



**SUICIDE EXAMINATION IN THE NOVELS OF
JOJO MOYES AND LOIS LOWRY: FROM
TABOO TO CAUSE**

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THESIS APPROVAL PAGE

I certify that in my opinion the thesis submitted by Enas ALRUDAINI titled “SUICIDE EXAMINATION IN THE NOVELS OF JOJO MOYES AND LOIS LOWRY: FROM TABOO TO CAUSE” is fully adequate in scope and in quality as a thesis for the degree of Master of Arts.

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This thesis is accepted by the examining committee with a unanimous vote in the Department of English Language and Literature as a Master of Arts thesis. March 14, 2023.

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The degree of Master of Arts by the thesis submitted is approved by the Administrative Board of the Institute of Graduate Programs, Karabuk University.

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Director of the Institute of Graduate Programs

DECLARATION

I hereby declare that this thesis is the result of my own work and all information included has been obtained and expounded in accordance with the academic rules and ethical policy specified by the institute. Besides, I declare that all the statements, results, materials, not original to this thesis have been cited and referenced literally.

Without being bound by a particular time, I accept all moral and legal consequences of any detection contrary to the aforementioned statement.

Name Surname: Enas ALRUDAINI

Signature :

FOREWORD

I am indebted to my supervisor Assoc. Prof. Dr. Harith Ismail TURKÍ for his patience, interest, and support of my study.

It would have been impossible for me to achieve this level without the support, encouragement, and love of my husband, Ali, and my family.

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ABSTRACT

The study explored suicide through the lens of psychology in both JoJo Moyes's *Me Before You* and Lois Lowry's *The Giver* based on Sigmund Freud's Drive Theory (1923). Psychoanalysis in this study examines the pleasure principle and how effective it is in dealing with life and death instincts (Eros and Thanatos). In this study, the aim is to identify the root causes of self-destructive behavior and understand the reasons behind it. Death wish is examined in terms of narcissistic suicide afflicted with melancholia, whereas the desire to live is made a priority as a way of improving individuality and civilization. Chapter One is devoted to the introduction to give a broad outline of what suicide is, and the next two chapters are concerned with the analysis of the conflicting forces: the wish to die and the wish to live. Chapter Two focuses on the determination of Moyes's main character, who questions the quality of life by choosing voluntary euthanasia. Lowry's main character struggles selflessly to restore humane feelings in his community, which challenges the concept of non-voluntary euthanasia in Chapter Three. Despite being fictional, both novels portray realistic psychological implications. As Moyes adapts to an ordinary setting, Lowry chooses a dystopian one. Consequently, the study presents a psychological conclusion regarding suicide and its taboo nature.

Key Words : Suicide, Taboo, Pleasure / Unpleasure Principle, Euthanasia, Voluntary / Non-voluntary Euthanasia, Eros and Thanatos, Drive Theory, Life / Death Wish, Civilization.

ÖZ

Çalışma, hem JoJo Moyes'in *Senden Önce Ben*'inde hem de Lois Lowry'nin *The Giver*'ında intiharı psikolojinin merceğinden inceliyor. Sigmund Freud'un *Dürtü Teorisine* (1923) dayanmaktadır. Bu çalışmada psikanaliz, haz ilkesini ve yaşam ve ölüm içgüdüleriyle (Eros ve Thanatos) başa çıkmada ne kadar etkili olduğunu inceler. Bu çalışmada amaç, kendine zarar verme davranışının temel nedenlerini belirlemek ve arkasındaki nedenleri anlamaktır. Ölüm arzusu, melankolik bir kişinin narsist intiharı açısından incelenir. Bireyselliği ve uygarlığı geliştirme yolu olarak yaşama isteği ön planda tutulurken. Birinci Bölüm, intiharın ne olduğunun geniş bir taslağını vermek için girişe ayrılmış olsa da, sonraki iki bölüm çatışan güçlerin analiziyle ilgilenecek: ölme arzusu ve yaşama arzusu. İkinci Bölüm, gönüllü ötenaziyi seçerek yaşam kalitesini sorgulayan Moyes'un ana karakterinin kararlılığına odaklanıyor. Lowry'nin ana karakteri, Üçüncü Bölüm'de gönüllü olmayan ötenazi kavramına meydan okuyan, topluluğuna insani duyguları geri getirmek için özverili bir şekilde mücadele ediyor. Kurgusal olmasına rağmen, her iki roman da gerçekçi psikolojik imalar tasvir ediyor. Moyes sıradan bir ortama uyum sağlarken, Lowry distopik bir ortam seçer. Son olarak, çalışma intihar ve onun tabu doğası hakkında psikolojik bir sonuç sunuyor.

Anahtar Kelimeler : İntihar, Tabu, Haz/Hoşnutsuzluk İlkesi, Ötenazi, Gönüllü/İstemsiz Ötenazi, Eros ve Thanatos, Dürtü Teorisi, Yaşam/Ölüm Arzusu, Uygarlık.

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SUBJECT OF THE RESEARCH

Using the psychological readings of *Me Before You* by JoJo Moyes and *The Giver* by Lois Lowry, this study examines self-destructive behaviors prompted by suicide.

PURPOSE AND IMPORTANCE OF THE RESEARCH

In this study, suicide issue is viewed from various perspectives in regards to assessing the quality of life and addressing euthanasia debate. By way of a quadriplegic young man who chose, autonomously, to end his life by voluntary euthanasia, the author presents a thorough explanation of the quality of life seen from the perspective of a disabled man. Therefore, the author asks when the quality of life becomes meaningless, so that the individual can choose to end their lives

As for the second text, Lowry depicts a young adult who is on the verge of death, but instead clings to life. Death has become a means of controlling others in Lowry's dystopian society, and suicide has become taboo. So how would the character respond if civilization were to fall into extreme radical rules that endanger the lives of individuals?

Since the study is a continuation of previous studies, a forerunner to future research on self-destructive behavior, it also provides a comprehensive psychological analysis of suicide as follows:

- 1- In the first case, suicide is conceived and unconsciously planned either by an individual's ideation or by social pressures.
- 2- Suicide possesses a taboo nature due to its psychological conclusion.
- 3- By delving into the psyches of the characters, with their mental health either damaged or affected, the psychological mechanisms beyond their actions become manifest to the limit of their capability.

METHOD OF THE RESEARCH

In this study, Sigmund Freud's Drive Theory (1923), which explains the complexity of human behavior, is applied to the selected texts. In this approach, the

analysis involves scrutinizing the human psychological preferences in order to shed light on the characters' intrinsic mental processes that are unconsciously motivated towards self-annihilation.

HYPOTHESIS OF THE RESEARCH / RESEARCH PROBLEM

The present study is designed to address questions related to suicide as a way of assessing quality of life despite its taboo implications. A substantial piece of knowledge would be supported by the clarification of the major and secondary issues surrounding euthanasia and their relevance to individual autonomy.

SCOPE AND LIMITATIONS / DIFFICULTIES

This study provides an extensive method for analyzing and assessing those who suffer from serious problems due to psychological or physiological factors. However, it is restricted to the psychological discussion of the human psyche. In lieu of focusing on suicide stigmatization, the study suggests researching the root causes of suicide regardless of a person's physical limitations.

1. THEORETICAL BACKGROUND

1.1. Introduction

There is but one truly serious philosophical problem, and that is suicide. Judging whether life is or is not worth living amounts to answering the fundamental question of philosophy (Camus, 1955, 4).

During 1918, the world witnessed a hidden force, the Spanish influenza pandemic, which caused death to more than 40 million lives. Similar waves are already occurring, although the name is different. One notable appearance occurred during H1N1 in World War I and the recent COVID-19 was suicide. In both periods, the estimated deaths are not only restricted to those infected with the flu virus, but also included those who were hysterically affected by the viral outbreak. Triggers to suicide have been identified, such as social, emotional, or economic problems that are related to COVID-19. In other words, “xenophobia, COVID-19-related stigma and social boycott, financial insecurities and uncertainty concerning the future” (Efstathiou et al., 2022, p.5) can be considered as leading causes of isolation, loneliness, depression, which all lead to different mental disorders. Besides, a numerous number of men committed suicide in a “suicide wood” during 1918-1919 as a result of emotional and psychological damage left behind, i.e., “The flu seemed to leave people with distracted minds” (Outka, 2019, p.127). Therefore, the flu’s dreadful effect combines both physical and psychological sufferings.

It has been found that suicide rates have increased in the long run regardless of the causes, and they are expected to rise further. As long as COVID-19’s symptoms have not yet disappeared and seem to have passive effects, awareness must spread regarding suicide prevention because its symptoms do not merely relate to physical infirmities but also to psychic problems. Consequently, a combination of physical and psychological weaknesses would have a double impact; the suicide of “significant others” for those who survived a suicide attempt, and the emergence of “feelings of confusion, doubt, non-acceptance, hopelessness, helplessness and stigmatization” (Efstathiou, al, 2022. p.5) which may result in people not being able to say a decent goodbye to their loved ones because of newly regulated adaptation procedures.

In order to examine the suicide impact based on a psychological perspective, it is therefore necessary to construct the framework of this study on such an exceptional condition. Through the selected novels of JoJo Moyes's *Me Before You* and Lois Lowry's *The Giver*, the psychological, physical, or mental struggles that lead to self-destruction behaviors are examined. Additionally, the desire to live opposes the main argument as the antithesis of death, bringing both suicide and life into a comparative analysis.

Death by suicide ranks worldwide as a dominant cause of self-infliction, i.e., "suicide was the second most important (leading) cause of death globally; suicides took more life than war, violence, and human immunodeficiency virus (HIV)" (Gjertsen et al., 2019. p.1). In addition, suicide has been wrapped in different forms of legitimacy that shift between opponents and proponents in a slippery slope of the euthanasia argument. In this study, both novels examine euthanasia in order to learn what psychological reasons lie behind the decision to end one's life, even though both terms were already practiced and became permissible; "legalizing them would be morally unacceptable" (Benatar, 2016, p.11). In both instances, "suicide is the killing of the self, whereas euthanasia is the killing of or by another, but always for the sake of the person who is killed" (Benatar, 2016, p.2).

Therefore, this study examines the extent to which euthanasia is formalized for those who are advocating for "a right to life" (Benatar, 2016, p.3). Nevertheless, non-voluntary euthanasia remains unacceptable because "decisions about the quality of incompetent beings' lives are to be made by others" (Benatar, 2016, p.14) as it is against their own will. As for voluntary euthanasia, it relies on coercion that results from "the terrible condition" experienced by the person, i.e., when the person is "suffering of other negative features of the condition", such as pain, and that ultimately leads the person to "clouded thinking" as the result of accumulated pain to make the conscious decision of dying by assistance (Benatar, 2016. p.16).

Thus, the decision about the quality-of-life rests with the person himself/herself. In this way, the new form of suicide legitimacy is tied to the personal or medical means by which a person can request death. It is therefore possible for terminally ill patients suffering from early stages of amnesia or suffering from physiological conditions like quadriplegia to request euthanasia. On the contrary, those who have been inflicted with

severe mental depression or ailments may instantly commit suicide silently. This is because suicide is largely viewed as an act of autonomy or a decision that is based on a choice made by the individual. As such, suicide is a method of death which “could be a very rational basis for the decision” (Benatar, 2016, p.16). It is therefore necessary to examine the conflict between life or death from a psychological standpoint, i.e., looking at life and death instincts from both the perspective of terminally ill patients and those who are clinging to life.

Death by suicide, however, has been taboo for a long time. In other words, “taboos on suicide were developed in order to ward off the evils that were thought to accompany self-inflicted death” (Evans & Farberow, 2003, p.17). Originally, the suicide spirit was believed to haunt the living because of its ability to return. Even though suicide is taboo, the study sheds light on the extent to which human nature and continuity can endure limits, which are less relevant in certain situations. In order to unravel the psychological mechanisms that lie beyond the characters’ actions, the study analyzes the psyche of the characters whose mental health has either been damaged or affected by internal forces. Thus, two distinct perspectives are offered. As a matter of fact, Moyes presents suicide as a self-determined decision rather than a taboo. Second, suicide becomes a way to treat depression when Lowry introduces Rosemary’s suicide, yet it still remains taboo. Both authors offer characters with potential too, allowing a greater understanding of life’s value to be thoroughly explored.

Psychologically motivated, euphemistic descriptions of suicide disguised as euthanasia are examined in this study. As such, psychological factors and their effects on individual choices are the major focus rather than features of suicide in philosophy, sociology, or thanatology. Chapter One is devoted to the introduction to give a broader outline of what suicide is, and the next two chapters are concerned with the analysis of the conflicted forces: life wish and death wish. Chapter Two centers on William’s desire to die with assistance, which situates death as a narcissistic death wish: man’s struggle against himself. Chapter Three introduces non-voluntary Euthanasia, which opposes life wishes and puts Jonas at odds with civilization. The Chapter also examines Jonas’s selfless efforts to restore humane feelings to his community.

Suicide has never been satisfactorily explained. A suicidal act can have different designations depending on its purpose in the field of suicidology: intentional, tragic or

self-directed. Therefore, the pioneers of the field define suicide as "... a conscious act of self-induced annihilation, best understood as a multidimensional malaise in a needful individual who defines an issue for which suicide is perceived as the best solution" (Leenaars, 2010, p.4). Suicide, however, carries only one conclusion of self-destruction which is death. In response to this, mankind is aware that "death is the inevitable outcome of all life" (Freud, 2005, p.183) regardless of all the consequences. As Albert Camus wrote in *The Myth of Sisyphus*, suicide carries contradictions: "suicide is a solution to the absurd" and "those who commit suicide are assured of life's meaning". The reason for this is that "man feels an alien, a stranger". Thus, he establishes a connection with the feeling of longing for death (Camus, 1955, p.6). Nevertheless, the value of life remains suspended. Considering that Camus rejected suicide, he suggested that it was not a social phenomenon, but rather revolved primarily around someone's innermost thoughts. He therefore described suicide as a "repudiation" (Camus, 1955, p.37) in which renunciation and depletion replace revolt and consciousness.

As a deliberate act committed by the individual to end one's life, suicide is unlike normal death which takes its course naturally. Despite the fact that suicidal and natural deaths are inevitable, they remain terrifying. Therefore, a tension between the two processes becomes complex in terms of euthanasia because suicide is often referred to as "bad death" (Hakola et al., 2015, p.8). Moreover, suicide is also defined as "an act wherein a person opts to forgo biological existence and in so doing gives evidence of having determined that her future time lacks sufficient value to warrant her continuing to live to be present for it" (Cholbi, 2022, p.7). In this regard, Cholbi described suicide as an "intentional self-killing" (Cholbi, 2022, P.5) where death is only an instrument to achieve certain ends unless the person's "rational endorsement" makes it possible (Hakola et al., 2015, p144). This is because in issues such as voluntary euthanasia, the action of suicide manifests itself either passively or actively in the sense of the "willingness and commitment" of the doer (Hakola et al., 2015, p.142).

However, those suffering from severe somatic conditions, or suffering from feelings of melancholia or depression, are vulnerable to thoughts of suicide. The result of these causes is that life is unfulfilling, and one may end their life unexpectedly because of these factors. Therefore, requesting death by assistance is "rooted in suffering" (Richards, 2017, p.2) which affects the individual's psychological and existential dimensions. In other words, aging and illness are definitely "influencing the

quality of life”, but other factors such as “dependency on others; hopelessness; loss of ‘self,’ meaning or dignity; loneliness or loss of social connectedness; and being tired of life” (Richards, 2017. P.3) also motivate people to end their lives. Further, severe physical disabilities, chronic illness, and mental disorders lead to a decline in quality of life that exacerbates isolation by causing the person to experience daily shortages and unordinary circumstances (Richards, 2017).

Approximately more than 700.000 people die due to suicide every year according to the World Health Organization (WHO, 2021). As a significant phenomenon, suicide becomes the key discussion point where its implications lead to an evaluation of the value of life. It also demonstrates the degree to which an autonomous being is capable of making their own decisions. As such, suicide is presented in this study in its contemporary concepts of voluntary / non-voluntary euthanasia through which the characters established their suicidal thoughts and actions according to either an autonomous decision or quick mental depression (illness).

In this study, Sigmund Freud’s Drive Theory (1923) is applied to the psychoanalysis of the characters from the selected texts of JoJo Moyes and Lois Lowry to comprehend suicide in terms of its causes and outcomes in the process of self-defense mechanism. Therefore, understanding the unconsciousness of those who inflicted themselves is a priority to examine their life / death wish. The historical background of suicide would be illuminated in addition to elaborating the various definitions of suicide, as well as following the thread that leads to euthanasia.

1.2. Methodology

As a social phenomenon, suicide is associated with a debate that is based on a general collective understanding of stigmatization. Therefore, the present study explores how the characters of *Me Before You* by JoJo Moyes and *The Giver* by Lois Lowry evaluate their unique experiences. It also explores how these characters ultimately make their choices. Thus, the samples in this study are either those who have already decided to commit suicide, i.e., voluntary euthanasia, or those who are on the verge of death and cling to life instead. As the discussion is open-ended, it contributes to the thematic analysis of suicide through which other themes, such as narcissistic suicide and the role of individual’s autonomy are explored.

Despite the fact that suicide cannot yet be precisely defined, following Sigmund Freud's Drive Theory would explain the complexity of human psychology. By examining human drives, we find that repressed energies are unavoidably released by innate instincts either to gain pleasure or to avoid unpleasurable sensations. Therefore, this method will provide a deeper understanding of the defense mechanisms attributed to the unconscious. Based on the motivation of the act, suicide is seen either as pathological or subjective. The theory provides a set of concrete evidence that can be used to analyze self-destructive behavior by examining the individual's psychic layers of the ego, superego, and Id. In addition, the implications of the study are viewed from different perspectives. First, the visionary of life as seen by a terminally ill person whose state of crisis defines him. Second is the capability of the individual's agent to make decisions when death is imposed unnaturally, which provides insights into how life should be perceived. Whereas suicide remains taboo in its general form due to its violation of human nature, it appears to be almost permissible in voluntary euthanasia.

1.3. Drive Theory

Sigmund Freud developed the psychodynamic theory "a theory of personality" (Deal, 2007, p.1) to explain how the individual's psyche works in relation to certain instinctual drives. In Drive Theory, humans are consumed by biological impulses that determine their behavior and seek gratification unconsciously. Due to the conservative nature of humans and all organic things, drive, as seen by Freud, is a:

... powerful tendency inherent in every living organism to restore a prior state, which prior state the organism was compelled to relinquish due to the disruptive influence of external forces; we can see it as a kind of organic elasticity, or, if we prefer, as a manifestation of inertia in organic life (Freud, 2003. P.100).

According to the APA Dictionary of Psychology, drive refers to "deprivation of a needed substance or the presence of negative stimuli". Even though it is a Freudian concept, it is seen as a "psychical representative of an endosomatic, continuously flowing source of stimulation" (Storck, 2016, p.4). As such, drive is seen as a necessity for sustaining events (APA).

The Drive Theory has been criticized during the 1960s and 1970s as being "overly deterministic, resulting in blaming the victim" (Deal, 2007, p.2). Despite its failure to explain comprehensively other intrapsychic processes, such as racism, poverty,

or sexism, which are crucial social issues of today, it has not been proven on an empirical basis yet remains a critical explanation of self-destructive behavior. In addition, its application to self-destruction contributes to a deeper understanding of the latent annihilation tendencies of organisms, particularly suicidal wishes. In addition to psychodynamic elements that explain human behavior, concepts and principles also evolve over time. Despite this, motivations and behaviors vary according to context, thereby placing them within a specific setting (Deal, 2007).

The selected literary works of JoJo Moyes and Lois Lowry were written by female authors whose protagonists were confronted with the instinctual drive of life and death. Regardless of the gender of the characters, both drives influence human behavior equally.

In 1920, Sigmund Freud's essay titled *Beyond Pleasure Principle* outlined the structure of the psychic apparatus. Specifically, he proposed three levels of personality: the Id, the Ego, and the Superego. Regarding the Id, Freud described it as that part "which would make life take place in the realm of pure wish-fulfilment" (Freud, 2003, p.29). It is a natural instinct of humans and animals to demand their needs in a moment, such as sex, freedom, security, and food. Although it "is not an organization" (Freud, 2003, p.222), it "can join forces with a qualitatively differentiated erotic or destructive impulse and increase its overall cathexis" (Freud, 2003, p.154). Furthermore, these wants and desires often utilize the pleasure principle as their operator, which makes the pleasure principle instinctually driven without logic and only serves to avoid pain associated with unfulfilled desires. In order to satisfy one or more of the needs, an urge is requested. It is the pleasure principle that allows a desire to be satisfied without even thinking about it.

Freud argues that the Id "behaves in an Unconscious way" (Freud, 2003. P.136), so the Id and the levels of personality of each individual has a latent psychic identity that not only unconsciously behaves but is also indistinguishable. Therefore, "the individual consists of a psychic Id, unrecognized and unconscious, on top of which sits the ego" (Freud, 2003, p.136). As a "battlefield" (Gerber, 2019), the Id is that psychological arena in which opposing forces in each individual engage in a psychological conflict - the instinctual drive to satisfy their own needs.

On the other hand, the ego represents the perception system of consciousness (Pcpt-Cs) and sits on top of the identity. It does not envelop the Id, rather it extends the influence of the external world to the surface of the ego when it is in indirect contact, i.e., it is “not sharply separated from the id, but flows on down into it, such that both then merge” (Freud, 2003, p.137). As opposed to the Id, the ego tries to manage the primitive Id and make it applicable to a society governed by boundaries. The ego, therefore, is seen as a “negotiator between the unconscious self and its desires, and the conditions of the outer world” (Kli, 2018, p.8). To gain its own pleasure, the ego replaces the pleasure principle with the reality principle, since the ego is not strict and needs pleasure as well. It is therefore necessary for the ego to exert further effort to alter the pleasure principle into a reality principle which “controls our impulses and enables us to deal rationally and effectively with the situations of life” (Freud, 2003, p.260).

In contrast, the reality principle is constantly and socially governed by the ego’s demands, which regulate levels of excitement that are prevented in dangerous or unacceptable circumstances. Due to the supremacy of the pleasure principle within the ego, the ego will weigh the consequences of an impulse and decides whether to act on it or not. Consequently, the ego’s function is to control and direct the Id in a superior manner. However, both the id and the ego are inseparable, leading the ego to enact habitually the “will of the Id as if it were its own” (Freud, 2003, p.138). Obviously, the ego is not latent, so the slightest stimulus is all that is required to transform unconscious components into conscious states. While the latent content itself is meaningless, such latency is viewed as “deep unconscious wishes or fantasies” (Walinga, 2019, p.65).

The pleasure principle is automatically regulated within the psychic process as a result of tension. Thus, a psychic process will follow a path to reduce tension caused by unpleasurable experiences, or to create pleasure instead. Because of this, the pleasure principle is responsible for reducing or increasing the level of stimulation present in the nervous system at any given moment. However, the pleasure principle as per Freud description is:

the tendency serving the interests of a specific function whose responsibility it is either to render the psychic apparatus completely free of excitation, or to keep the quantum of excitation within it constant, or to keep it at the lowest possible level (Freud, 2003, p.123).

The dominating nature of the pleasure principle exists as a “strong tendency” (Freud, 2003. P.73) that serves pleasure because it belongs to the psychological apparatus at the operational level, i.e., self-preservation, which is opposed to the external world. Functionally, it is a vehicle for primitive drives, the erotic (Freud, 2003).

The super-ego, according to Freud, represents the human ‘conscience’ because it is the voice of morals that are acquired from parents or society. Thus, it sometimes seems radical with overruling nature. The super-ego, however, persuades and even obliges the Id to act ‘morally’ rather than seeking pleasure, and it forces the ego to accept guilt. Also, it may “push us towards erotic failure and suffering so as to confirm its harsh rule” (Freud, 2003, p. 13) by means of lack of eroticism and deprivation. As such, it is an “Over-I” (Freud, 2003. P.13) that leads the person to repeat prohibited desires for the sake of desire punishment, which only does so in order to assert itself [the superego], no matter how bewildered the self is. As such, it is a judgmental entity that subjects actions to a set of ideals imposed by father or culture. Therefore, it is the “source of bad conscience and feelings of guilt” as well (Gerber, 2019) which indicates what behavior is wrong and leads to feelings of guilt because according to Freud “the tension between what our conscience demands and what our ego actually does is experienced as guilt feeling.” (Freud, 2003, p.147).

By following Freud’s hypothesis, the study would be able to identify not only a satisfactory reason(s) for suicide, but at least provides an objective example of why people intend to self-destruction. The human psychic apparatus, however, which is fundamentally made up of a variety of drives, manifests itself inherently within the individual’s unconscious. Thus, death / life instincts are triggered by a variety of stimuli that act as defense mechanisms. As part of the defense mechanism, the concepts of death / life drives are examined in depth to evaluate the role of the pleasure principle and measure its influence. Therefore, two dimensions of pleasure / unpleasure are to be explored; the mind-body relationship and the subjectivity of consciousness that impacts the individual’s awareness.

Furthermore, the ego is not only “subjected to servitude” (Freud, 2003. P.165) of the three types of personality but also to fear of danger among the conflicting forces between the external world and the intrapsychic sphere. There is an opposition between the libidinal Id, the bitter commands of the superego, and the ego itself as viewed

externally. According to Freud, this process is a response to the anticipation of danger causing fear. In this regard, the ego “seeks to make the world match the wishes of the Id” (Freud, 2003, p.165). In its current context, the sexual drive is expanded to encompass a deeper sense that is not related only to genetic procreation or human genitive, but also to creating a higher unity of the ego that is related to “preserving one’s own internal unity” (Gerber, 2019) such as self-preservation. Since the ego belongs to the instinct of survival - Eros, whose charge is to “preserve life itself” (Freud, 2003. P.104), the opposite drive that is responsible for destruction - Thanatos- is also in focus and responsible for “the process of abolishing unities” (Gerber, 2019). Therefore, the two drives of Eros and Thanatos are responsible for “the phenomena of life” (Freud, 1961, p.78).

It is essential to understand how death drive and life drive interact during an organism’s lifespan. This is because both aid the living cells in overcoming each other, i.e. suicide and survival. According to Freud, “each cell helps to preserve the life of the others, and the community of cells can survive even if individual cells have to die off” (Freud, 2033. P.113). The organic cell, with its dualistic nature, however, contains both elements of construction and destruction - anabolism and catabolism. According to anabolism, life drive or Eros is tied to life and is responsible for reestablishing living units, whereas Thanatos, which is similar to a germ-cell, decomposes living substances in an inorganic state. As organism cells are intrinsically conditioned to survive, death is “the fulfillment of the pleasure principle” (Gerber, 2019).

In Freud’s view, death is seen as “arising from inherent factors” (Freud, 2003. P.109), i.e., it cannot be credited to or viewed as a necessary part of organic life as long as living is not rooted in a primal attribute. In this sense, Freud regarded death as a “purely functional device, a phenomenon reflecting adaptation to the external conditions of life” (Freud, 2003, p.109). So the application of drive theory to suicide would therefore provide an explanation of the reason behind self-annihilation based on the conflicted forces of life and death. This instinctual response to a deep motivation represents the psyche’s response to any stimulus that causes a physical entity to dissolve. In this way, death is considered as “... a physical fact must affect our mental system, i.e., become an instinct in the psychoanalytical sense. Therefore, there is mental representation of death...the fear from annihilation is the primordial human fear in mental representations of the somatic death pressure” (Zurak, 1999, 4).

Therefore, the dynamic structure between the two drives provides a basis for understanding suicide. First and foremost, death drive is associated with the pleasure principle since pleasure results from release excitation, and displeasure results from unresolved tension. Accordingly, the pleasure principle “is itself derived from the principle of constancy” (Gerber, 2019), i.e., all living forms are derived from the course of the universe that are consistent with the laws of nature, thus it is fulfilled by death. However, both Eros and Thanatos have a limited capacity to withstand pressure: “they press for change, for release” (Freud, 2003, p.135).

Moreover, Freud asserted that there are certain pathological factors which result in the *separation* of the ego from the Id. In other words, the individual’s perception of the body as a distinct object provides the perception system with a special image, i.e., the surface of the body (or touching it) is the source of both internal and external perception. In this way, physical pain, severe illness, or any other psychological factor that affects the organs are “paradigmatic for the way in which we arrive at our notion of our own body” (Freud, 2003, p.138). Therefore, Freud considered the ego as “a corporeal entity; it is not merely a surface entity but is itself the projection of a surface” (Freud, 2003, p.138), i.e., a person’s body’s physical surface provides the ego with an image that is consciously perceived by sensations and is supposed to be perfect.

What if this image is distorted?

Through the psychodynamic theory, human behaviors and motivations can be explained in the stage of tension that manifests itself through action. Terminal illness, excessive anxiety, fear, poverty, depressive melancholy, psychological pain, etc., are all crucial factors in releasing the repressed. Although the ego perceives repressed thoughts as dangerous or forbidden, it no longer has the authority over itself to govern. As such, the “weakness of the ego is instantly evident [when] the two [the ego and the Id] have split apart” (Freud, 2003, p.180). It is through these tendencies that the ego redirects repressed emotions towards self-reproach, guilt, and shame, thereby leading to self-loathing and resulting in self-destruction. In this case, the individual considers these critically unfortunate circumstances pressing through which suicide becomes a viable solution.

In a *retreat* state, the anticipation of fear is manifested as caused by danger. Therefore, the ego drive - Eros, as well as the death drive - Thanatos, become evident in reaction. Due to the two-fold nature of human beings, man is an entity whose survival is of a supreme priority, or who may concern himself about his continuation through procreation (Gerber, 2019).

According to the psychodynamic perspectives, human behavior is influenced by psychological forces and tendencies. Freud, therefore, assumed that the psychological processes result from internal flows of psychological energy, i.e., libido. Based on that assumption, Freud placed a strong emphasis on the unconscious and emphasized that much of human behavior is unconscious since it is “repressed” (Freud, 2003, p.83). Accordingly, Freud divided consciousness into three levels: conscious, pre-conscious, and unconscious. The Id, ego, and superego correspond to each of these levels.

Based on the concept of consciousness as “awareness of the self in space and time” (Walinga, 2019. P.59) which describes conscious awareness as the outcome of responses to both internal and external stimuli, it is “associated with pleasure or unpleasure” (Freud, 2003, 72). The conscious and unconscious, according to Freud, are major premises of psychoanalysis, where pathological processes can be found. On the other hand, the preconscious is the memory or action that is not repressed but can be recalled at any time. Last but not least, the unconscious which is the main repository of unpleasant, unwanted, or unacceptable feelings that one thinks should be hidden from conscious awareness plays a crucial role in one’s behavior (Walinga, 2019).

An individual’s ego will have the role of direct opposition to the effect that comes from the repressed tendency: pleasure or unpleasure. The repressed will face resistance from the ego, and a tension is built as a consequence of that pressure. The consciousness (pleasure) moves “beyond certain point towards complete stability” and the unconscious (unpleasure) “moves beyond a certain point away from that stability” (Freud, 2003. P.72). Therefore, Freud described the unconscious as “offers no resistance whatever to the endeavors of the therapy” because the unconscious’s aim is mono, that is “to escape the oppressive forces bearing down on it ... or else find release in some form of real action” (Freud, 2003, p.83). A self-destructive manner as Freud proposed is

to reduce living things to an inorganic state, for this reason we also call it the death instinct” whose final aim is annihilation. He also connected the behavior of self-destruction to the “most of the

impulses of sexual life [that] are not of a purely erotic nature but arise from alloys of the erotic instinct with components of the destructive instinct (Freud, 1940, pp.4-28).

Consequently, suicide in this study is not only seen as a means of eliminating oneself due to sexual inadequacy or unmet needs, but also as a way of freeing oneself from burdens, removing long-term pain, and liberating the damaged ego from the emergence of its self-lowering state of being.

1.4. The Concept of Suicide

Edwin Shneidman defines suicide as “pain, psychological pain, what I call psychache” (Shneidman, 2004, p.29). Pain, according to the International Association for the Study of Pain, is defined as “An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage” (IASP, 2022). In addition, Antoon Leenaars defines suicide as an “act of volition and frustrated psychological needs, and that the very core of suicide is overwhelming psychological pain” (Leenaars, 2010, p. 39). According to these definitions, what is bearable for some will be unbearable for others, because pain is a frustrating stream which produces negative energy in the mind. Therefore, regarding these painful experiences, the self modifies its needs and results in mental distress.

Suicide, according to Shneidman, is a reaction to dissatisfaction with the status quo fueled by introspection. Therefore, a suicidal-self shares certain general commonalities that lead to self-destruction. To begin with, the most known purpose for suicide is “seeking solution” (Leenaars, 2010, p.40). In other words, rather than being a random act, suicide is seen as an irrefutable solution to a problem, a dilemma, a crisis, a challenge, or even a binding.

In addition, “cessation of consciousness” (Leenaars, 2010, p.41) becomes a target for the suicider where the mind is no longer capable of the burden. In addition, the “common stressor in suicide is frustrated psychological needs” (Leenaars, 2010, p.42) that are unmet or cannot be satisfied because of certain factors or obstacles. Moreover, the general state of suicide is characterized by “hopelessness and helplessness” (Leenaars, 2010, p. 42), that are seen as the dominant emotions that cause the person to feel guilt, shame, or dependence, inducing them to take their life. As such, a psychological “constriction” (Leenaars, 2010, p. 42) affects primarily the intellect. In

other words, the mind suffers from the narrow “range of choices” that worsens the suicide state. Therefore, the self is prone to “self-loathing or self-abnegation” (Leenaars, 2010, p.44), which robs it of respect. Therefore, in Shneidman’s view, self-acceptance is an essential part of the psyche, i.e., “the psychological oxygen of life” (Leenaars, 2010, p.44). As such, constriction would have the opposite effect, limiting the consciousness and damaging it.

Norman Linzer argues “the reason for [suicide] is the failure to recognize depression as an illness” (Linzer, 1984, p.24). Essentially, suicide and depression are mingled in the sense that depression eventually leads to psychological illness. For Linzer, there are many stimuli that simultaneously increase the likelihood of suicide ideation, such as confusion, anxiety, stress, hopelessness, and failure. He further suggested that non-responsive patients and those who are silent are at a serious risk of suicide when compared to those who “complain about symptoms of depression and even persistent thoughts of suicide” (Linzer, 1984, p.25). In addition, suicide attempts are more likely to be successful when the attempter is more silent. It follows that even if a suicide sufferer receives treatment, the potential for suicide remains. This is due to the fact that the attempter has already decided that he or she will risk himself/herself and is just waiting for the right time to do so.

Meanwhile, Emile Durkheim connected suicide with sociology through external factors in the sense that “the individual and the group cannot be understood apart from each other” (Taylor, 1982, p.37). For Durkheim, “suicide cannot be explained by its individual forms” (Durkheim, 2005, p.15) but by social commitments. Therefore, in explaining the phenomenon of suicide, he focuses on the mutual relation of the individual and society. Particularly, he avoided addressing the psychological reasons behind suicide. As opposed to this, he focused on the societal strain that triggers a peculiar condition. Therefore, suicide for Durkheim “is the product of social meanings which are caused by combinations of egoism, anomie, altruism, etc.” (Taylor, 1982, p.34). The methodological perspective that Durkheim followed is his view of suicide rates in Western societies that have distinct differentials. He shows that social structure leads to individual suicide including “religion, marriage, the family, divorce, primitive rites and customs, social and economic crises, crime (especially homicide), law and jurisprudence, history, education, and occupational groups” (Durkheim, 2005, p.14).

Consequently, Durkheim's analysis of suicide proposed two methods to constrain the individual: social integration and moral regulation. As for social integration, it is the ability of an individual to sustain, bind, and build a meaningful existence; "the more numerous and stronger these collective states of mind are, the stronger the integration of the religious community, and the greater its preservation value" (Durkheim, 2005, p.125). However, due to the differences between cultural, religious, or ethical standards in societies, the incompatibility between individuals and their different statuses might produce conflicting expectations. In other words, "the individual is subject to a greater degree of role conflict and the resultant strain of conflicting expectations impairs the stability and durability of social relations" (Taylor, 1982, p.27). Status integration, therefore, replaces the different social statuses wherein an individual may be distinguished if he or she is unable to fit into society and is described as an *anomie*.

On the other hand, moral regulation is attained by moderating the individual's "desires and aspirations" (Taylor, 1982, p.14). In other words, Durkheim believed "society was in the consciousness of the individual" through which the influence of society supplies individuals. Therefore, he never considers regulations as an "external force" (Taylor, 1982, p.133). On the contrary, when an individual is unable to respond to regulations, an excessive "self-regulation" emerges through which the person who is also another force, i.e., "excessive self-regulation [that] is socially caused" where suicide issue becomes an excessive self-reflection, i.e., society is "still living in him [the individual]" (Taylor, 1982, p. 133), which leads to suicide.

Consequently, based on social collective factors, Durkheim divided suicide into four categories: egoistic, altruistic, anomic, and fatalistic. In the absence of a connection between man and society, the individual can feel isolated and excluded, and is therefore weakly integrated with a sense of inadequate presence among others. This is because "the bond attaching man to life relaxes because that attaching him to society is itself slack" (Taylor, 1982, p.22). Therefore, feelings of deficiency infiltrated the self that the person was no longer capable of participating in society. In light of the lack of a physical or moral foundation, Durkheim does not simply justify suicide psychologically. Instead, he adds a sense of apathy, where motivations and emotions are passively blocked, which leads to suicide through egoistic motivations. Additionally, he defines "individual's sense of detachment from others" (Taylor, 1982. P.173) as an ectopic condition in which

feelings, decisions, and suicidal ideas are private and self-contained. Thus, for Durkheim, “egoistic the special type of suicide springing from excessive individualism” (Durkheim, 2005, p.168).

On the other hand, altruistic suicide is the opposite of egoistic suicide, whereby someone “kills himself in order to conform to social imperatives” (Taylor, 1982, p.14). The individual sacrifices himself to society due to its undeveloped ego and places commitment to the group first, which becomes “performed as a duty” (Durkheim, 2005, p.180). Although altruistic suicide is seen as “primitive and traditional” (ibid; p.14), it persists in modern societies as in the military. On the other hand, anomic suicide occurs because “society’s influence in restraining individual passions becomes diminished and the individual is lost in an infinity of desires” (Taylor, 1982, p.15). Therefore, desires trigger everything social within the individual, whose “unregulated emotions are adjusted neither to one another nor to the conditions they are supposed to meet” (Durkheim, 2005, p.248). Hence, a painful conflict manifests itself between man and himself.

In contrast, excessive regulations force individuals to be totally submissive to society, which leads to fatalistic suicide. Durkheim regarded it as “of very little contemporary importance” (Taylor, 1982, p.16). Because of this, individuals living under oppressive systems that restrict their freedom are close to any change, even if it is death. This is because radical situations increase “the desire to die” (Taylor, 1982, p.168) as fatal acceptance where life is seen as already ended.

Alternatively, Kestenbaum argues that suicide occurs when a person contemplates self-destruction. It is done because life and death are both seen as choices, but Kestenbaum says “one can choose life or death” (Kestenbaum, 1973, p. 11). Thus, death may be used as a means of implementing social policies, including “compulsory euthanasia, compulsory abortion, and legalized if not compulsory suicide” (Kestenbaum, 1973, p.3). Moreover, population control and death planning are equally important, as is the proclamation of future voices asking who, how, or when we should make “death more desirable” and how we should frame it (Kestenbaum, 1973).

1.4.1. Euphemism For Self-Annihilation

Another form of suicide which is different in terms of autonomy is medically conditioned dying. As a result of aging, terminal illness, and medical conditions that make life intolerable, euthanasia was taken for granted (Linzer, 1984). People who suffer from pain due to chronic conditions tend to euthanasia, i.e., it offers relief from agony and humiliation of an extended sedation. This is because dying by assistance allows them to preserve their dignity as stated: “The greatest human freedom is to live and die according to one’s own desires and beliefs. The most common desire among those with a terminal disease is to die with some measure of dignity” (Keegan et al., 2010, p.24).

In spite of that, euthanasia is a form of a mercy killing that originates from Greek words which are “based on a combination of the terms ‘eu’ meaning ‘well’ and thanatos meaning ‘death’” (Dimmock & Fisher, 2017, p.124). Euthanasia, which supposedly provides good death for the dying “still carries the stigma of its association with eugenics and genocide in Nazi Germany” (Deprez, 2021). In this latter form of euthanasia, psychiatric patients were subjected to nonvoluntary euthanasia programs in the 1940s because they were considered “unworthy of life” (Anomaly, 2022, p.49). It later expanded to include ideological purification based on racial, social, or political categories. In other words, “handicapped adults..., disabled children, patients” have been destroyed either through starvation, lethal injection, gas chambers or overdose of medication” (Anomaly, 2022, p.50) for the purpose of distinguishing the Aryan race. Furthermore, people with disabilities, regardless of their age, were considered “useless eaters” (Anomaly, 2022, p. 94). Thus, they were seen as burdens and unfit to live in society.

Moreover, as far as modern practice is concerned, euthanasia has not taken place recently; rather, it has been in practice for centuries. While ‘utopia’ conjures up images of an ideal place, More’s *Utopia* (1516) describes how he proposed euthanasia for chronic pain sufferers:

“... but when any is taken with a torturing and lingering pain, no hope either of recovery or ease, the priests and magistrates come and exhort them... they are now unable to go on with the business of life, are become a burden to themselves and to all about them, and they have really out-lived themselves, they should no longer nourish such a rooted distemper, but choose rather to die” (More, 2005. P.87).

Also, as the term suicide appeared in Dr. Samuel Jonson’s dictionary in (1755) as an equivalent to terms like (-murder, -destruction, -slaughter, -homicide, - killing).

Jonson, in addition, used different examples to clarify the meaning of the term suicide as in: {"They are yet more mad to think that men may be laid to rest by death, though they die in self-murder, the greatest sin." / "The Everlasting fixt. His canon 'gainst self-slaughter."}. (Jonson, 1755-Self Section). Additionally, there was a similar use of the Latin term 'suicide' earlier in Sir Thomas Browne's *Religio Medici*; it described Cato's valor as being his own self-assassin: "highly extoll the end and suicide of Cato; this is indeed not to fear death, but yet to be afraid of life" (Browne, 1878, p.93). However, during the 1990s, Dr. Jack Kevorkian or 'Dr. Death' promoted a campaign to legalise euthanasia in Michigan. He stated "If you don't have liberty and self-determination, you got nothing. That's what this country is built on. And this is the ultimate self-determination: to determine when and how you're going to die when you're suffering" (Nicol & Wylie, 2006, p.18).

In this regard, Kevorkian opposed terminal suffering, both for himself and his patients, and rationalized his attempts at deliberate end-of-life as a way to relieve them from "pain and suffering" (Nicol & Wylie, 2006, p.224). Consequently, "the medical community has at last begun to pay attention to palliative care and the needs of the dying" (Nicol & Wylie, 2006, p.269).

Moreover, suicide is regarded as a "premature and violent death" where the person who is condemned to death exposes themselves to a "public and scandalous renunciation of the value of life". In turn, suicide witnesses the evolution of language debate in the context of medical and legal perspectives; "legalizing euthanasia as a relatively risk free, efficient, and medicolegally controlled method of regulating the dying process" (Bayatrizi, 2008, pp23-24). People are often anxious about death, especially when it comes to terminal illness. It is through euthanasia that dignified death will be acknowledged and institutionally controlled. In this way, assisted suicide is more effective, not risky, and can take place under certain medical processes that eliminate pain immediately. Consequently, a medical way to "restore dignity to death" by euthanasia becomes a demand for "quick release" (Bayatrizi, 2008, p.142).

Taking the disguise of suicide and taking one's life intentionally, euthanasia is formed, and it can be classified into active, passive, voluntary, non-voluntary, and involuntary euthanasia. The practice of euthanasia, in general, is defined as "the administering of lethal drugs by a physician with the explicit intention to end a patient's

life on the patient's explicit request" (Brinkman-Stoppelenburg et al., 2020). However, there is a slippery slope argument that depends on the doer's autonomy as well as being able to compromise with people's different dogmatic attitude.

Euthanasia was defined as "killing at the request of the person killed", where this definition is applicable to voluntary euthanasia. Therefore, it is distinguished from non-voluntary euthanasia "where the person killed is not capable of either making or refusing to make such a request". On the other hand, involuntary euthanasia through which "the person killed is capable of making such a request but has not done so" (Callahan, 1997, p.23).

In active euthanasia, the act is "the direct administration of a lethal substance to the patient by another party with merciful intent" (Abohaimed et al., 2022, p.200). Typically, it refers to "a euphemism for the intentional killing of a person" (McCarrick, 1992, p.4). Also, it means that death is not natural, but rather it arises from "most likely through a lethal injection or the voluntary swallowing of a deadly cocktail of drugs" (Dimmock & Fisher, 2017, p.121). Even though active euthanasia may be misleading, it is illegal in many countries such as Britain, unlike the Netherlands and Belgium, since most patients are unconscious when they die such as in coma cases.

By euthanizing a patient with an informed request or statement (a will) from a competent patient whose mental health allows them to make this decision, active euthanasia takes place and is defined as a "positive action that leads to death". The other option is passive euthanasia, in which the patient is passively made to die by omitting treatment to prolong their life, which is a form of murder "killing the patient, [which] results in death" passively (Porter & Warburton, 2018, p.30).

Passive euthanasia, therefore, refers to the withholding (WH) or withdrawal (WD) of life-sustaining support. Therefore, it occurs "either at the request of the patient or when prolonging life is considered futile" (Abohaimed et al., 2022). If a patient's condition is deteriorating hopelessly and near death despite the absence of consent, passive euthanasia might be taken as a legal action to end the patient's pain. Consequently, (WH) or (WD) are merely "actions taken by health care providers, the actual decision to decline or discontinue treatment rests with the patient or the patient's family or substitute decision-maker" (Gallagher, 2019). Those who suffer from terminal illnesses, amnesia, or aging are likely to take their own lives to avoid pain and suffering.

Consequently, voluntary euthanasia allows a person to die with dignity “when a person makes their own choice to have their life terminated in order to avoid future suffering” (Dimmock & Fisher, 2017, p.124). Involuntary and non-voluntary euthanasia are also forms of intentional killing. Mentally ill people who are unable to give informed consent because they are impaired are likely to make non-voluntary decisions to die. As a consequence, their death could be considered “against their will” (Sprung et al., 2018, p.5). As a result, voluntary dying has been elevated to another level of the medical code in terms of euthanasia according to the medical paradigm. In other words, “a confrontation between patient autonomy and scientific and medical progress” are seen as commonplace which gives hope and confidence to patients who are fighting for their lives (Lemmens, 1995, p.2). However, there are diseases where death is inevitable and there is no cure, such as quadriplegia, HIV/AIDS, dementia, and cancer, which led to changes in medical language. Therefore, euthanasia is “the result of these tendencies” to control death over life, for which medicine has no answer. Thus, “dignity highlights the influence of a specific perception of the good life on the struggle between good life, death and suffering” since dignity refers to “our relations with others, and the way we ought or want to be perceived by others” (Lemmens, 1995, p.8). Furthermore, once a person’s quality of life declines, their value diminishes as well leads to legalizing euthanasia as a “compassionate human response to immense pain and suffering” (Lemmens, 1995, p.10).

Moreover, the majority of people suffering from terminal illnesses are exposed to the possibility of withdrawing their pain through medical assistance rather than suffering unrelentingly. Consequently, the tendency towards suicide thoughts “slipped out of the prohibitive web of religious dogma”. Also, the movement to euthanasia “cannot be explained only by secularization, it is clearly related to a late-modern life ideal” (Svenaeus, 2021) in which another’s life is determined by when and how they die, enabling them to find relief.

In this regard, people are not only satisfied when choosing their own timing of death, but also eager to “deliver a painless death” (Mark, 2021). Therefore, a new mode of death is needed to face the variation of euthanasia that allows the medical codes to be varied and master death in a variety of ways. SARCO is an example of a new mode; it is a machine that resembles a coffin and was invented by Philip Nitschke in Switzerland. As a way to “glamorize suicide” and die in a “stylish and elegant” way, the machine not

only provides a quick safe death, but also results in a “suicide contagion”, which is concerning. (Mark, 2021). By such supporting, suicide is no longer considered a disgrace or taboo, but as an urgent solution for an end. As a result and due to the contemporary perception of suicide, some organizations and clinics offer medical consultations and painless death to severely ill individuals who are mentally healthy but are suffering from terminal diseases. Among them is the Swiss non-profit organization Dignitas. It was founded in 1998 with the goal of either living with dignity or dying with dignity (Dignitas, 2022).

Generally speaking, suicide is “an exclusively human response to extreme psychological pain, the pain of human suffering” (Shneidman, 1998, p.132). The issue of euthanasia remains a slippery slope for legislators because some consider it legal, whereas others consider it taboo. As a result, terminally ill individuals view their existence as “torture” since they cannot care for themselves. In this situation, they require assistance with feeding, toileting, and other basic needs, which is quite degrading to their dignity. Accordingly, “allowing patients to end their suffering is not only morally justified, but also essential to upholding their right to personal and bodily autonomy” (The Week Magazine, 2022). Italy, Germany, Canada, and Colombia have changed their laws in favor of assisted dying; they were added to the list of countries which already practice euthanasia, such as the Netherlands, Belgium, New Zealand, Switzerland, Luxembourg, and Spain (The Week Magazine, 2022).

As long as humanity shares the same aspirations towards dignity and freedom in both novels, one may choose death instead of living if their lives are threatened by either internal or external forces. Therefore, there would never be an end to the conflict between instincts.

2. NARCISSISTIC SUICIDE AND MELANCHOLIA

2.1. Melancholic Depression

Despite being a challenging subject to discuss, the term ‘death’ has been defined differently, but it has yet to gain a definitive definition. According to Robert Kestenbaum, death as being an “individual experience” is considered a “societal concern” as well (Corr, 2014, p.4). Moreover, during the 1960s, death was considered in America as a taboo topic that was not accepted to be discussed publicly. It was treated solely from a scientific viewpoint and discussed exclusively from a secular standpoint as Corr explained “It is as if death needs to be quarantined in order not to infect the way in which people wish to think about and live out their lives” (Corr, 2014, p.4). Due to the fact that humans are mortal creatures, their finitude is not a choice but an acknowledged reality manifested by death.

Albert Camus, whose concept of death as “the only reality” (Camus, 1955. P.38) also questioned the meaning of life through death. Death, for Camus, is “as a confrontation and an unceasing struggle” (Camus, 1955, p.22). He extended his absurd argument to suicide in order to broaden the discussion of the awareness of death and existence as being man’s source of anxiety and anguish. Through death, existence manifests itself in an anonymous way and leads man to another maze of loss. Additionally, he asserted that both death and absurd are the principles of a “reasonable freedom” (Camus, 1955, p.40). Consequently, man grasps freedom, passion, and rebellion through absurdity where death is not seen as an antithesis, but as an invitation to life. Thus, any attempt to hasten death by suicide is completely rejected. For Camus, “suicide settles the absurd. It engulfs the absurd in the same death” (Camus, 1955. P.36), i.e., man must have a certain sense of his ultimate fate even if that fate can be his own. Even so, man’s freedom is seen as a challenge by the joy of living.

According to Freud, people must prepare themselves for death because mankind “owes nature a death” (Freud, 2005, p.183). He described its features as natural, undeniable, and inevitable. However, in reality, the human tendency towards death, especially the death of oneself is “unimaginable” (ibid). Rather, people are unaware of their death because a sense of immortality has been attained unconsciously.

Likewise, death is a violent event that robs man of his lasting existence as an organism who obsessed with himself. The mysterious nature of the experience further adds to its inexplicability and increases its unknowingness. Yet, it is denied and people are more obsessed with immortality. Due to this, they tend to experience its causes and effects through other means, for example, through fiction:

“Death defines human lives on the basis that men are more or less conscious of their mortality. Some could argue that death robs life of meaning as everything comes to an end anyway. Others would claim that death gives meaning to life because it forces us to act on things now, not to wait for eternity” (Hakola & Kivistö, 2014. P.12).

Death is also deniable as stated by Beker: “mankind’s common instinct for reality... always held the world to be essentially a theatre for heroism” (Beker, 1973, p.21). Thus, man is completely consumed with himself, which leads him to repeat the myth of Narcissus, even though he cares for others, but keeps his obsession with himself; “Everyone is expendable except ourselves” (Beker, 1973, p.22). Man’s incapability to help himself is manifested through his “selfishness” (ibid) which is rooted in his animal nature, i.e., his basic instincts. In addition, due to man’s nature, he is involved in two distinct entities, the physical, where he is involved in the world of objects that correspond to his object-relation, and the symbolic, where he is involved in the dilemma of his mortal existence which takes him naturally towards denying death.

Losing someone or something close to us causes us to lose one’s perspective on life. When one loses interest in one’s surroundings or in life itself, life becomes “impoverished” (Freud, 2005, p.184). Therefore, a reaction to loss or death would manifest either as mourning or melancholy. Mourning as Freud stated is “a reaction to the loss of a beloved person or an abstraction taking the place of the person such as freedom, an ideal” (Freud, 2005, p.203). In mourning, there is an emotional reaction to a loss which represents disappointment, and with the lapse of time, the mourner will be able to overcome that loss.

But when mourning takes a long time to resolve, it becomes a pathological form of melancholy. Melancholia, however, is described by Freud as “mentally, profoundly painful depression” (Freud, 2005, p.204). In such a melancholic depression, a person is unable to care for himself/herself, is no longer interested in the surroundings, and is often inhibited by low self-regarding. The APA also defines melancholia as “an old word for depression” (APA, 2022). Due to this, melancholia alters brain functions by

reducing the sensory perception of the surrounding environment, other people, and the self. Anxiety, obsession, and sadness are some of the symptoms through which melancholia's classification is seen as "a distinct type of depression, known as melancholic depression" (Kubala, 2022). Feelings of hopelessness, worthlessness, and thoughts of death also contribute to the diagnosis of melancholic depression. In this regard, suicide ideation is the foremost and most significant symptom.

A person suffering from melancholic depression, however, acts radically towards himself manifested in self-reproaching and self-blaming which leads the self towards self-punishment. As a result, the perception system of the melancholic person who loses a love-object prevents them unconsciously from connecting with any memories that might be associated with that object due to "reality testing [that] has revealed that the beloved object no longer exists" (Freud, 2005, p.204). However, Freud explained the loss of a love-object as completely appalling with unreplaceable pain, so this painful experience strictly prevents the person from choosing another love-object instead:

"This tendency can become so intense that it leads to a person turning away from reality and holding on to the object through a hallucinatory wish-psychosis... The object may not really have died but may instead have been lost as a love-object. (Freud, 2005. PP. 204-205).

As such, the mourner's world differs from the melancholic in the sense that the mourner's world becomes empty and meaningless. In melancholia, the focus is on the inner world rather than the external world where the love-object is no longer present and its effect is withdrawn from consciousness and causes the ego to be sucked into that loss and bewilderment. Therefore, feelings of guilt and empathy cause the self (the ego) to appear empty, inadequate, and worthless.

In addition, one may feel blamed, insulted, humiliated, or undervalued, because the ego has plummeted to its lowest sense and is almost extinct. So "the free libido was not displaced onto another object [person or thing], but instead drawn back into the ego" (Freud, 2005, p.209). Consequently, this (lost) libido has nothing to do with the ego, it is not applicable to that agent, so it will identify itself with the shadow of that lost object as an abandoned entity. Thus, there will be an ambivalent conflict over how to establish a reliable identification ground after the ego's regression.

Separation, therefore, is a crisis of melancholy. Loss causes an individual to separate oneself from reality and to hold on tightly to the lost object. Due to the fact that it is a "sexual psychic energy", this displacement would cause the libido to invest a great

deal of energy in that lost object (Bieber, 1958, p.1). The sexual energy, therefore, manifests itself in the loss of a love object. As a consequence, the ego strikes painfully when abandoned or freed from its object. That is, it becomes “poor and empty ... being worthless, incapable of functioning, and morally reprehensible” (Freud, 2005, p.206). As such, the unconscious feeling of melancholia will be evoked particularly as conscious when that lost object is close or familiar to the melancholic person. Due to the destruction of the ego, unpleasant feelings will emerge and overwhelm, accompanied by suffering and suicide thoughts: “Each individual memory and expectation in which the libido was connected to the object is adjusted and hyper-invested, leading to its detachment from the libido” (Freud, 2005, p.205).

The ego, however, has been swept away with the lost object, resulting in tension that leaves the bereaved feeling dissatisfied and drained. It is the “loss of ego” (Freud, 2005, p.207). Therefore, and due to the nature of the human instincts which may seem to be a dysfunctional or postponed process in a state of repression, a request for relief is needed, and the ego-libido is overfilled with energy. Hence, a cathectic process shall take place. As it flows outward, this cathectic stream will be directed by the drive that strives for gratification: the death drive. Additionally, as the ego is already aware of its own destruction due to the loss of the object, there is no longer an ability or possibility for the cathectic to affect another object other than itself. Thus, the death of the organism itself, the death of the person, and the death of the ego, will manifest themselves explicitly through suicide as stated:

“If the aggressive instinct was introverted, as with libido, it led to self-destructive processes—masochism and suicide. The energies of both the libidinal and aggressive instincts existed in the “id” as unbound, volcanic, free-flowing forces. In its bound form, it was at the service of the ego and the superego” (Bieber, 1958. P.2).

The urge to commit suicide is the result of the Id flowing aggressively in response to vicissitudes in the instinct. Therefore, by seeking pleasure and satisfaction, the Id, described by Freud as “the seat of all drives” (Deal, 2007, p.3) unconsciously governs the ego, separates from it, and is utilized by the ego-libido reservoir. As a result, the primitive instinct is not only aggressive towards outer objects, but it is also aggressive toward oneself. So, as per Freudian perspective, self-destruction occurs due to the ego’s retreat into the Id after exhausting all its libidinal energy in the lost object. In addition, regressed stages make the ego incompatible with reality because it is overfilled with emptiness, worthlessness, and is unable to function normally, thus

resulting in complete weakness and vulnerability. Therefore, the “narcissistic identification with the object becomes the substitute for the love-investment” (Freud, 2005, p.209).

Freud specifically associated suicide with narcissism. From a narcissistic perspective, when a love-object is lost (by death), the love itself cannot be abandoned, so feelings of hatred replace that of love. As such, this sense of hatred is directed toward the shadow of that lost object for the purpose of “insulting it, humiliating it, making it suffer and deriving a sadistic satisfaction from that suffering” (Freud, 2005. P.211). It is, therefore, a sadist tendency towards the own person of the bereaved, towards the self, against one’s ego. Because of this, sadism brings the tendency towards suicide due to excessive love of the self, the love of the ego, which is derived from the primal state of death and life drives. Consequently, through self-torment of melancholia “the ego can only kill itself when it is able to treat itself as an object” (Freud, 2005, p.202), i.e., displaced hostility from the object and directed it against the ego itself as a substitution.

The sadistic drive “which aims to harm its object” (Freud, 2003, p.117) belongs to the death drive and it is charged with libidinal energy which enables it to subjugate not only the external object, which “satisfies the death drive perfectly” (Gerber, 2019), but also exceeds to its alternative. Since its attributions are innately aggressive, it will seek to achieve the corresponding object within the death drive, representing itself as a form of *pleasure*

Despite being a frightening topic, some people hasten the event of death by committing suicide because their psychological and physical pain exceeds the point where death may seem the only relief. Because of the extreme burdensome, death by suicide “is not merely about ending the pain and disappearing from the world, but to never have existed in the first place” (Gerber, 2019). However, suicide tends to be associated with low self-regard along with severe illness, anxiety, and depression. As a consequence, an individual compulsively compromises its life in order to reduce suffering. Age and illness represent a crucial part of human existence when it comes to natural death. On the contrary, in the case of suicide, death turns into something more violent when it occurs out of the ordinary because suicide “creates a tension between personal and social interpretations of acceptable solutions concerning ending one’s own

life or the life of others” (Hakola et al., 2015, p.11), especially the case of voluntarily choosing suicide preceded by previous intentions.

Voluntary euthanasia, however, is an evolutionary approach to death which not only supports the idea of good death but also shows courage and determination that suggests a possible human extinction. Yet it remains a method of self-comfort that argues against the idea of death itself for those who suffer from physiological or psychological discomfort:

"Man's struggle for freedom is not due to a will to be free, but to certain behavioral processes characteristic of the human organism, the chief effect of which is the avoidance of or escape from so-called 'aversive' features of the environment" (Skinner, 1973, 43).

Due to the limited ability of both Eros and Thanatos to withstand tension, the release of tension is either carried out by Thanatos through death wishes, or by Eros through life wishes. In both cases, the pleasure principle aims to reach its limit of freedom in order to satisfy its entity. To avoid psychological pain in a defense mechanism, death has become a way for the physical entity to free itself from its limitations.

2.2. The Death Wish in *Me Before You*

“He shoulders his way into his leather jacket. ‘What’s it like out there, Mick?’
Terrible. Raining cats and dogs.’
Will stops. ‘Really? Not weather for the bike?’
Mick shakes his head. ‘No, sir. Not unless you’ve got an inflatable attachment.
Or a death wish.’” (Moyes, 2012. P.9).

The story follows a young quadriplegic character - William - whose life is blocked by an accident-induced chronic condition. It took him only six months for his family to take him to Dignitas to end his life by means of voluntary euthanasia, although his parents hired a care giver -Louisa- in a failed attempt to change his decision. Will voluntarily requested active euthanasia to end his suffering through an overdose of narcotics injected by the physician. As long as the conditions are met, then he can basically end his life with an informed statement that proves his mental capacity to do so. Moyes is influenced by the story of Daniel James, a young rugby player, who was paralyzed due to a training accident at the age of 23. James’s parents commented on his decision to go to Switzerland that he was “not prepared to live what he felt was a second-class existence”, because his body becomes his “prison” and “his life if full of “fear and

loathing” (Hirsch, 2008). Moyes, however, not only conveyed the influence of James’s story in *Me Before You*, but also included her personal experience with a family member who has a progressive disease. Due to this, the author wondered about the “quality of life [and] face living a life that is so far [from one’s choice]” (Moyes, 2012, p.358). As such, Moyes questioned when the quality becomes meaningless to the extent that the person has the *right* to decide to end his life.

In the novel’s opening pages, William observes a conditional state restricted by certain causes which occur randomly. A heavy rain, a postponed ride on the motorbike, and wondering about Mick’s condition who usually stayed at the same place for hours staring at cars and closed TV. Mick’s comment on riding a bike in such a dark, thunderous morning resembles having a death wish which soon becomes a reality and leaves nothing but fragments of a man. Through her earlier foreshadowing of William’s death wish, Moyes reinforces how nothing could change his deep desire when it becomes a reality. The death of Will was inevitable, regardless of whether he used his motorbike in the rain or not. Hence, he must risk the remainder of his life to save a man who does not “believe in taking unnecessary risks” (Moyes, 2012, p.10). In spite of that, his youth was not on guard against death’s ambush, but rather on the lookout for its inevitable approach. The novel, therefore, depicts a death wish that is more than just a desire for death or to be killed in both its conscious and unconscious guises.

While living in a terminal, static, painful condition for three years, William has an apparent vision of a painless death. A death wish is “a conscious or unconscious desire to die or be killed” (Collins Dictionary, 2019). It refers to a nihilistic thought pattern that subjugates one to a suicidal desire. It also conveys a complete selfishness through knowing that the possibility of being satisfied is more likely than the possibility of being disappointed. With regard to Will’s life, Moyes reveals little about William’s life before his accident in contrast to Louisa’s daily details. Despite this, he is presented as a powerful, ambitious, and determined young man with a promising future in banking, but life suddenly failed him as one of his colleagues pointed out how “The office isn’t the same without you...It was just so odd. Like you fell off a cliff. One day you were there, directing everything, the next we were just supposed to ...” (Moyes, 2012, p.254). Thus, it is crucial because Will’s “inner debate” speaks louder of his decision and suicidal ideas than being in a state of “moral insulation from others” (Taylor, 1982, p.173).

The focus of the suicide investigation, therefore, should be on Will's psychic motivation as a communicative form of his inner self rather than considering his social stature. In opposition to William is Louisa Clark, his caretaker. She is an unvarnished girl whose "ordinary life" (Moyes, 2012, p.25) limits her opportunities in work, life, love, and study. Attempting to change Will's decision to end his life, Louisa is assigned to watch him, i.e., to "babysit" him (Moyes, 2012, p.105).

Will has acquired quadriplegia, which strengthens and intensifies his character's volition. In addition, he is a stubborn and free-spirited man, as suggested by his name. As a result of his current condition, which is disappointing and opposes all of his possibilities, he resorted to physician assisted suicide: chose death to end and stop his sensual and somatic pain.

Louisa's attributions are surrounded with limits; she was not assured of many things in her life, but certain of the fewer except herself: "There are 158 footsteps between the bus stop and home, but it can stretch to 180 if you aren't in a hurry" (Moyes, 2012, p.12). She is a woman with "exotic taste in clothes" (Moyes, 2012, P.25), and who hasn't lived anywhere except "here" (Moyes, 2012, p.98), where the family home and job are. During all the twenty-six years of her age, Louisa has never experienced any excitement in life and she can not hide her feelings. Furthermore, she has been with her friend - Patrick "Nearly seven years" (Moyes, 2012, p.283) and has almost no doubt about his character. Unlike Will, it was impossible to recognize his character through a tangible object that controlled his movements and stature.

The state of being restricted, therefore, has never existed in Will's life because he was filled with all the potentials of life of his youth, sports, job, and sources. Therefore, life cannot be perfected to its fullest in reality because death lies at the core of his current life. Since Will spent three years sitting on a chair, he usually refers to himself, his hands, and his legs as "a thing" or "a bloody thing". The same is true for his chair, because both of which serve to present him with an inanimate, useless object:

Will: "But it does define me, Clark. You don't know me, not really. You never saw me before this thing. I loved my life, Clark. Really loved it. I loved my job, my travels, the things I was. I loved being a physical person. I liked riding my motorbike, hurling myself off buildings. I liked crushing people in business deals. I liked having sex. Lots of sex. I led a big life ... I am not designed to exist in this thing – and yet for all intents and purposes it is now the thing that defines me. It is the only thing that defines me." (Moyes, 2012, P.316).

Since Will was once engulfed with potential and now, he is only breathing, and completely rejects the idea of being stuck in a chair or a place for the remainder of his life. He had a mismatched self-image after becoming quadriplegic compared to his ideal self before. Objectively, his state of being is only existence without any other purposes. In the same way, Louisa simply accepts the monotonous days without any further effort to discover her potential. The waste of such a gift exasperates Will to the point where he blames Louisa, as well as encourages her to live every minute of her life; “That’s why you piss me off, Clark. Because I see all this talent, all this ... energy and brightness, and ... potential. Yes. Potential. And I cannot for the life of me see how you can be content to live this tiny life” (Moyes, 2012, pp.201-202). It is how Will comprehends his existence which becomes nothing but a mere battle that is endlessly aimless. Louisa is fully capable of embracing life in its entirety since “there’s a whole world out there” (Moyes, 2012, pp.202) waiting for her.

When Louisa asked Will about what he “normally” did - currently- his stark reply was “I don’t do anything, Miss Clark. I can’t do anything any more. I sit. I just about exist” (Moyes, 2012. P.44), where he summarizes his state of being. Louisa’s question is not only naive, but also illustrates how limited her understanding of the nature of things is as a result of her only being in one place. In this regard, she has not yet grasped the meaning of quadriplegia or estimated the value of life completely. Thus, Will finds it difficult to articulate his condition verbally; “Let me get this straight. You think a teaspoon of carrot would improve my quality of life?” (Moyes, 2012. P.66). So, quadriplegia for Will is not the only source of pain, but the increasing state of inner pain, which is not explicitly expressed by words, but is manifested strongly by suicide attempt. First, Will proposed his death to his mother, who listened with an impossible response “I told him he was being ridiculous” (Moyes, 2012. P.111). While the prospect of his recovery is completely absent, he granted the request that what he had now was not what he had chosen. Therefore, he deemed it reasonable for him to end his life in the way he saw fit..

Will’s first attempt of suicide was not “a cry for help” (Moyes, 2012, p.112), but a constant stance towards his life. He would repeat the attempt again until he worked it out, because a cry for help is “an expression of suicidal intent in the hope of receiving help and being rescued” (Davis, 2021), and his was not. However, “most suicide attempts, for whatever reasons, are essentially a cry for help” (Evans & Farberow, 2003,

p.55) because it is the only means of communication for suicidal people. From medical and psychological perspectives, a cry for help signifies a clear intention of suicide. Thus, the person seeks help or rescue. In almost every suicide attempt, the person intending to end their lives will leave a hint, a trace, or even an oral or written confession of their intent to die. In this sense, “not to ignore the issue [but] better to offer help early than to regret not doing so later” (Evans & Farberow, 2003, p.170). In case the cry is heard, a prevention may occur. This is why such crucial issues should be addressed with support, understanding, and compassion. On the contrary, Will’s first attempt at suicide occurred in complete silence:

"In reacting to current pain, the patient is generally experiencing pain that is poorly managed and/or poorly tolerated, both from pharmacological and psychologic perspectives. Regarding projected pain [the patient] often assume [to] be subject to intense and uncontrollable pain at some future time." (Linzer, 1984. P.125).

In Will’s second attempt, his mother has hired Louisa, even though she does not know that Will intends to go to Switzerland. Despite the fact that she does not meet the criteria of any job aspiration, her former boss describes her as “warm, chatty and life-enhancing presence” (Moyes, 2012, p.28). Will’s mother, however, accepts Louisa for being different, and the presence of such a personality might change the atmosphere in the annex, even though she has never dealt with quadriplegic patient before. Moreover, Will’s state of depression and the psycho-physio complication leads him to contemplate his first suicide attempt silently and no longer intends to explain more sufferings since others are unable to comprehend how difficult to undergo such conditions. So the more silent is the attempter, the more inclined is the person towards suicide. As a consequence, the potential for suicide remains constant not only for Will, but with those who have suicide ideations and previous attempt(s), even if they received treatment. This is because they have a keener eye of the painful experience other than those who never experienced pain, and already decided to take a risk and are just waiting for the right moment (Linzer, 1984).

Due to this, Will’s mother described his stance as “He refused to let it go. Being Will, he always had to have the last word” (Moyes, 2012, p.111). The effect of his quadriplegic condition is not restricted to Will; it also has negative consequences on his family. As a result, Will’s parents have to accept his decision and say “yes”; it is because of his stubborn nature and his hopeless condition of immobility and suffering. Otherwise, they need to be vigilant to avoid the reputation of the horror of another

inflicted suicide attempt. The character of Will is affected and changed from the beginning of the novel when he developed a new psychic identity but stayed hidden and silent, i.e., acted unconsciously. Soon afterwards, his trait reveals itself and is recognized through a suicide attempt and definite death.

Accepting oneself is a crucial part of this novel. Will is most anxious and stressed due to his transformation from being a healthy, successful young man to being a man with a severe disability, and he is only “- just this thing” (Moyes, 2012, p. 112). Being a ‘thing’ is an extreme expression of low self-regarding. He became more isolated and deficient because he lacked the physical and moral foundations of his existence with respect to his newly formed identity, which contradicted and conflicted with his previous self-recognition.

In contrast, Will is confident of his state of being before and after the accident. But Louisa’s potential was squandered by others’ selfishness. She finds Will’s question of “And what do you want from your life?” so deep that she doesn’t understand its general context: “I don’t know. I’ve never really thought about it” (Moyes, 2012, p.70). In her dream job, Louisa would like to be a fashion designer for her exotic line. Her style reflects a boldness nature; this is because no one would ever venture to wear the combination of colors she chose from some fabrics that some of them are “made from fabric that had once been Granddad’s curtains” (Moyes, 2012, p.200) which is not easy on the eye. Even so, Louisa has much to learn about life, so she can utilize her potential to see the world. The encouragement Will gave to her allowed her to be able to see herself rather than stay stuck in the same place like him, even though he was hopeless and depressed.

During his analysis of suicide, Durkheim came up with a form of suicide characterized by egoism that resulted from the lack of bonds between the individual and society as man’s relationship with the world relaxes when the bond tying him to society is slack as well (Taylor, 1982). In consequence, Will suffers from a lack of social integration and interaction, i.e., he is unable to conduct himself equally in society or fulfill his sufficient presence. This intensifies his feeling of inadequacy.

Consequently, he is seen as “the individual [who] becomes remote from social life and suffers from an excess of individualism” (Taylor, 1982. P.13). As a result, such isolation strengthens psychologically the individual’s sense of apathy which results in

(suicide) as Durkheim emphasized “[egoistic suicide] results from society’s insufficient presence in individuals” (Taylor, 1982. P.15). Therefore, apathy demonstrates how an individual’s detachment from society passively blocks others’ emotions and motivations. As such, suicidal ideas became more self-contained and private “Suicides resulting from states of ectopia are ‘inner-directed’, they are the product of an inner debate in which the individual tries to validate his own existence to himself” (Taylor, 1982, p.176).

Due to his focus on the correlation between the individual and society, Durkheim considered that social conditions lead to individual suicide. This in turn places the individual in a specific context for a particular aetiology. However, suicide, as per Durkheim, is defined as “any death which is the result of a positive or negative act performed by the victim himself... which he knows will result in his death” (Durkheim, 2005, pp. 41-43). Thus, the isolation of the individual from society increased the sense of apathy leading to egoistic suicide through which Will’s decision is considered as an ectopic state.

However, Will's egoistic suicide has only an ectopic trigger, but it could not be the main source. Although he refused to be in public because his social life was about to end, this situation changed when he decided to accept Louisa’s suggestion of indulging in different social activities. Despite Will’s temper, Louisa persistently works under his pressure for the sake of the good money in spite of his dismissive attitude towards her presence:

Louisa: “I’m not employed by you. I’m employed by your mother. And unless she tells me she doesn’t want me here any more I’m staying. Not because I particularly care about you, or like this stupid job or want to change your life one way or another, but because I need the money. Okay? I really need the money.” (Moyes, 2012. P.60).

It is likely that Will perceives Louisa’s excessive selflessness as putting her in a position of responsibility for her family. Changing from hiding in the annex to showing up in public during Will’s remaining days is crucial, yet it would remain false hope. And for the last time for him, Louisa is the only way to view life. Due to the limited financial resources of Louisa’s family, she and her father become jobless despite the fact that they provide the family with its main source of support. Nevertheless, this would never loosen her “optimistic part” (Moyes, 2012, p.219). Trying to grasp Will’s plight, Louisa looks closely at him: he is a miserable man, suffering from health problems that never cease;

she puts herself in Will's shoes as if she had quadriplegia herself, and she judges herself similarly:

Louisa: "I thought he was the saddest person I had ever met, in those moments when I glimpsed him staring out of the window. And as the days went by and I realized that his condition was not just a matter of being stuck in that chair, of the loss of physical freedom, but a never-ending litany of indignities and health problems, of risks and discomforts" (Moyes, 2012. P.49).

Among his few confessions to Louisa, Will mentioned his fears of life rather than death: "I get really, really scared of how this is going to go" (Moyes, 2012, p.243), a reflection of his intense self-refusal. The only burden he faced was his decreased health condition, as opposed to his state of existence as a "thing". As long as he is able to stop his suffering now, he might not be able to do so in the future:

Will: "I could end up not being able to breathe by myself, not being able to talk. I could get circulatory problems that mean my limbs have to be amputated. I could be hospitalized indefinitely" (Moyes, 2012. P.243).

Because of Will's terminal illness, he has been deprived of all the things he needs (including concrete or abstract ones). Furthermore, all of his negative feelings serve as triggers that convey a reciprocal relationship between mind and body. In other words, his physical condition transmits a negative response to produce an aggressive psychological effect:

"Will's body's massive overreaction against pain, discomfort – or, say, an un-emptied catheter – his damaged nervous system's vain and misguided attempt to stay in control. It could come out of nowhere and send his body into meltdown. He looked pale, his breathing laboured" (Moyes, 2012. P.265).

Also, Will's first suicide attempt and his second request for euthanasia are expressions of all of his somatic pain and unfulfilled desires. Consequently, he exhibits self-destructive behavior because his life becomes extremely burdensome, and in order to achieve the desire to no longer exist, he chooses suicide, i.e., self-destruction behavior. In fact, his mother's refusal to accept his decision to end his life stemmed not only from death denial in that way, but because of her belief that "some pattern that it was only God's purpose to understand" (Moyes, 2012, p.109). The same is true for Louisa, who quit the job because she was angered by Will's decision; "Don't you think it would have been fair to mention that I was basically on suicide watch?" (Moyes, 2012, p.121). Despite this, she was convinced later by her sister Katrina that she could make Will Traynor spend more time outdoors by planning something that enables him to do so "you change Will Traynor's mind" (Moyes, 2012, p.126). As Will lives in a situation

where he is dying, but not dead, his attitude towards his current life remains confined by his body and chair at all times I don't want to live like this, Mother. This is not the life I chose. There is no prospect of my recovery, hence it is a perfectly reasonable request to ask to end it in a manner I see fit" (Moyes, 2012, p.111).

Concerning psychoanalysis, since Will's Id corresponds with the unconscious, his life takes place in the fulfillment of his death wish by force of the pleasure principle. The Id, however, is the main reservoir of all his repressed libidinal energies. As a consequence, Will's perception of his body is viewed from two angles. Prior to the accident, it was clearly seen as a distinct object, which provided its perception system with a unique image. A second source of deep pain arises from the damage caused to his physical body, coupled with the distortion of his ego - his potential. As such, his physical entity is frustrated and becomes a "Bloody useless thing" (Moyes, 2012, p.242) which no longer exists. In this way, such external factors that essentially cause physiological or psychological influences can affect the human's organs and how the individual perceives his own body. Will's physical form, therefore, which is the corporeal entity on which his quadriplegia appears, provides his ego with a revised, distorted perception of his hopeless condition. An entity with a complete sense of disability is conscious of this perception; "I just ... want to be a man who has been to a concert with a girl in a red dress. Just for a few minutes more" (Moyes, 2012. P.165).

Furthermore, Will experiences unpleasant sensations that are clearly different from the ones he had in the past (his past active life), indicating that his repressed cathexis is increasing in size and placing much greater pressure on him. These needs, however, are primarily precepted within both his conscious and unconscious and are driven by the conflict of his primal drives - of life and death. Because of this, his needs are no longer being met, and they will emphasize his source of crisis, pain, and disappointment: "I... I cannot live with that knowledge. I can't. It's not who I am. I can't be the kind of man who just ... accepts... I will never accept this" (Moyes, 2012, p.317). These sensations, while still within the realm of his consciousness, will be manifested by the behavior of suicide and perceived as reality as unpleasurable. So Will transmits this awareness to the 'other'- to the primary instinct for pleasure- to the death drive, and suicide is regarded as the pleasurable context of death that frees him from pain:

Will: "Nobody wants to hear that stuff. Nobody wants you to talk about being afraid, or in pain, or being scared of dying through some stupid, random infection. Nobody wants to know

how it feels to know you will never have sex again, never eat food you've made with your own hands again, never hold your own child. Nobody wants to know that sometimes I feel so claustrophobic, being in this chair" (Moyes, 2012. P.243).

In addition, Will's ego accepts the displacement that occurs between the ego and the Id, despite the fact that it was impossible to happen before the accident. Therefore, the 'other', this instinct of preservation, is incredibly powerful with extreme energy that surpasses the capacity of the ego. The Id, on the other hand, resists the pressure caused by the ego to not kill. However, Will's ego no longer has the ability to resist that pressure of all the unmet needs and hence loses its balance as a mediator between internal and external perception. As such, a release process to the primitive, unconscious component will be completely and consciously performed:

Will: "– I need it to end here. No more chair. No more pneumonia. No more burning limbs. No more pain and tiredness and waking up every morning already wishing it was over" (Moyes, 2012. P.317).

In Will's unconscious thoughts, the death drive triggers the guilt as a result of forbidden libidinal needs. However, his desire to death emphasizes the dominance of his Id over other psychic parts – over his ego which is already devastated, and the superego whose ideal image of reality turns out to be useless. This is because Will's life never grows again, things neither change nor improve, and only they fail. This is because of the fragility of his body as "the furrow between his brows that spoke of silent pain" (Moyes, 2012, 100). Therefore, the powerful inner force of the Id encourages him to be restored to an inorganic state in order to achieve a stable equilibrium. The Id is seen as having completed its course due to its dominant nature over other psychic levels. However, it has an imperative role to fulfill in achieving pleasure, acting only for a reason. Therefore, before judging whether Will's suicide request is right or wrong, we need to examine the 'what' of his action. Regarding, Korsgaard's philosophical view:

"action is essentially production, and accordingly its function is to bring something about. Whether an action is good depends on whether what it brings about is good, or as good as it can be." (Korsgaard, 2009. P.23).

