

ORIGINAL ARTICLE

Well-Being, Self-Regarding Reasons, and Morality

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It seems that we should want to avoid becoming intellectually disabled. It is common for philosophers to infer from this that those of us without intellectual disabilities are intrinsically better off than individuals with intellectual disabilities, and that there are consequently stronger moral reasons for others to preserve our lives than to preserve the lives of intellectually disabled individuals. In this article, I argue against this inference from what states we should prefer for ourselves to how much moral reason others have to maintain these states on our behalves. I argue that there is an important sense in which an outcome contributes to our well-being to a certain degree, namely the extent to which others should want it out of care for us, which plays a central role in determining the moral priority of ensuring the outcome for us over ensuring distinct outcomes for others. But an outcome's contribution to our well-being in this sense can come apart from the extent to which we should prefer it for ourselves.

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Suppose that, quite independent of the interests of others and any additional moral considerations, there are good reasons for me to want myself to be in a certain state. Call these *self-regarding reasons*. It is common for philosophers and policymakers to infer from the claim that an individual has most self-regarding reason to prefer a state that the state is best for her, in a sense that has important moral implications. Along these lines, many accept what I shall call *the Millian Argument*:

- (1) Those of us without intellectual disabilities should for self-regarding reasons prefer not to become intellectually disabled.

Therefore

- (2) We are better off than individuals with intellectual disabilities.

Therefore

- (3) There are stronger moral reasons to preserve our lives than there are to preserve the lives of intellectually disabled individuals.

(See e.g., McMahan 2009; Mill 1863, ch. II, ¶ 6; Wilkinson 2006, 2011).

In this article, I argue that such inferences are invalid for reasons that are of general theoretical importance for understanding the relationship between well-being and morality. I argue that there is an important concept of well-being, namely that of what

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others should want out of care or sympathetic concern for us, that is centrally connected to how others have moral reason to treat us. This is, I contend, the sense of 'well-being' that enters into the most plausible moral principles of beneficence and nonmaleficence, which respectively enjoin us to promote and avoid diminishing the well-being of others. But an outcome's contribution to our well-being in this sense can come apart from the extent to which we should prefer it for ourselves. I argue in particular that many self-regarding reasons to want to avoid becoming intellectually disabled are irrelevant to how much others should, out of care for someone, prefer her survival if she is intellectually disabled. This calls into question many practices that place less value on the lives of intellectually disabled individuals, such as the selective nontreatment of intellectually disabled infants.

1 Other objections to the Millian Argument

Various objections can be raised against the Millian Argument other than the objection I wish to press. In this section, I contend that these objections fail to go far enough, are unsound, or require further defense.

Some authors challenge the inference from (1) to (2) by observing that some reasons to want to avoid *becoming* intellectually disabled are irrelevant to the well-being of those who already have intellectual disabilities (Robertson 1975, p. 254). For example, recently acquired disabilities disrupt valuable activities, leading to stress and depression, while individuals who have adapted to or always had disabilities often rate their well-being no lower than individuals without disabilities (Halpern and Arnold 2008; Livneh and Antonