I don’t know if this would still qualify as a coma from a medical perspective, but that needn’t concern us here.) Imagine that what’s gone on is this: there has been decay of the relevant brain structures that underwrite cognitive functioning. So now it isn’t simply that the on-off switch is stuck in the off position. Rather, the brain is no longer capable of engaging in the relevant higher-order P functions. The damage is too severe. Here, it seems, the right thing to say may well be that the person is no longer alive. Their body is still alive, but the person has died.

In short, if we accept the personality view, where death is to be defined in terms of the loss of P functioning, it seems that the most plausible thing to say is that death requires the loss of the ability to P function. The mere loss of P functioning itself—the mere fact that P functioning has stopped, even permanently—is not sufficient for death, as long as the ability to P function is retained.

But what if you accept the body view, rather than the personality view? Then, it seems, the moment of death should be defined in terms of B functioning, rather than P functioning. And so we will say—at least, as a first pass—that I am alive only as long as my body is a B functioning body. If it isn’t still B functioning, then I am no longer alive: I am dead.

Does this account also need to be refined? Is it a mistake, here too, to think in terms of the loss of the relevant sort of functioning rather than the loss of the ability to carry out the functioning in question? Should the body theorist define death in terms of the loss of the ability to B function? Or does it suffice to say that death comes when the body stops B functioning? (In any event, we presumably won’t want to say that death requires that B functioning stop permanently. For if we did say that, then we might have to say—unacceptably—that if God will genuinely resurrect our bodies on Judgment Day, then none of the “dead” are truly dead.)

It is difficult to know what to say here, in part because it is difficult to think of cases in which the body stops B functioning and yet retains the ability to B function. (There is no obvious analog of the dreamless sleep case for the body theorist.) If a body stops B functioning for more than a
few moments, decay rapidly sets in, and soon enough the ability to function is lost as well.

Of course it isn’t difficult to think of cases where one or another function has stopped while the others continue. Suppose that someone has a heart attack, and their heart stops beating for a few moments, until an electric shock is applied, and it starts up again. Were they dead during the intervening moments? Sometimes we talk that way, but I am not sure whether it is the right thing for the body theorist to say, especially given that various other functions were going on during the relevant period. What we’d like to have is a case in which all functioning is stopped, and yet, somehow, the ability to function has not been destroyed.

How about this? Suppose we put somebody in a state of perfect suspended animation, cooling their body down so that the various metabolic processes come to a complete stop. Imagine, though, that if you heat them back up properly, they will start functioning again. We certainly can’t do that yet, at least not with humans. But there’s no obvious reason to think this must be impossible. So imagine that we eventually learn how to do this with humans, and we take Simon and put him into this state of perfect suspended animation. Is he dead?

To be honest, when I think about this case I am not sure what to say, nor is it clear to me what the body theorist should say. In some moods I find myself wanting to say that Simon is dead; in other moods, that he’s still alive. (And in still other moods, I find myself thinking that maybe we need a third category to cover this case: perhaps Simon is neither dead nor alive; he’s suspended.) I imagine that my confusion is shared by many others. In any event, let’s consider the two (main) possibilities.

If we want to say that Simon is still alive while suspended, then presumably the body theorist should move to a definition of death according to which death requires the loss of the ability to function. After all, it is a stipulation of the case that while he is in suspended animation no functioning of any sort is taking place. So if the cessation of functioning suffices for death, we would have to say that Simon is dead while suspended. (And so reanimation, heating him back up, brings him back to life—back from the dead.) In contrast, if we define death in terms of the loss of the ability to function, then we may be able to say that Simon remains alive, even while suspended. After all, the relevant brain and other bodily structures (needed to underwrite B functioning) remain in place, undamaged, even while Simon is suspended. There is a clear sense in which suspended
animation is like Coma Case One, where the on-off switch is stuck—literally frozen!—in the off position. Reanimating Simon, then, won’t bring him back to life, for he will never have been dead. It will simply allow the B (and P) functioning to resume.

On the other hand, if we want to say that Simon is dead while suspended, then perhaps the body theorist should stick with the definition of death which holds that the cessation of B functioning is indeed sufficient for death. On this view, it won’t matter that Simon’s body remains, in principle, capable of B functioning. It isn’t B functioning, and so, we can say, he is dead.

Note, incidentally, that the case of suspended animation can be puzzling from the perspective of the personality theorist as well. If I am right in suggesting that the personality theorist should define death in terms of the loss of the ability to P function, then it seems that we will have to say that Simon remains alive while suspended. For as I have just pointed out, it does seem as though there is a sense in which Simon’s body retains its ability to carry out its various functions, including P functions, even while suspended. But what if the personality theorist wants to say instead that Simon is dead while suspended? Since the personality theorist cannot hold that actually engaging in P functioning is required to be alive (for if she did say that, then you are dead during dreamless sleep), she will presumably need to claim that in the relevant sense of ability, while Simon is suspended he no longer has so much as the ability to P function. He may—if reanimated—regain that ability; but while suspended he lacks it. Obviously, making out this last position will require still further work: we will need to distinguish different notions of ability, and we will need to explain why someone in a coma, say, may still have the relevant sort of ability, while someone in suspended animation does not. It does seem to me possible that the relevant distinctions could be provided and defended; but I won’t try to investigate the question any further here.

In any event, aside from the question of how best to classify the case of suspended animation, it seems to me that once we become physicalists there is nothing especially deep or mysterious about death. A healthy human body is able to function in a variety of ways. As long as the relevant lower-level B functions are occurring (or, perhaps, able to occur), the body is alive. Of course, when all goes well, the body is also able to engage in certain higher-order cognitive functions, P functions. And then you’ve got a living person. Sadly, however, eventually the body begins to break. It loses the ability to P function. At that point, we no longer have a living person.
Eventually—perhaps at the same time, perhaps later—the body will break even further, losing the ability to function as well. And that is the death of the body.

There may of course be a lot of details to work out from the scientific point of view. But from the philosophical point of view there is nothing mysterious going on here. The body works and then it breaks. That’s all there is to death.