Morally based actions are satisfying as long as they produce good which is morally valued. In this sense, the good act is standardized based on its effectiveness as 'good'. Nevertheless, not all actions can be judged by these moral or goodness standards. There are, therefore, actions taken for a purpose, or a reason. In other words, an action done for a certain 'aim', i.e., a purpose for the sake of a certain end. Therefore, suicide and attempting suicide are acts made by choice. As such, Will's act of suicide reveals

his character, since “the action which properly speaking is morally good or bad, noble or base” (Korsgaard, 2009, p.27). Although Will’s decision is misleading and controversial, he makes it clear that his purpose is the main reason for his choice “This isn’t much of a life” (Moyes, 2012, p.243). In other words, choosing death is a suicide, i.e., the act of suicide serves the purpose.

While suicide is needed to stop Will’s serious condition, it is for “its own sake” (Korsgaard, 2009. P.25) as long as it is worth doing since it is his only option “I don’t want to be in pain any more, or trapped in this thing, or dependent on everyone, or afraid” (Moyes, 2012, p.317). Therefore, Will’s suicide is motivated by his desire to alter that destined status, since he cannot seek outer pleasure through the present reality. Accordingly, his only means of pleasure is to respond to the death instinct’s call, i.e., by committing suicide, where the death wish is completely fulfilled.

The contrary is true with Louisa, who steps out of her former mode of life with a shift in her thinking. She acts boldly and changes her attitude not only towards herself, but also towards her family:

Louisa: “I owe Will. I owe it to him to go. Who do you think got me to apply to college? Who do you think encouraged me to make something of myself, to travel places, to have ambitions? Who changed the way I think about everything? About myself even? Will did. I’ve done more, lived more, in the last six months than in the last twenty-seven years of my life” (Moyes, 2012. P.341).

To show Will that there is still hope for living because of love, Louisa made plans for them to spend time together outside the annex. In order to arrange new excursions, she visited the library and logged into chat rooms “for those with spinal injuries, and found there were thousands of men and women out there just like Will” (Moyes, 2012, p.203). It was clear based on reading their struggle stories that some of them ultimately ended in despair, exhaustion, and suicide ideations. As a result, her patience and keenness allow her to contribute to Will’s quality of life by chatting, choosing places that are suitable for his chair, and caring for him at night, at the very least, to convey that life still has a value. Moreover, Louisa suggests a trip to Mauritius, where Will, Louisa, and Nathan, Will’s physician, find a resort that is suitable for people who use wheelchairs.

Despite all Louisa’s attempts, the realm of Will’s unconscious is unlimited, and it only appears when there is a repressed entity seeking its freedom. Due to its dynamic nature, feelings, memories, thoughts, pain, and emotions are not always within the

individual's conscious awareness, except when they are recalled, and they are usually the source of anxiety. So they are short-term. It is possible, however, that they are conscious and lasting in exceptional circumstances. Consequently, Will's sensations are as terminal as his quadriplegia, which basically killed him and never even allowed him to accept love. Despite Louisa's futile efforts to remove that desperate image of life in Will's mind, she was unable to accomplish what she had hoped:

Will: "I am still going to go to Switzerland. And if you do love me, Clark, as you say you do, the thing that would make me happier than anything is if you would come with me" (Moyes, 2012. P.317).

In this way, Will's unconscious keeps interpreting his repressed needs that demand immediate satisfaction and are consciously recognized by his ego. Based on the pleasure principle, people, generally, tend to reach a minimum state of stability, i.e., reducing the tension they experience. This is because the pleasure principle opposes any change, regardless of the challenge presented. In the absence of such integration, Will's pleasure principle overpowered his ego and manifested itself in two suicides. Additionally, repressing and preserving certain memories is at odds with defending the self because it is a temporary mechanism. However, it manifests itself in the pre-conscious, which is limited to the dynamic components and is closer to the unconscious than to the conscious. However, any spark of any memory may provoke it:

Will: "Me smashing those photographs was not an accident ... It was because I actually don't want to look at them ... Give the poor invalid something to look at. I don't want to have those bloody pictures staring at me every time I'm stuck in my bed until someone comes and bloody well gets me out again" (Moyes, 2012. P.61).

Since these photos remained a source of pain for Will, he not only distanced himself from them but from all of his surroundings in a defense mechanism. Negative emotions of this magnitude cause anguish, and create discomfort to the utmost degree; therefore, he would be plagued with constant pain. As such, the value of the reminder that the photos provide is the same as the value of the life he became. As a result of such a deep and intense discomfort, a psychache shall result. When Will's psychological and physiological states combine, stress, hopelessness, failure, worthlessness, and disappointment, etc., accumulate to create a burden that leads to depression.

Further, Will is portrayed as a melancholic, depressed, overwhelmed with pain, and selfishness. Because of the absence of the love-object [his physical potential], and the long-term pause of his libido whose energy is postponed with infinity, the sense of

isolation, guilt, and self-reproach are increased to the extent that they remain terminal. Thus, he is drowned in pathological melancholia. As a consequence of which, Will focuses on avenging the self in a sadistic manner, because as the story is victimless, Will's self is the only victim. His condition and decision are mirrored through his mother's fury: "I raged at God, at nature, at whatever fate had brought our family to such depths" (Moyes, 2012, p.112).

Moreover, based on Freud's attitude, there are two factors that affect the separation of Will's ego from his Id: transmitting the sense of disability to the conscious accompanied with a pressing intention to end it, and second the continuous changes of physical appearance. These changes strike his perception and the degree of accepting his body through which he would conduct the place of his physical entity in the world. Louisa, however, embraces all Will's conditions with care and love, but this can not last forever because "He's who he is. You can't make people change who they are" (Moyes, 2012, P.332), specifically for Will who sees things in his own way and does not change. So his selfishness stands in stark contrast to the selfless Louisa. Additionally, Will needs to be allowed to feel like a man that is not going to be possible if any of his family, for that matter – "is always on hand" (Moyes, 2012, p.130) and even with the love and compassion that Louisa offers.

Despite its taboo implications, suicide is seen as a stage of autonomy under certain circumstances. Will's suicide, however, is a will-based choice on the part of himself. In addition, suicide draws attention to the extent to which human nature - in general, and Will - in particular, has endured its limits, and how long this nature can continue. As such, the value of life which is void of quality is seen as disrupted, never back to normal, and has no point in living. Due to the conflicted forces caused by a death wish to die with dignity, there are certain issues that destined not to change as Moyes suggests "pain and infection, as well as the mental challenges" (Moyes, 2012, 358) because they restrict a person with an endless battle against them.

Therefore, for Will, or the person who request to die, death is no longer the only source of fear and anxiety; rather, it is the anticipation of life which might worsen with illness:

Louisa: "He seemed not just weary from his illness, but exhausted with life, tired of our interference, our upbeat attempts at conversation, our relentless determination to try to make

things better for him. He tolerated me, but I got the feeling that he often wanted to be left alone. He didn't know that this was the one thing I could not do" (Moyes, 2012. P.301).

In the left six months, Will's mother set her expectations. She, hopefully, expected that Will might change and retreat from his decision: "He promised to give me six months ... We must just pray very hard that something happens in that time to change his mind" (Moyes, 2012, p.106). In essence, time and change have no false projection because "time is essentially dependent on change" (Coope, 2005. P.16). With regard to Aristotle's view of time, it "is a kind of number; something of change" (Coope, 2005, p.42). However, as Aristotle explained the nature of things, every natural thing is subject to change. Therefore, change occurs to all things in a broader sense, whether it is qualitative, quantitative, or spatial in nature. Therefore, he explained time in terms of change not vice versa because there is no change without time, and time depends on change to be estimated. He, therefore, defined time as:

a number of change with respect to the before and after because in counting this series of nows we also count all changes, and we do so in such a way as to reflect the before and after orders within each of them (Coope, 2005. P.97).

The title, however, of *Me Before You* suggests change because of the conjunction [before] which connects two entities: [me] and [you], which already presumes there was an [after] due to the change that occurred. This implies a comparison-like process which introduces both the characters of Will and Louisa as seen before and after:

Will: "I've watched you these six months becoming a whole different person, someone who is only just beginning to see her possibilities. You have no idea how happy that has made me" (Moyes, 2012. P.316).

The duration of time for Will is only continuous, starting from the moment where he is alive to the moment when he will end his life. So, the intensity of his crisis is incredibly overwhelming to his family and Louisa: "How could you live each day knowing that you were simply wasting away the days until your own death?" (Moyes, 2012, p.114). Therefore, for Will, time is neither fast nor slow, but is only countable: "Time is, by definition, something that is counted by counting nows in this way" (Coope, 2005, p.102). Despite Will's moral disapproval of his physical weakness, which associates him with attributes of agony and wretchedness, he seemed, at first, uncomfortable to be in public: "Strangely, I'm not overly fond of being spoon-fed in front of strangers" (Moyes, 2012. P.145). Consequently, he perceives himself as an imperfect entity who suffers from self-loathing:

Will: “If you’d bothered to ask me, Clark. If you’d bothered to consult me just once about this so-called fun outing of ours, I could have told you. I hate horses, and horse racing. Always have. But you didn’t bother to ask me. You decided what you thought you’d like me to do, and you went ahead and did it. You did what everyone else did. You decided for me” (Moyes, 2012. P.153).

Later, this attitude changed despite the tension between his lost love-object and the surrounding environment and became less worried about being in social gathering and decided to accompany Louisa to a concert, the castle, Mauritius, a picnic, and even to Alicia’s wedding, his former girlfriend: “We’re going to a wedding ... If I’m not worried about it, Clark, I don’t think you should be” (Moyes, 2012, pp.247-248). Trying to recall Will’s days of exploring the world, Louisa asks him, “Where would you go, if you could go anywhere?” (Moyes, 2012, p191) and he had a wish to visit Paris again, but it remains only a wish:

Will: “I don’t want to go there in this – this thing... I want to be in Paris as me, the old me. I want to sit in a chair, leaning back, my favourite clothes on, with pretty French girls who pass by giving me the eye just as they would any other man sitting there. Not looking away hurriedly when they realize I’m a man in an overgrown bloody pram” (Moyes, 2012. P.192).

For Louisa, the moment where she sees Will’s real face, it was “something that was peculiar to Will himself, discreet and expensive. His face began to emerge and I could see how easy it must have been for him to attract someone like Alicia” (Moyes, 2012. P.100). Consequently, Will was able to grasp Louisa’s true nature as a girl who puts others before herself due to his experience and intelligence. Despite his acerbic nature, Will not only embraced and accepted Louisa’s bizarre character, but he maintained the status quo for six months. Louisa, on the other hand, “failed to persuade him” (Moyes, 2012. P.321) and having her around does not change the facts even with love. Moreover, Will invested Louisa’s presence to see life through her, encourage her to see the world, and confirm his decision, because he believes that as a person changes, so do his surroundings:

Will: “You don’t know that, Clark. You have no idea how this would play out. You have no idea how you’re going to feel even six months from now...” (Moyes, 2012. P.316).

Will was confident of the changing nature of people because of his personal experience which turned him upside-down, and because he recognized how Louisa changed during the six months which emphasized his stance. Thus, her attitude towards him might not be the same in the future. Hopelessly, his ego has been destroyed, his self-love has vanished and withdrawn inward and is only expressed by hatred seen through destruction. Consequently, instead of releasing his sexual desires towards the opposite

sex, he relents to the libidinal cathexis which he directed to release the death instinct consciously. Thus, the death instinct settled in the conscious where its regression to its reservoir again becomes impossible. So the pleasure principle strives to satisfy the death instinct and substitutes his repressed libido:

Will: "I don't want to look at you every day, to see you naked, to watch you wandering around the annex in your crazy dresses and not ... not be able to do what I want with you. Oh, Clark, if you had any idea what I want to do to you right now" (Moyes, 2012. P.316).

Living with a terminal illness is the antithesis of life and it represents a postponed death. Therefore, Will's attitude towards death was a product of contrast between what his life is now and what he wants. Thus, he anticipated his end with a complete equanimity. He has been to many places around the world "Is there anywhere you haven't been?" (Moyes, 2012, p.191) except for one; death, which was beyond his limits. Consequently, instead of waiting death to take its natural course, he fixed himself with a countdown until the zero moment, i.e., a reversed life towards death as it is prefigured: "He knew the maze backwards, he told me as we walked, his voice calm, reassuring. It had been a challenge for him as a boy to learn his way through" (Moyes, 2012, p.242).

Throughout the novel, Will has been portrayed as selfish, and Louisa described him as a self-centered person as well: "You are so selfish, Will" (Moyes, 2012, p.318). This is because of the way he decided to end his life which may make Louisa and those who love him suffer. However, not having Will in Louisa's life or his family would make their lives easier and they could take its course naturally. Therefore, Will is being selfish because he refuses to be seen as pathetic or inadequate. In addition, he would be more selfish if he stayed with Louisa because he refuses to restrict her with his finitude since she has all the possibilities to live the way he himself once had, with all her potential:

Will: "I don't want you to miss out on all the things someone else could give you. And, selfishly, I don't want you to look at me one day and feel even the tiniest bit of regret or pity that -" (Moyes, 2012. P.316).

As a consequence of self-obsession, the ego shrinks to the extent that the ingrained death instinct exposes and self-annihilation shall manifest itself: "It's not going to get any better than this. The odds are I'm only going to get increasingly unwell and my life, reduced as it is, is going to get smaller" (Moyes, 2012, .317).

The love-object that identifies Will, however, has figuratively lost [his physical vitality] as a result of paralysis, but he remains unable to abandon the idea of love itself. This causes a sense of hatred to emerge due to the displacement of what was once the object of love; “He hates me, looks at me like I’m something the cat dragged in” (Moyes, 2012. P.43). In fact, Will did not hate Louisa from the start of the events nor did he hate her when he refused to give their relationship a second chance.

Rather, he is disgusted with himself and reflexes that feeling onto those around him because it is his inability that puts him in a sympathetic position. Therefore, this transformation from love to hatred belongs to his narcissistic roots. Thus, excessive love of the self (ego) is a natural stream derived from the primal state of human drives. Upon displacing what was once the object of love with what it has become recently, Will feels disgust and hatred instead of attracting and love. With such intensive damage to Will’s ego, a sense of hostility towards the ego itself emerges not to any outer object as Freud explained

“Physical pain gives rise to an intense cathexis of the painful part of the body; this cathexis, which we may term narcissistic, grows ever more intense, and has an ‘emptying’ effect on the ego” (Freud, 2003. P.251).

A kindhearted Louisa is willing to witness Will’s last moments; she says, “I love him. I love him, and I shouldn’t have left him alone” (Moyes, 2012, .340). She challenges her family and herself and follow Will to Switzerland. However, Will’s feelings towards Louisa were almost conservative, although he confessed that “You are scored on my heart” (Moyes, 2012, p.355). It is clear that even a confession of love for him is false in the sense that it would make no difference, which makes him true to Louisa and himself. As an alternative, he could provide real things to support the idea of such a mutual love and respect; “you will see not just that I could only have done the thing that I did, but also that this will help you live a really good life, a better life, than if you hadn’t met me” (Moyes, 2012, p.354). In order for Louisa to be able to study for her degree, Will supports her financially as long as he is aware that finance is as important as health. Aside from this, being needless to his resources will also bring him relief if he makes good use of them since they no longer bring him happiness; rather, because “there is not much that makes me happy any more, but you do” (Moyes, 2012, p.354).

In *Me Before You*, Louisa and Will belong to different classes. In her novel, Moyes purposefully discriminates against class because she observes English society, which remains unchanged. By depicting her own experience of growing up in a small town, Moyes was “fascinated by the way that growing up in one can be the greatest comfort - and also incredibly stifling” (Moyes, 2012).

Consequently, she chooses a small town in England with a castle in its center to reflect the inherited wealth, i.e., “old money rubbing up against ordinary people” (Moyes, 2012). As the setting shifts to Paris, to the dark-green cafe on Rue des Francs Bourgeois, Louisa begins to grasp her true potential, which becomes “a luxury” (Moyes, 2012. P.355). As a result, she no longer considers elevation a dream or a matter of concern for herself:

Louisa: “The difference between growing up like me and growing up like Will was that he wore his sense of entitlement lightly... just have this sense that good things will fall into place, that your position in the world is naturally an elevated one” (Moyes, 2012. 237).

Now Louisa can “Just live well” (Moyes, 2012. P.355) as something Will has done for her future “has alleviated something” for his death (Moyes, 2012, p.354). Suicide, in sum, is a decision, an act of destroying the physical entity to kill the pain itself in order to protect the psyche as a response of the primal instinct- the Id - in a defense mechanism to protect the self- the ego:

Louisa: “He was already retreating, withdrawing to somewhere I couldn’t reach him... I wanted to press every bit of me against him. I wanted to will something into him. I wanted to give him every bit of life I felt and force him to live” (Moyes, 2012. 349).

Before crossing the other side, Will empowered Louisa with life although he is deprived of its flow and added meaning to it as well. Whether it is silent suicide or requested euthanasia, Will protects his pleasure feelings from being depleted by disappointments caused either by his damaged internal dynamics or by irresponsible paralysis.

3. CONTRADICTIONS AT A TABOO

3.1. Death by Suicide and Non-voluntary Euthanasia

Jonas: “He killed it! My father killed it!” (Lowry, 1993. P.150).

The Giver: “... They brought in the syringe and asked her to roll up her sleeve... perhaps she wasn't brave enough? I don't know about bravery: what it is, what it means. I don't know that I sat here numb with horror. Wretched with helplessness. And I listened as Rosemary told them that she would prefer to inject herself... there you are, Jonas. You were wondering about release” (Lowry, 1993. P.151).

In Chapter Two, a choice based on will was portrayed, even if this choice was suicide. There is no doubt that the psychological conflict in *Me Before You* arises from the tension between the instincts of life and death within the protagonist's psyche, i.e., man against himself. In terms of the dualistic nature of the pleasure principle, death wish-fulfillment is a tendency towards self-annihilation, i.e., as a means of self-preservation manifested through suicide with the primacy of death. Thus, suicide can be viewed as a conscious act of death where death instinct prevails to satisfy the pleasure principle.

It is the reality principle that enables Jonas to distinguish between the world he experienced in memories and the one he lives in Chapter Three. Consequently, Jonas acts according to the reality principle, which opposes the pleasure principle. In *The Giver*, however, death can take many forms, including suicide and non-voluntary euthanasia, but not for a loss: “Release was not the same as Loss” (Lowry, 1993, p.44). The term ‘release’, therefore, has been repeated throughout the story because death is not introduced by its general concept, rather by a less meaningful and more primitive one. In addition, death is not denied, although it already exists in its most dreadful form. Further, it is governed by the twelve Chief Elders and is overseen by the Nurturers and manifests itself as the fear of death instead of death itself.

Because of this, Jonas's community not only follows a predictable way of life, but even death follows a predictable pattern particularly to those who may be unfit to the community standards:

Jonas's Father: “... he isn't growing as fast as he should, and he doesn't sleep soundly. We have him in the extra care section for supplementary nurturing, but the committee's beginning to talk about releasing him” (Lowry, 1993. P.7).

However, in Jonas's community, suicide is controversial and is seen as a taboo; death by accident is a tragedy and is described as a 'loss'. As for non-voluntary euthanasia, which is a euphemized expression of imposed death, has been presented as a release to elsewhere, which is oriented as a normal process: "If you don't fit in, you can apply for Elsewhere" (Lowry, 1993, p. 48). However, young children, infants, and the elderly are all euthanized under deterministic conditions due to the plightless and inhumane environment that prevail in the novel. An infant whose weight is smaller than its twins does not meet the community's criteria is released into the darkness as Jonas's described the scenery when his father released one of the infants. It was the crucial moment when Jonas decided to leave the community forever:

Jonas: "He picked up a small carton that lay waiting on the floor, set it on the bed, and lifted the limp body into it. He placed the lid on tightly. He picked up the carton and carried it to the other side of the room. He opened a small door in the wall; it seemed to be the same sort of chute into which trash was deposited at school" (Lowry, 1993. P.150).

In the beginning, Jonas had no idea what the term release meant or what it meant in context. However, using his limited knowledge of the process, he can only refer to it as a "final decision, a terrible punishment, an overwhelming statement of failure" (Lowry, 1993. P.2). This is because those who are released are not coming back to the community: "My mother says that once, about ten years ago, someone applied [for release] and was gone the next day" (Lowry, 1993, p.48). In the case of infants, Jonas or anyone in the community can only express sympathy towards the abusive act. This is because those babies who are released will not have the opportunity to enjoy their lives in the community, as though it were a place where people might enjoy themselves.

It is difficult to live in the same community with two identical people due to its general atmosphere, which is prone to rules, emotionlessness, and strict orders. The same holds true for elders who are released from the community. As such, Jonas was devastated after watching a video in which his father released a twin. In spite of this, the Giver bitterly justified the abuse or how it was administered by Jonas's father or accepted by the inhabitants, because "They know nothing" (Lowry, 1993, p.105). Jonas also learned that it is impossible for anyone to change the inhabitants unless an exception is made:

The Giver: "Listen to me, Jonas. They can't help it. They know nothing" (Lowry, 1993. 153).

The Giver: "me realize that things must change. For years I've felt that they should, but it seemed so hopeless" (Lowry, 1993. P.155).

In addition, a pilot who made a wrong turn and flew close over the community has been released because his mistaken act terrified the community. Meanwhile, Larissa, who is one of the elders, mentions how “wonderful” (Lowry, 1993. P.31) it sounds when celebrating a release of a person and is told of its accomplishments at the release ceremony “They told his whole life before they released him” (Lowry, 1993, p.31). Release is also applied to those who have committed a second transgression without being given a third chance: “The rules say that if there’s a third transgression, he simply has to be released” (Lowry, 1993, 9). Regarding the infanticide issue, one of the infants, Gabe, has sleeping problems and Jonas realized that he will be released, too:

Jonas: “When? When he will be released?”

Father: “First thing tomorrow morning... It’s bye-bye to you, Gabe, in the morning” (Lowry, 1993. P.165).

Because Jonas recognized his father as a killer, his action amounted to murder. In light of this consideration, Jonas’s perception of his father, his family, and his community completely changed, and he could not continue his life as he had previously:

Jonas: “I won’t! I won’t go home! You can’t make me! ... No one heard that little twin cry, either! No one but my father” (Lowry, 1993. P.152).

This, however, a society without memory, history, human experience, and civilization as depicted by Lowry. Initially, it seems perfect, well-organized, and people are equal, and it is a safe place without wars, hatred, or violence. However, in this nameless world, humanity has been obliterated and life and experience are no longer valued. Also, people are unaware of their feelings or pain because they are projected to scheduled medications. Due to the knowledge that pain is the primary cause of human misery, Lowry presented the concept of people who “have never known pain” (Lowry, 1993, P.110), but they lack all human emotion. By following Lowry’s example, we not only learn how to value life and find ways to enhance it but also how to protect it:

“Medication was always available to citizens... Jonas swallowed hard, trying without success to imagine what such pain might be like, with no medication at all. But it was beyond his comprehension” (Lowry, 1993. PP.69-70).

In their use of language, they should be precise to the point that they need to apologize if they use words that do not fit their lives. This is because managing precision of their language will “ensure that unintentional lies were never uttered” (Lowry, 1993, p.71) because telling lies is prohibited.

The Giver, however, presents contradictory issues surrounding suicide. Non-voluntary euthanasia is applied regardless of all considerations and is used to control other people's choices. Suicide, on the contrary, might be considered a personal choice, as seen in Chapter Two, but in this novel, the implications of suicide remain taboo:

Jonas: "Can you tell me her name? My parents said that it wasn't to be spoken again in the community" (Lowry, 1993. P.140).

Regarding the Durkheimian perspective of suicide, Rosemary's self-destruction is seen as an anomie which is the "result from society's insufficient presence in individuals" (Taylor, 1982, p.24). In other words, instead of acting in accordance with the community's expectations, Rosemary is deemed anomie due to her unstable state after receiving a memory of loss. The cause of anomic suicide is usually brought on by sudden and unexpected changes in the individual's psychology. Ultimately, the result is stress and disappointment, which leads to self-annihilation. This occurs because "society's influence in restraining individual passions becomes diminished and the individual is lost in an infinity of desires" (Taylor, 1982, p.24). Therefore, the individual suffers from an inability to correlate with societal norms, which results in self-destructive behavior.

The Giver believed Rosemary would not be able to experience physical pain. However, to satisfy her desire to experience different memories, he added sensual pain along with poverty, hunger, and terror. Hence, "loneliness" and "loss" (Lowry, 1993. P.142) were enough to stun her to go to the Chief Elder and ask for a release. Regarding the way memories are gained, there has been a double burden of pain: pain of memories and their loneliness. The result is that one may feel completely detached from society, thus resulting in a drastic change. Frustration and disappointment appear instead and lead to suicide:

The Giver: "The worst part of holding the memories is not the pain. It's the loneliness of it. Memories need to be shared" (Lowry, 1993. P.154).

In the event of the loss of someone or something close, one loses their perspective on life. Loss of interest in one's surroundings or in life itself makes life "impoverished" (Freud, 2005, p.184). Rosemary's memory of a child taken from its parents, however, drives her to a state of immediate and terminal melancholy. Considering Freud's notion of melancholia:

“the relationship with the object ... is complicated by the conflict of ambivalence. The ambivalence is either constitutional, it is attached to every love relationship of this particular ego, or else it emerges straight out of experiences that imply the threat of the loss of the object” (Freud, 2005. P.216).

As a consequence, such an unexpected painful occurrence inhibits Rosemary’s self-esteem and lowers her interest in the surroundings. Because of this, rather than seeking solutions, Rosemary’s mind is occupied with ambivalence, i.e., she develops feelings of hopelessness and worthlessness that interfere with her ability to perform naturally.

As discussed in Chapter Two, separation is a crisis of melancholy, whereas loss causes an individual to separate from reality and hold tightly to the lost object. In relation to Rosemary’s suicide, however, Freud stated “our unconscious does not perform the killing, it merely imagines and desires it” (Freud, 2005, p. 191). Therefore, regarding the pleasure principle that seeks immediate satisfaction, Rosemary invested all her libidinal energy into finding the lost object, not only for the child who is separated from its parent, but also for Rosemary herself, for her lost ego. Because “She was a remarkable young woman. Very self-possessed and serene. Intelligent, eager to learn” (Lowry, 1993, p.140). Rosemary’s ego, however, has been deeply wounded when abandoned and left with loneliness. Consequently, she lost her love-object (from herself) and her ego becomes “poor and empty ... being worthless, incapable of functioning, and morally reprehensible” (Freud, 2005, p.206). As a result, the unconscious feeling of melancholia evokes her consciousness. Due to the destruction of the ego caused by separation and loss, painful sensations Rosemary experienced can be overwhelming and burdensome.

Freud asserted, from a psychological perspective, that an individual’s libido is dramatically affected by the detachment of any memory or expectation connected with a lost love-object, leading to a separation of the libido. Consequently, the tension manifests itself with the feelings of dissatisfaction and deprivation: “I backed off, gave her more little delights. But everything changed once she knew about pain. I could see it in her eyes” (Lowry, 1993, p.142). As a consequence, the Id, which is already separated and freed from the ego, starts to seek pleasure and satisfaction unconsciously. Because of this, Rosemary’s suicide was sudden, but it was unconsciously motivated. Its outcome was “memories came back to the people ... They’d never experienced that before” (Lowry, 1993, p.144) and it was painful to remember these memories and caused suffering for the community. Additionally, the Giver described the community when the

memories were released as “It was chaos” (Lowry, 1993. P.104). Due to this, their familiar tranquility has been replaced by confusion and disorder.

Due to self-annihilation, the community experienced “All those feelings!” (Lowry, 1993, p.144) since these memories never ended elsewhere; instead, they were released and people suffered for a long time. Although all of these memories burden and terrify the community, the act of death itself remains taboo. This is not only because of the pain the memories cause, but also because the doer requested death. This means that Rosemary violated the community’s rules when she abandoned all instructions and voluntarily die. Her suicide, however, was not a cry for help; she “told them that she would prefer to inject herself” (Lowry, 1993, p.151); instead, she intentionally attempted to stop her pain. By violating death itself, she becomes taboo, as she has broken the boundary towards forbidden desires. After this incident, the instructions about a release request made by a Receiver have changed and Jonas is no longer able to request a release. Nevertheless, if there is a possibility to change a rule, even though “Rules were very hard to change” (Lowry, 1993, p.14) the community might also change. However, this would never happen very often: “Sometimes I wish they’d ask for my wisdom more often-there are so many things I could tell them; things I wish they would change. But they don’t want change” (Lowry, 1993. P.103).

Rosemary’s suicide and her name are taboo similar to Jonas because he is different from his peers and open to change. In Freud’s view, the term ‘taboo’, which originated in Polynesia, represents something sacred and consecrated. On the other hand, it also means “uncanny, dangerous, forbidden, unclean” (Freud, 2004, p.36). In addition, Wundt viewed taboo as “the oldest unwritten code of law of humanity” (Freud, 2004, p.37). Although the origin of these prohibitions or restrictions is unknown, they possess a pre-religious aspect, i.e., a moral significance. In addition, Freud explained a taboo as a word that:

“denotes everything, whether a person or a place or a thing or a transitory condition, which is the vehicle or source of this mysterious attribute. It also denotes the prohibitions arising from the same attribute... it has a connotation which includes alike ‘sacred’ and ‘above the ordinary’, as well as ‘dangerous’, ‘unclean’ and ‘uncanny’” (Freud, 2004. P.41).

In Freud’s view, taboo serves the purpose of psychoanalysis due to its different attributes. It, therefore, serves to protect someone against powerful forces, safeguarding births, or providing security against spiritual wrath. As a consequence, “The violation

of a taboo makes the offender himself taboo” (Freud, 2004, p.39). Hence, Freud considered punishment to be the consequence of “automatic agency” namely, vengeance of the primitive instinct resulting from fear as a response to that violation. As soon as an offender violates a taboo, they endanger others and therefore are subject to two forces - spirit and society, through which the “human penal system can be traced back to taboo” (Freud, 2004, p.38), i.e., means of punishment.

In order to address this type of social aggression, fear is the key, and it is maintained by the Chief Elders and implemented within the community. Because of the built-in instincts of life and death, fear is practiced systematically and oppressively in *The Giver* by subjecting individuals to non-voluntary death, where fear becomes the answer to the question of why “Killing is a symbolic solution of a biological limitation; it results from the fusion of the biological level (animal anxiety) with the symbolic one (death fear) in the human animal” (Beker, 1973, p.99).

However, Rosemary’s suicide, the release of the memory that causes pain and suffering, and Jonas’s vision of change are the premises of the concept of fear. This is due to Freud’s statement that “fear is stronger than pleasure” (Freud, 2004, p.52). In other words, people in the community have a particular attitude towards taboos - and nothing else - which makes the idea of fear stronger than the desire either to violate a taboo or overcome it. Since they have already dimmed the pleasure principle, they are unable to act in violation as long as their desires remain unconscious. So in a collective manner, their Id remains repressed to the extent that it only knows the now. Moreover, there is an explicit choice in *The Giver* between ending life or overcoming its obstacles. As per Durkheim’s concept, both Rosemary and Jonas are perceived by the community as anomie which increases the conflict between them and their community, resulting in “a greater degree of role conflict and the resultant strain of conflicting expectations impairs the stability and durability of social relations” (Taylor, 1982, p.27). As such, both are regarded as incompatible with the society, which leads to their being considered anomic.

3.2. Civilization and Autonomy

“Revolt gives life its value” (Camus, 1955. P.36).

In *The Giver*, Jonas’s development of awareness regulates his social influence on a psychological level. In other words, the formation of his society and the development of his psychic powers enable him to cooperate in an individual setting. Through the influence of his psychological development, Jonas grasps the meaning of pain, gaining pleasure from the experience. As such, regarding the general formation of the pleasure principle, people choose either to reduce pain or to increase pleasure in order to avoid unpleasure sensations. However, pain is absented in *The Giver*, but fear, instead, is emphasized to the extent that restricts pleasure/unpleasure principle. People can only have “one-generation memories” (Lowry, 1993, p.93) and they never wanted to have more memories about the back and back generations because they no longer endure pain. As such, “they just seek the advice” (Lowry, 1993. P.112).

These memories of human history and civilization empower Jonas’s psychological awareness, through which the reality principle prevails instead of the pleasure principle. As such, the reality principle becomes responsible for increasing pain rather than reducing it because of Jonas’s interaction with both his internal world of memories and the direct contact with the outer world

As a result of wars, bloodshed, hatred, racism, violence, climate change and its contribution to famine, and uncontrolled reproduction that causes shortages of resources, communities are forced to approach extreme social rules of Sameness in order to control people physically and psychologically:

Jonas: “I wish we had those things, still. Just now and then”

The Giver: “So do I, but that choice is not ours” (Lowry, 1993. P.84).

There is an atmosphere of Sameness that conjures up images of a totalitarian future where societies are man-made. As such, people “went to Sameness” (Lowry, 1993, p.84) in order to avoid failure or surprises and to predict events:

The Giver: “Our people made that choice, the choice to go to Sameness... We gained control of many things. But we had to let go of others”.

Jonas: “We shouldn’t have!” (Lowry, 1993. P.95).

Sameness, according to Collins Dictionary, means “lack of variety” (Collins, 2022). This adjective describes a sense of similarity, consistency, and predictability. In

this respect, Jonas's community's core identity is unchangeability and equality. The idea of being "so same" addresses a person or a thing as a whole, thus establishing a new abstraction, or target identity that emerges from predictability. (Collins, 2022). As a result of such dehumanized monotonous life of similarity, the community becomes able to control their fear through systematic medical injections, but at the same time, it loses its independence and freedom of choice.

The Giver: "Life here is so orderly, so predictable – so painless. It's what they've chosen... They know their scientific facts" (Lowry, 1993. PP.103-105).

Consequently, the society of Jonas is characterized by its sameness, but it does not have an identity. On the other hand, identity is the key to bringing about change through differentiation. According to Sollberger, identity is "a predicate, which functions as an identifier, i.e. a marker that distinguishes and differentiates one object from another object" (Sollberger, 2013, .2). As a consequence, the Giver justifies their choice of sameness where all inhabitants are mere objects without individuation to prevent fear; "I knew there had been times in the past- terrible times- when people had destroyed others in haste, in fear, and had brought about their own destruction" (Lowry, 1993, p.112). As such, when fear "becomes conscious of itself, it becomes anguish, the perpetual climate of the lucid man" (Camus, 1955, p.17). Because of this, fear is only a temporary response in a world that is constantly changing. Fear, however, consumes one's existence when it occurs continuously within awareness. Thus, Jonas's community devoted itself to the concept of fear to the extent that it depleted itself, i.e., those who live under the guise of death are living in denial; "Everything here suggests the horror of dying in a country that invites one to live" (Camus, 1955, p.93). Because of this, fear not only becomes the first feeling Jonas gains and develops during his experience, but also contributes to him in forming an individual identity outside of the community's sameness. This allowed him to speculate about the final image of a dystopian civilization through which the visionary of change emerges

In this regard, Jonas's perspective of civilization has emerged on a regular basis in this Chapter due to gradual development of his psychic apparatus. Thus, the dystopian civilization and its variables will be examined from the viewpoint of Eros's civilization as assumed by Freud that leads to a surplus-repression. Consequently, Jonas's society will be examined from the lens of a regular psycho-social repression. To create their civilizational code, Jonas's community modified common instincts through repressive

means. Throughout history, man has constantly struggled for existence, as Herbert Marcuse explains civilization by stating “the struggle against freedom reproduces itself in the psyche of man” (Marcuse, 1974, p.31). However, Jonas wonders about the reality of things “why don’t we have snow, and sleds, and hills ... Why can’t everyone see them? Why did colors disappear?” (Lowry, 1993, pp.83-95). Consequently, his attitude towards his world is influenced by his exposure to human experience and history; “Jonas did not want to go back... He wanted his childhood again... He sat in his dwelling alone, seeing children at play, ordinary lives free of anguish” (Lowry, 1993, p.121).

Furthermore, the influence of the reality principle, which emphasizes its prominence, “without abandoning the aim of ultimately achieving pleasure, nonetheless, demands and procures the postponement of gratification” (Freud, 2003, p. 74). As a result, Jonas’s reality principle, governed by the ego, regulates the level of excitement in an appropriate and safe way; “he understood the joy of being an individual, special and unique and proud” (Lowry, 1993, p.121). So, the reality principle, in Marcuse’s view, is a “safeguard” that “modifies” but does not deny the pleasure principle (Marcuse, 1974, p.29).

Man’s struggle to attain freedom is also manifested through the domination of either the reality principle or the pleasure principle. In spite of the fact that the pleasure principle dominates due to the power of the Id, which “determines the entire organism” (Freud, 2003, p.74), people who have their reason governed by the reality principle are able to distinguish between virtuous and immoral acts. In other words, it is due to the reason which already subjects to the ego. According to Marcuse, repression is typically the result of creating an ideal civilization, which he calls a “historic phenomenon” rather than a natural phenomenon (Marcuse, 1974, p.31). Therefore, the struggle between man and society supposedly reproduces wisdom through civilization, so it is believed that civilization descends and changes through this process. Therefore, Jonas’s community recreates their civilization by avoiding the failures of the past, but it has been taken to the extreme; “There’s much more. There’s all that goes beyond...I re-experience them again and again. It is how wisdom comes. And how we shape our future” (Lowry, 1993, p.78).

In terms of implementing death as a future social instrument, according to Kestenbaum, suicide occurs as long as “a human being is contemplating self-

destruction” (Kestenbaum, 1973, p.11), because there is only one focused option which is painfully sharp, either life or death. Therefore, aside from its natural course, death might be considered as a means to implement social policy, such as “compulsory euthanasia, compulsory abortion, and legalized if not compulsory suicide” (Kastenbaum,1973, .3). In addition, the control over population and planning death are also imperative, as is the proclamation of future voices asking who, how, or when to make “death more desirable” and how to frame such a request (Kestenbaum, 1973, p.3).

Dehumanizing society, however, is an extension of creating a civilization. In other words, Jonas’s society has radically diverted people’s natural instincts of life and death. According to Marcuse, this is because both drives are equally fatal and “strive for gratification which culture cannot grant” (Marcuse, 1974, p.24). In addition, Freud assumed “there is an inherent antagonism between the satisfaction of human instincts and individual freedom on the one hand and the development of civilization on the other” (Ocay, 2009, p.3). Civilizations must therefore adopt a deflected attitude towards their instincts’ goals, i.e., be unable to achieve them completely. In this way, the pleasure principle limits the primary drives of instinct to the point of complete dysfunction.

Consequently, the human drives arising from nature will be dismantled and eradicated. So Jonas’s struggle for either staying or leaving the community continues because he decided to bring change; “If he had stayed, he would have starved in other ways. He would have lived a life hungry for feelings, for colors, for love” (Lowry, 1993, p.174). The Giver’s society follows certain social patterns. In other words, it follows the concept of surplus repression which refers to the complete “mastery of instinctual drives against gratification” (Marcuse, 1974, 48). It is, however, the restrictions that are initiated due to a need for dominance, which represses human’s nature. Additionally, such repression serves the performance principle which substitutes the reality principle. The performance principle refers to a society that is “stratified according to the competitive economic performances of its members” (Marcuse, 1974, p.53). Considering the economic circumstances of Jonas’s society, performance is not only a criterion on a skill level, but also a key to a social level:

Lily: “I hope I get assigned to be Birthmother”

Mother: “Lily! Don’t say that. There’s very little honor in that Assignment” (Lowry, 1993. P.21).

Despite its sameness, Jonas's society is afflicted by social discrimination. Due to its standard of living, it is supposed to be a place of equality and peace, but people are stratified based on their modes rather than their experiences, and their humanistic faculties are almost entirely devalued or absent. Due to certain standards, the night crew, for instance, was deemed a "lesser job" (Lowry, 1993, p.8) in the Nurturing Center. This is because they lack interest or skill or insight for daytime duties in addition to the capacity to connect with others. Therefore, they are not even given a spouse:

Larissa to Jonas: "Did you know Edna? They tried to make her life sound meaningful. And of course, all lives are meaningful, I don't mean that they aren't. But Edna. My goodness. She was a Birthmother, and then she worked in Food Production for years, until she came here. She never even had a family unit" (Lowry, 1993. P.31).

In contrast, the job of a Receiver is regarded as "the most important" (Lowry, 1993, p.61) in the community because it refers to the person who receives human memories and carries the human burden alone. Thus, the Receiver should be a person who shows "all of the qualities that a Receiver must have" (Lowry, 1993, p.62). Jonas, however, has been identified with qualities of "intelligence, integrity, courage, wisdom, and the Capacity to See Beyond" (Lowry, 1993, pp.62-63) which elevate his self-confidence. First, he was unable to comprehend his addressed qualities. Later, "he felt a tiny sliver of sureness for the first time" (Lowry, 1993, p.64), because in his Ceremony, he recalls the color of the apple when it has changed which now occurs with the audience's faces color "They changed" (Lowry, 1993, p.64) and knows that there is something special about him. Jonas has also been recognized to have the courage and defiance to take on the human burden. Nonetheless, when he decided to leave the community, this expectation was pushed to its limit

The Chief Elder: "But you will be faced now with pain of a magnitude that none of us here can comprehend because it is beyond our experience" (Lowry, 1993. P.62).

Based on the concept of "control over social labor", civilization in *The Giver* profited from its own performance (Marcuse, 1974, p. 53). Basically, Jonas's community has controlled everything, even the innate nature of the individuals. It is done orderly to avoid conflict between human instincts that would result in unwanted consequences if released. Accordingly, the pleasure principle is no longer present, the reality principle has been deformed, and the individual is "working in alienation" (Marcuse, 1974, p.53). As Marcuse explained, the performance principle prevails to utilize individuals economically to the possible extent:

“Libido is diverted for socially useful performances in which the individual works for himself only in so far as he works for the apparatus, engaged in activities that mostly do not coincide with his own faculties and desires” (Marcuse, 1974. P.53).

Jonas’s community has been centered around economic argument only and “Everyone is well trained for his job” (Lowry, 1993,p.105). For them, it is the only rational activity available to improve their lives, so they must safeguard it by following the rules. In this case, their supposed freedom would be transferred elsewhere. The Chief Elders determined how people should live as well as how and when their lives should end. Thus, civilizations that are built conditionally on other civilizations, ignoring the nature of individuals, will inevitably result in antagonistic individuals. In this way, Jonas realizes how excessive power dictates jobs, lifestyles, and needs to the extent that restricts the most basic human rights, which leads to the possibility of a revolt expecting to bring about change.

For Jonas, “a single truth, if it is obvious, is enough to guide an existence” (Camus, 1955, p. 55). The experience of all the memories helped Jonas not only gain wisdom but also discern the human contradicted nature; “He had been trained since earliest childhood, since his earliest learning of language, never to lie” (Lowry, 1993, p. 70). Yet after being the Receiver, Jonas “may lie” (Lowry, 1993, p.68). As a result, he never tells his family or friends the truth about his training. According to Camus, “A man is more a man through the things he keeps to himself than through those he says” (Camus, 1955, p.55); therefore, if Jonas spoke more, they would judge him unfairly.

Aside from that, Jonas is well aware that people are too busy living monotonous lives already covered with blood and are literally blind to the fact that their individuality and freedom have been stolen by the mask of social cooperation in order to create their own ‘unique’ civilization. Moreover, Jonas’s attributions not only enable him to govern in a conflict of civilizations, but also provide him with authority to “sustain a mind” (Camus, 1955, p.60). Therefore, he was certain that this life “wasn't fair” (Lowry, 1993, p.113) to people to be lived that way forever and had to be changed:

“Things could change Gabe. Things could be different. I don’t know how, but there must be some way for things to be different. There could be colors. And grandparents. And everybody would have the memories” (Lowry, 1993. 128).

Because Jonas is capable of grasping what lies beyond human life, he is able to appreciate the differences in life, colors, wars, and patterns among civilizations. Therefore, he understands how a man is burdened with the fate of the world brought

about by war, dominance, or bloodshed. The constant tension caused by the clash of civilizations, however, overwhelms Jonas's heart and subjugates him to face the real world. As such, based on Camus's view that "one must live through it or die from it" (Camus, 1955, p.60), Jonas defines his belief as the right to freedom of choice and memories. As a result, he refuses to stay and longs for humane sensations. By leaving the community forever and risking his life to save Gabe from a crucial end, he also regains the humanity of his people so they can continue to live.

Furthermore, humans are social beings whose involvement is critical to humanity's progress, as Donne stated, "No man is an island, entire of itself; every man is a piece of the continent, a part of the main" (Jones, 2021). Consequently, to enhance their experiences in a balanced civilization, people should enrich their memories with history and developments of mankind. In relation to this, "civilization is a process in the service of Eros, whose purpose is to combine single human individuals, and after that families, then races, peoples, and nations, into one great unity, the unity of mankind" (Ksenych, 2003, p.151).

In addition, death is the real threat to the individual's autonomy when it is diverted from its natural course and is instead imposed as a mean of restriction. In response to this, people must expect a revolution that will not only free societies from excessive economic slavery, but also restores the natural human rights of freedom and choice and protect the value of an individual's dignity. In this regard, "freedom and dignity illustrate the difficulty" because they represent "possessions of the autonomous man and they are essential to practices in which a person is held responsible for his conduct and given credit for his achievements" (Skinner, 1973, p. 27). Taking on the heavy burden of all human memories, with all their misery and joy, Jonas embraces the unknown to free people from their damaging situation which is the main source of pain and abandonment.

3.3. The Dream of Life Wish in *The Giver*

It is demonstrated in Chapter Two that Eros and Thanatos are responsible for "the phenomena of life" (Freud, 1961, p.78), i.e., for sexual drive and death drive, where both of which "work simultaneously to effect progression through the ontological procession" (Carr & Lapp, 2006, p.18). However, Eros and Thanatos have a limited

capacity to withstand pressure: “they press for change, for release” (Freud, 2003, p.135). In *The Giver*, there is an emptiness in a colorless world which is void of love, sensations, and hope. Despite living in a world where hunger, a lack of resources, and wars no longer exist, people are living a life of death without actually dying. Unlike human nature, Lowry’s society offers a radical conception of death that violates human rights. With Jonas’s psychodynamic development, emancipation becomes apparent. In other words, the development of Jonas’s consciousness is a dynamic witness to the struggle of man, freedom, in the face of social restrictions because “individuals still need to fight for their freedom” (Ogay, 2009, p.1).

Consequently, what Jonas represents is the hope that individuals can empower their right to freedom. Therefore, his revolt against the rules is not caused by the inevitability of death itself, but the way people are dying where his community advocates non-voluntary euthanasia, so its status quo becomes taboo. This identifies death as being against people’s will whose consciousness has been entirely absented. Although controversial, euthanasia is seen as an “easy death ... a gentle, painless death” (Dowbiggin, 2003, p. 24) which is put in place for those who are burdens to their communities, such as criminals, the disabled, and drunkards. Such an issue remains contrary to the inherent value of human life, regardless of dogmatic references.

Upon imposing death, Jonas’s struggle against other forces manifests itself, where the pleasure principle and the reality principle are equally weighed in their struggle. However, the drive of love, sexuality, and life “seeks physical contact because it strives for union for the removal of any barriers of distance between ego and love-object” (Freud, 2003, p.205). As a consequence, Eros triggers consciousness to gain satisfaction. In addition, Jonas had the ability to “access to everything” (Lowry, 1993, p.147), so the past memories serve to find solace or wisdom, thus awakening his humane condition. Therefore, the manifestation of Eros which strives to “penetrating into consciousness, is moved by remembrance... This rehabilitation of Eros would require us to pass through a remediation of memory that goes as far back as possible” (Kli, 2018, p.23).

As per their morning routine of telling the family members their night dreams, Jonas was confused by one of his dreams. The dream came to him in the form of “wanting” (Lowry, 1993, p. 36); an intense desire for Fiona. Having not yet experienced

stirrings, Jonas lacks the explanation for this need in his first dream. It is the awakening of his life instincts, the libidinal energy that craves cathexis. In this regard, a repressed need within oneself seeks satisfaction not only through disturbing dream images, but also by physical contact as well. In a dream, Jonas first reveals his needs without knowing what lies beyond them; “I wanted her to take off her clothes and get into the tub. I wanted to bathe her. I had the sponge in my hand. But she wouldn’t. She kept laughing and saying no” (Lowry, 1993, p.36). In addition, it is noteworthy that Jonas’s first stirrings were triggered by images of experiencing ordinary times with Fiona. These images, however, were transformed into needs as transmitted by his Id, for “when a memory is revived its cathexis is retained within the memory system” (Freud, 2003, p.133). So, when Fiona’s image reaches Jonas’s perception system, the image of the object-cathexis “registers erotic urges as needs” and “the ego becomes aware of the object-cathexis” (Freud, 2003, p.140). In such a challenging situation, in either case, Jonas will put up with these needs or he will resort to repression in order to get rid of them, because Fiona’s images have been registered as erotic urges as identified by his dreams.

Using psychological techniques to analyze dreams, Jung described a dream as having “its own limitation” (Jung, 2011, p.71). In other words, a dream “represents a certain state of affairs” through which its precise content represents “the fulfillment of a wish; its motive is a wish” (Freud, 1900, p.20). In addition, Freud defined a dream in its general context as “the psychic activity of the sleeper, inasmuch as he is asleep” (Freud, 1900, p.5). While Jonas understands the term of stirring, the main focus of his dream has shifted into an external repression as imposed by his society’s rule:

“AREMINDER THAT STIRRINGS MUST BE REPORTED IN ORDER FOR TREATMENT TO TAKE PLACE” (Lowry, 1993. P.37).

The dream, however, reveals Jonas’s unconscious status not only to his family but also to the center that rules the place. The implication, therefore, is that people and dwellings are not protected by privacy. To control the stirring, every adult in the community must take a pill every day for the rest of their lives, regardless of their gender. Likewise, Jonas “all of your adult life. But it becomes routine; after a while you won’t even pay much attention to it” (Lowry, 1993, p.39).

In spite of this, Jonas feels an unusual feeling following his dream and taking a pill. In other words, he “felt oddly proud to have joined those who took the pills” (Lowry,

1993, p.39). By recalling the dream, he feels he “liked the feelings that his mother had called Stirrings... and wanted to feel the Stirrings again” (Lowry, 1993, p. 39) because its occurrence was pleasurable. As a result, Jonas’s holds onto these sensations that point out the source of the conflict between the desires and the forbidden. In the process of becoming aware of himself in relation to the surroundings, according to the rules of his community, “the part of the dream dreamed is to be depreciated in value and robbed of its reality” (Freud, 1900, p.110), i.e., Jonas continues to relate dreams with his awake consciousness to achieve “dream-wish desires” that are unconsciously performed in order to “replace obliterated realities” (Freud, 1900, p.110).

Aside from the rules of the community, Jonas’s repressed energies are unavoidably released by innate instincts to satisfy a dream wish. In this respect, the Id does exist and simultaneously manifests itself as a strong tendency to seek satisfaction through pleasurable experiences. The pleasure principle, according to Freud, is the primitive vehicle for the erotic. Both dreaming and telling Jonas’s dream do not gratify him in any way. His pleasure principle now serves to free his excitation, or to keep its magnitude constant, or to hold it at the lowest possible level. (Freud, 2003). In this way, the memory of all these stirrings and needs “slipped away from his thoughts ... had disappeared... and gone” (Lowry, 1993, p.39) and he cannot grasp a hint of them.

At this stage, Jonas recognizes his ego and transitions from childhood to another level of understanding, maturity, and wisdom. Thus, “the ego drives, and the sexual drives, which now both are aspects of Eros” (Gerber, 2019) are now the driving forces behind Jonas’s new sensations. Having received memory from the Giver, Jonas no longer experiences these feelings only during sleep, but “he knew that his failure to take the pills accounted for some of it, he thought that the feeling came also from the memories” (Lowry, 1993, p.131). Instead of a pill or a memory, it is the fact that he is being driven by Eros which irritates the pleasure principle and also causes tension “Each organism seems to have a limited capacity to endure this irritation until it needs to divert it again to the outside, pass it on, which essentially perpetuates Eros and overcomes narcissism” (Gerber, 2019). Therefore, as Jonas’s free self seeks more independence, he is firmly determined to change his community’s choices in return. Due to his inability to live under the oppressive regime, he decides to end it regardless of all the consequences:

“He had not taken the pills, now, for four weeks. The Stirrings had returned, and he felt a little guilty and embarrassed about the pleasurable dreams that came to him as he slept. But he knew he couldn’t go back to the world of no feelings that he had lived in so long” (Lowry, 1993. PP.130-131).

When it comes to life wish, the pleasure principle, which is influenced by Eros, “must succumb to the rule of the reality principle” (Ogay, 2009, p.5). In other words, the reality principle becomes the principal guideline for organisms to develop and control themselves against any limitations. In general, people cannot completely overcome nature or master its phenomena, i.e., “we have never completely master Sameness. I suppose the genetic scientists are still hard at work trying to work the kinks out” (Lowry, 1993, p.95). In this regard, man is not able to completely control nature despite all his efforts. No matter how hard he tries, he may fail. In other words, man’s weakness is manifested through his everlasting conflict with his drives. Thus, there are three main sources that affirm man's sufferings:

“the superior power of nature, the feebleness of our own bodies, and the inadequacy of the regulations which adjust the mutual relationships of human beings in the family, the state, and society” (Ksenych, 2003, p.143).

Additionally, man’s physical weakness prevents him from adapting to nature, i.e., when it comes to limitations, he can remove some of these sources and mitigate others because the “experience of thousands of years has convinced us” that such social orders might change (Ksenych, 2003, p.143). Hence, as long as these social orders are regulated by man to protect himself and guarantee his social rights, they will not be able to remove or prevent suffering. As a result, another hidden force beneath man’s physical being will reveal itself: “a piece of psychical constitution” (Ksenych, 2003, p. p.143). Human instincts are therefore targeted as means to create societies; “Civilization has to use its utmost efforts in order to set limits to man’s aggressive instincts and to hold the manifestation of them in check by physical reaction-formation” (Ogay, 2009, p.4).

In *The Giver*, life is measured with complete senselessness, and human experience is no longer valued; “We don’t dare to let people make choices of their own” (Lowry, 1993, p.98) because it is believed that such luxury is “not safe” (Lowry, 1993, p.98) for the people. Explicit expression of sensations and feelings is prohibited; when Jonas asks his father if he loves him, he is awkwardly treated: “you used a very generalized word, so meaningless that it's become almost obsolete” (Lowry, 1993, p.127). In addition, time is measured by occurrences, such as the time of the day,

mealtime, playtime, recreation time, and some free time. One exception is in December, when it comes to celebrating newborn babies, releasing elders, and assigning jobs to new community members who turn twelve:

Asher's Mother: "it's the last of the Ceremonies... After Twelve, age isn't important. Most of us even lose track of how old we are as time passes... What's important is the preparation for adult life, and the training you'll receive in your Assignment" (Lowry, 1993. P.17).

As a result, the adopted principle of Sameness has no impact on time, it simply follows the status quo. Therefore, the concept of time in *The Giver* opposes that of Aristotle's general view which holds that "time is a kind of number; something of change" (Coope, 2005, pp. 15-42). This is so because people or things are not subject to change, which is always estimated by time, hence it only exists as a mere concept that has no effect on people. Jonas's internal struggle intensifies after recognizing the way people die. As a result, it is a clash between the memories he received and the reality principle that simultaneously invokes the condition of his community motivated him to change: "man feels best when he has these two drives satisfactorily balanced" (Wiszniowska, 2012, p.2).

In the light of the drive theory, Jonas's pleasure principle which strives for more memories to experience becomes the operator of his wants and desires "he was eager for whatever experience would come next" (Lowry, 1993, p.83). Jonas's ego, however, which helps him perceive new memories, is the mediator between memories and the present. According to Freud, the ego "controls our impulses and enables us to deal rationally and effectively with the situations of life" (Freud, 2003, p.260). In this sense, Jonas's ego creates a reciprocal relation between mind and body. Consequently, this would regulate the levels of excitement and prevent any dangerous consequences.

In addition, the pleasure principle is altered by the reality principle in the discussion of the Drive Theory as it relates to the demands of the desires stemming from the Id. Therefore, Jonas lies, hides his intentions of leaving the community, and never shares his experience with Asher, Fiona, or any of his family. As a result, he silently could establish a contrast between the worlds of memories and his current life.

Because of witnessing the aggressively maintained process of non-voluntary euthanasia through which Jonas himself and all of his beloved are doomed to the same fate, the first was baby Gabe. He has also been unfold to a true violation of the value of life, which results in a conflict between his drives. This results in conservative behavior

on his part. In that way, Jonas's drives, particularly Eros, "seek the restoration of a state that was disrupted by the emergence of life" (Freud, 2003, p.151). Life, in this standpoint, is viewed as an urge "to carry on living ... a battle and constant compromise between these two urges", i.e., the urge to life and death (Freud, 2003, p.151).

Furthermore, his ego, which is selfless in service to his community, conveys a complete understanding by knowing that he is more likely to be satisfied than disappointed. For this reason, he sacrifices the most valuable people and things for the sake of one truth, namely, life is worth living. In this sense, "We fall in love not only with 'sexual objects' but, individually and collectively, with power" (Freud, 2003, p.7).

Lowry describes a young boy, whose Ceremony occurs in December, as "It was almost December, and Jonas was beginning to be frightened" (Lowry, 1993, p.1). She places him in a society whose extreme social rules have taken away all individual freedom and limit human desires in a lifeless way, which makes freedom an emergence issue that "is raised by the aversive consequences of behavior" (Skinner, 1973, p.45), i.e., the hidden behaviors imposed by his community's leaders. Thus, not only Jonas's life is at stake, but the liberty of all mankind is so as well.

However, Jonas gradually realized how fragile his world was, which made its existence meaningless. Upon gaining the desire for life, he believes that life is not just a memory, but a continuing existence. In this way, he becomes preoccupied with the desire to improve the quality of life for his community due to his sense of its true sensation, "I liked the feeling of Love" (Lowry 1993, p. 66). In receiving memories, Jonas gained wisdom, allowing him not to live life on a whim, but rather to seek it out. The reason for this is that life is rooted in his instincts, in his desire to experience life even in the face of uncertainty. Because of the need for change for the best from the current situation, not only Jonas, but everyone, questions "every value we have taken for granted and reexamines our most deeply held beliefs" (Lowry, 2022). In this regard, the need to freedom and life requires to "to be free of the anxiety of death and annihilation" (Beker, 1973. P.66). So, such deep, lively desires stem from life instinct itself, that is to say, from the force of Eros, who "seeks to combine more living substances into ever greater unities [for] growth and the promotion of survival" (Kastenbaum, 2000, p.207). Despite Jonas's challenging life situation and the fact that he is doomed to death, his life and death instincts are mingled in struggle. As a result, he never fully orients himself towards

life, but builds his aim toward it so long as he becomes aware that the “death instinct reigns unchallenged” (Kastenbaum, 2000, p.207). In the beginning, because of the heavy rain and snow, Gabe’s power is almost gone and he is weak and silent, Jonas “no longer cared about himself” (Lowry, 1993, p.174). His hope of reaching a safe place nearly faded “He felt it felt that Elsewhere was not far away. But he had little hope left that he would be able to reach it” (Lowry, 1993, p.175). In this sense, hope acts in a great way in embracing desires and making their attainment possible. As such, hope can “entertain expectation of something desired” (Hockley, 1993, p.3). Additionally, amongst all the difficulties of cold and hunger, Jonas had to face them all consciously; therefore, he stops questioning himself about “if-onlys” (Lowry, 1993, p.178) which enabled him to get enough memories about warmers or hills to rely on for protection. In order to cope with the unpredictability, Jonas climbed the hill and tried to warm himself and the baby since they were approaching the place “that held their future and their past” (Lowry, 1993, p.179).

While Jonas thought he heard music coming from the far community, “But perhaps it was only an echo” (Lowry, 1993, p.180) because he was in the now. As he was able to face death on an equal basis with life, Jonas was able to transcend disappointment caused by the space and time he had left behind. Having seen mankind’s reality, Jonas could not live outside of that image or hide himself from fear; instead, he adheres to the value of life that Eros prompted beyond expectations.

CONCLUSION

The study contributes to psychoanalysis' understanding of how suicide is conceived and unconsciously planned either by an individual's ideation or by social pressures. In this regard, this psychoanalysis is not definitive; rather, it can be viewed as an extension of previous studies and a foreground to future research concerning self-destructing behavior. Despite covering two distinct scenarios, namely a romance as presented by Moyes's *Me Before You* and a dystopian by Lowry's *The Giver*, the study discussed suicide and self-preservation mechanisms from a psychological perspective only. As humans are extremely vulnerable to certain psychological and physiological issues, their lives are easily impactable, and their psychic apparatus may be destroyed suddenly, thus leading to self-annihilation.

Euthanasia is the contemporary medical term discussed in this study to euphemize and de-stigmatize suicide. Nevertheless, suicide continues to be a controversial issue and its topic is challenging on different levels, whether it is ethical, philosophical, or religious - since all of these factors are interconnected. Therefore, the conclusion of this study is that there is neither a compelling nor a completely satisfactory way of defining suicide or accepting its consequences. Based on the Drive Theory by Sigmund Freud, self-destructive behavior is a result of innate desires that are affected by the level(s) of gratification. Life and death instincts - Eros and Thanatos - are basically governed by the pleasure principle, which is seeking either satisfaction or keeping its level of excitement.

Throughout *Me Before You* and *The Giver*, both authors use an array of elements and techniques to portray the main theme of suicide and non-voluntary euthanasia. Generally, suicide is a serious issue and is seen as an "act of volition and frustrated psychological needs" (Leenaars, 2010, p. 39). It is also a reaction to dissatisfaction that constitutes "pain, psychological pain, [or] psychache" (Shneidman, 2004, p.29).

Specifically, there have been developments in its legitimacy which have connected suicide to the personal choice or medical means through which a person can request death. For instance, terminally ill patients whose suffering affects their physical and mental health may request euthanasia to end their suffering. On the other hand, those who suffer severe mental depression which triggers and damages their ego are likely to commit suicide silently.

As seen in *Me Before You*, which is set in an ordinary world where the characters go about their daily lives in a world that is similar to our own, euthanasia is actively and voluntarily accomplished. A narcissistic suicide rooted in Will's Id has emerged and was accomplished through his death. In essence, it involves destroying his disabled body (his physical entity) which became invalid due to his paralysis. Will protects his ego the way he does by responding immediately to the primal instinct or Thanatos. Consequently, suicide is seen as an ego-defense mechanism where Moyes brings the value of life and puts it into question. As Will's life is void of quality and disrupted, neither Louisa nor his family's compassion can ever back his life to normal, thus he sees that he has no point in living with all that deprivation and pain. As such, being satisfied by death becomes a choice over disappointment. Due to the conflicted forces caused by the will-to-die and preserving dignity, certain issues are destined not to change such as terminal illness.

Will's reaction to his quadriplegia leaves him only with the remnants of his past which stimulates a melancholic depression. Thus, melancholia triggers Will's psyche with a severe mental depression. In melancholia, a person can no longer care for themselves, or is interested in the surroundings; instead, he is often inhibited by a feeling of low self-esteem. This is because a depressed individual becomes unable to connect with any memories associated with his lost objects (whether they were people or things). Additionally, Will is the only victim, so through his melancholic state, he decided to avenge the self. In this way, killing turns to be a pathological response directed inwardly towards the ego. In *Me Before You*, Moyes emphasizes that the concept and behavior of suicide are taken for granted as a death wish. In a foreshadowing glimpse earlier in the book, she expresses a "death wish" (Moyes, 2012, p.9) that is more than a response to Will's conscious and unconscious guises to kill or be killed. Additionally, Will's Id, which is governed unconsciously by the pleasure principle, seeks fulfillment forcefully to satisfy his death instinct by annihilating himself.

Viewing death from an antithesis perspective and defending life, the images left in Jonas's memory about the gift of life and the conflict to protect it has left a resonate on his response. In this regard, Lois Lowry brings, in *The Giver*, a dualist and radical process of death through which the value of life is examined. As part of euthanasia, "Voluntary and non-voluntary euthanasia are both types of planned killing" (Callahan, 1997, p.115) as Lowry presented. In other words, suicide, which is a deliberate act of

self-destruction is managed and accomplished by Rosemary which turns her to be a taboo. On the contrary, non-voluntary euthanasia is practiced under the euphemized expression of 'Release' where people of the community were convinced that they will be sent 'Elsewhere'.

Unlike *Me Before You*, *The Giver* takes place in a dystopian society that is almost perceived as utopian until Jonas discovers the truth behind its perfection. As part of her novel, Lowry creates a civilization based on a new code through which people are able to question humanity's history. Considering this, what happens if man exceeds his limits through wars, dominance, or bloodshed? Can this be justified enough to change man's nature and create new ways of life? While the elements presented in Jonas's society spoke of a miserable existence, his place viewed non-voluntary euthanasia as a solution to pain. Furthermore, euthanasia advocates still categorize suicide differently in terms of voluntary euthanasia and non-voluntary euthanasia, despite its controversial topic. It is regarded as "assisted suicide and voluntary euthanasia are morally permissible" (Benatar, 2016, p.3) since the decision of ending one's life is promoted by the "person [who] makes their own choice to have their life terminated in order to avoid future suffering" (Dimmock & Fisher, 2017, p.123). While non-voluntary euthanasia "occurs when a decision regarding premature and merciful death is made by another person" (Dimmock & Fisher, 2017, p.124) as the euthanized individual has no capacity to make their own decisions. According to Jonas's society, when it comes to death, there are no exceptions, i.e., every individual at a certain age, or under certain condition will be euthanized. The motivation, however, behind euthanasia is the desire to avoid existing suffering rather than having to cope with what may happen unexpectedly. However, suicide violates the bounds of death and crosses the threshold of Thanatos's forbidden desire. In this regard, an individual's choices are no longer permitted. Instead, all rules are based on certain standards. As a consequence, Rosemary's suicide is not only anomie, but also taboo since it stands alongside the fulfillment of the pleasure principle. In this sense, all pleasurable and unpleasurable sensations are eliminated to the extent that everyone lives free from pain and discomfort. The reason for this is that pain is considered to be the main cause of human misery.

Against all these restrictions imposed on the community, and also on human instinct, Jonas rebelled against them for the sake of reality. With Eros's emergence, comes the desire for colors, love, sensations, desires, nature, and all things that life has

to offer. As a result, life is not just a series of memories to Jonas, but rather a set of potential to be fully explored. Jonas still finds a way to cling to life, even when the direction is uncertain, because he still finds it captivating. As a result, Jonas's ego undergoes a development where the pleasure principle exerts its demands to a level where he is able to deal effectively and rationally with the different situations. Therefore, Jonas's reality principle is not governed by his Id, which was already experiencing pleasure, but by his Ego. Essentially, Jonas's ego allows him to regulate the level of excitement so that no unacceptable outcome occurs. Hence, Jonas was able to contain, selflessly, not only the memories, but also the way to elsewhere in his escape.

Based on Drive Theory, humans' drives are repressed energies that are innately released due to a certain need/desire that requires immediate gratification. However, the human instinct is either to gain pleasure or to escape unpleasant sensations which influence human behavior. Both drives of Eros, which produce an impulse towards life, and Thanatos, whose fulfillment comes from death, are main sources of conflict for humans. In addition, the human psychic apparatus is explained in terms of wants and desires in the light of Freud's pleasure principle. However, the pleasure principle allows a desire to be satisfied instinctively without even thinking about it, whereas some needs are altered to fit the reality principle in order to avoid dangerous and unacceptable situations. Freud's, therefore, structured three levels of personality: Id, Ego, and Superego. The Id is the psychological arena in which opposing forces in each individual engage in a psychological conflict. Nevertheless, it is the reservoir of all the libidinal energy that progresses unconsciously. This energetic stream is confronted by the ego, which perceives human consciousness.

Accordingly, when weighing life and death, life holds more weight than death. In certain circumstances, such as terminal disease, amnesia, or coma, people choose to die. Due to the fact that their current circumstances are nothing more than suffering and burden, their death wish becomes a demand that brings them pleasure once it has been fulfilled. In contrast, when death does not come naturally through disease or aging, but rather becomes a threat, life's value is protected to the extreme. As such, Eros avoids the unpleasant sensations, the threat, in order to gain pleasure through the gift of living.

REFERENCES

- Abohaimed, S., Matar, B., Al-Shimali, H., Al-Thalji, K., Al-Othman, O., Zurba, Y., & Shah, N. (2019). Attitudes of physicians towards different types of euthanasia in Kuwait. *Medical Principles and Practice*, 28(3), 199-207.
- Anomaly, J. (2022). *Race, eugenics, and the holocaust*. Bioethics and the Holocaust: A Comprehensive Study in How the Holocaust Continues to Shape the Ethics of Health, Medicine and Human Rights (The International Library of Bioethics, 96) (1st ed. 2022 ed.). Springer. <https://doi.org/10.1007/978-3-031-01987-6>
- Bayatrizi, Z. (2008). *Life sentences: The modern ordering of mortality*. University of Toronto Press.
- Beker, E. (1973). *The denial of death*. New York.
- Benatar, D. (2016). Assisted suicide, voluntary euthanasia, and the right to life. In *The Right to Life and the Value of Life* (pp. 307-326). Routledge.
- Bieber, I. (1958). *A critique of the libido theory*. American Journal of Psychoanalysis, 18(1), 52-65.
- Brinkman-Stoppelenburg, A., Evenblij, K., Pasman, H. R. W., van Delden, J. J., Onwuteaka-Philipsen, B. D., & van der Heide, A. (2020). Physicians' and public attitudes toward euthanasia in people with advanced dementia. *Journal of the American Geriatrics Society*, 68(10), 2319-2328.
- Browne, T. (1878). *Religio medici*. Roberts Brothers.
- Camus, A. (1955). *The Myth of Sisyphus*. 1942. Trans. Justin O'Brien.
- Callahan, D. (1997). *Euthanasia examined: ethical, clinical and legal perspectives*. Cambridge University Press.
- Carr, A., & Lapp, C. A. (2006). *Leadership is a matter of life and death: The psychodynamics of Eros and Thanatos working in organizations*. Springer.
- Cholbi, M. (2022). *The rationality of suicide and the meaningfulness of life*.
- Collins, D. (2019). *Collins English Dictionary: Death Wish, Psychology Terms*. <https://www.collinsdictionary.com/dictionary/english/death-wish>
- Collins, D. (2019). *Collins English Dictionary: Release, Psychology Terms*. <https://www.collinsdictionary.com/dictionary/english/release>

- Corr, C. A. (2014). The death system according to Robert Kestenbaum. *OMEGA-Journal of Death and Dying*, 70 (1), 13-25.
- Coope, U. (2005). *Time for Aristotle: physics IV. 10-14*. Oxford University Press.
- Deal, K. H. (2007). *Psychodynamic theory*. *Advances in Social Work*, 8(1), 184-195.
- Deprez, Esmé E, (2021). *A fight to die*. Bloomberg. <https://www.bloomberg.com/news/features/2021-12-17/death-with-dignity-right-to-die-laws-leave-patients-with-impossible-choice>
- Dignitas, (2022). <http://www.dignitas.ch/>
- Dimmock, M., & Fisher, A. (2017). *Euthanasia. in ethics for A-Level*. (1st ed., pp. 123–141). Open Book Publishers. <http://www.jstor.org/stable/j.ctt1wc7r6j.11>
- Davis C. (2021). Medical definition of cry for help. *Medicine Net*. https://www.medicinenet.com/cry_for_help/definition.htm
- Dowbiggin, I. (2003). *A Merciful end: The euthanasia movement in modern America*. Oxford University Press
- Durkheim, E. (2005). *Suicide: A study in sociology*. Routledge.
- Efstathiou, V., Stefanou, M. I., Siafakas, N., Makris, M., Tsivgoulis, G., Zoumpourlis, V., ... & Rizos, E. (2022). *Suicidality and COVID-19: suicidal ideation, suicidal behaviors and completed suicides amidst the COVID-19 pandemic*. *Experimental and Therapeutic Medicine*, 23(1),1-8. <https://doi.org/10.3892/etm.2021.11030>
- Evans, G., & Farberow, N. L. (2003). *The encyclopedia of suicide (second Edition)*. Facts on file.
- Freud, S. (1940). An outline of psycho-analysis. *International journal of psycho-analysis*, 21, 27-84.
- Freud, S. (1961). *Civilization and Its Discontents*, College Edition. *Trans. James Strachey*. NY: WW Norton & Company.
- Freud, S. (2003). *Beyond pleasure principle* (Reddick. J. Trans.). Penguin Books.
- Freud, S. (2005). *On murder, mourning and melancholia*. (Whiteside. S. Trans.). Penguin Books.
- Freud, S. (2020). *Totem and taboo* (Büyükyacı. A. Ed.). (First edition). Platanus publishing.
- Freud, S. (1900). *The interpretation of dreams* Sigmund Freud (1900).

- Gallagher, R. (2019). Explaining withholding treatment, withdrawing treatment, and palliative sedation. Canadian Virtual Hospice. https://www.virtualhospice.ca/en_US/Main+Site+Navigation/Home/Topics/Topics/Decisions/Explaining+Withholding+Treatment+Withdrawing+Treatment+and+Palliative+Sedation.aspx
- Gerber, T. (2019). Eros and Thanatos: Freud's two fundamental drives. *Epoché Magazine*. <https://epochemagazine.org/20/eros-and-thanatos-freuds-two-fundamental-drives/>
- Gjertsen, F., Bruzzone, S., & Griffiths, C. E. (2019). Burden of suicide presented as one of the leading causes of death: uncover facts or misrepresent statistics? *Journal of global health*, 9(1), 010401. <https://doi.org/10.7189/jogh.09.010401>
- Hakola, O., & Kivistö, S. (Eds.). (2014). *Death in literature*. Cambridge Scholars Publishing.
- Hakola, O. J., Hein, S. M. J., & Pihlström, S. J. (2015). Death and mortality: From individual to communal perspectives.
- Hirsch A. (2008). *He wasn't prepared for a second-class life': why injured rugby star went to Switzerland to die*. The Guardian. <https://www.theguardian.com/uk/2008/oct/18/11>
- Hockley, J. (1993). The concept of hope and the will to live. *Palliative Medicine*, 7(3), 181-186.
- Interview with JoJo Moyes*. Goodreads. 31 July 2013. Retrieved 17 January 2022. https://www.goodreads.com/interviews/show/884.Jojo_Moyes
- Jones, A, David. 2021. *Did Thomas More and John Donne Advocate Assisted Suicide?* Church Life Journal. <https://churchlifejournal.nd.edu/articles/did-thomas-more-and-john-donne-advocate-assisted-suicide/>
- Jung, C. G. (2011). *The undiscovered self; with Symbols and the interpretation of dreams* (Rev. ed.;(RFC Hull, Trans.). PRINCETON AND OXFORD.
- Kastenbaum, R. (1973). On the future of death: Some images and options. *OMEGA-Journal of Death and Dying*, 3(4), 307-318.
- Kastenbaum, R. (2000). *The psychology of death*. Springer Publishing Company.
- Keegan, L., Drick, C. A., & TNS, T. (2010). *End of life: nursing solutions for death with dignity*. Springer Publishing Company.
- Kli, M. (2018). Eros and Thanatos: a non-dualistic interpretation: the dynamic of drives in personal and civilizational development from Freud to Marcuse. *The Psychoanalytic Review*, 105(1), 67-89.

- Korsgaard, C. M. (2009). *Self-constitution: Agency, identity, and integrity*. OUP Oxford.
- Ksenych, E. (Ed.). (2003). *Forbidden Desires: Deviance and Social Control*. Canadian Scholars' Press.
- Kubala K. (2022). What to know about melancholic depression. *Medical news today*. <https://www.medicalnewstoday.com/articles/melancholic-depression#definition>
- Leenaars, A. A. (2010). Edwin S. Shneidman on suicide. *Suicidology online*, 1(1), 5-18.
- Lemmens, T. (1995). Euthanasia and the Good Life. *Perspectives in Biology and Medicine* 39(1), 15-27. [doi:10.1353/pbm.1995.0033](https://doi.org/10.1353/pbm.1995.0033).
- Linzer, N. (1984). *Suicide: the will to live vs. the will to die*. Human Science Press.
- Lowry, L. (2022). <https://loislowry.com/>
- Mark, Julian, 2021. *In the works for years, a suicide machine will soon be tested in Switzerland*. The Washington Post. <https://www.washingtonpost.com/nation/2021/12/09/switzerland-suicide-machine-pod/>
- Marcuse, H. (1974). *Eros and civilization*. *Persona & Derecho*, 1, 535.
- McCarrick, P. M. (1992). Active euthanasia and assisted suicide. *Kennedy Institute of Ethics Journal*, 2(1), 79-100.
- More, T. (2005). *Utopia*. ICON CLASSICS.
- Moyes, J. (2012). *Me before you*. Penguin Group USA.
- Nicol, N., & Wylie, H. (2006). *Between the dying and the dead: Dr. Jack Kevorkian's life and the battle to legalize euthanasia*. Terrace Books.
- Ocay, J. V. (2009). Eroticizing Marx, revolutionizing Freud: Marcuse's psychoanalytic turn. *Kritike: An Online Journal of Philosophy*, 3(1), 10-23.
- Outka, E. (2019). *Viral modernism*. Columbia University Press.
- Porter, K., & Warburton, K. G. (2018). Physicians' views on current legislation around euthanasia and assisted suicide: Results of surveys commissioned by the Royal College of Physicians. *Future healthcare journal*, 5(1), 30–34. <https://doi.org/10.7861/futurehosp.5-1-30>
- Richards, N. (2017). Assisted suicide as a remedy for suffering? The end-of-life preferences of British “suicide tourists” *Medical Anthropology*, 36(4), 348-362.
- Shneidman, E. S. (1998). *The suicidal mind*. Oxford University Press, USA.

- Shneidman, E. S. (2004). *Autopsy of a suicidal mind*. Oxford University Press.
- Skinner, B. F. (1973). *Beyond Freedom and Dignity*. A Pelican Book.
- Sollberger, D. (2013). On identity: from a philosophical point of view. *Child and Adolescent Psychiatry and Mental Health*, 7(1), 1-10.
- Sprung, C. L., Somerville, M. A., Radbruch, L., Collet, N. S., Duttge, G., Piva, J. P., ... & Ely, E. W. (2018). *Physician-assisted suicide and euthanasia: emerging issues from a global perspective*. *Journal of palliative care*, 33(4), 197-203.
- Storck, T. (2016). Why drive? Psychoanalytic reflections on the film *Never let me go*. *The International Journal of Psychoanalysis*, 97(1), 187-201.
- Suicide definition, (2022). International Association for the Study of Pain (IASP). <https://www.iasp-pain.org/publications/iasp-news/iasp-announces-revised-definition-of-pain/>
- Svenaesus, F. (2021). *Why do people want to die? The meaning of life from the perspective of euthanasia*. By Exit International - Royal Institute of Philosophy Supplements. <https://www.exitinternational.net/why-do-people-want-to-die/>
- Taylor, S. D. (1982). *Durkheim and the study of suicide*. Macmillan International Higher Education.
- The Week Magazine. (2022). *The pros and cons of legalizing assisted dying*. <https://www.theweek.co.uk/news/society/957245/the-pros-and-cons-of-legalising-assisted-dying>
- Walinga, J. (2019). 2.2 Psychodynamic Psychology. *Introduction to Psychology*.
- World Health Organization, (2021, June 17). <https://www.who.int/news-room/fact-sheets/detail/suicide>
- Wiszniowska-Majchrzyk, M. (2012). Eros and Thanatos—Desires and Fears. *Sveikatos mokslai/Health Sciences*, 22(2 (81)), 107-113.
- Zurak, N., & Klain, E. (1999). The concept of programmed cell death and Freud's theory of thanatos. *Neurologia croatica*, 48(2-3), 105-117.

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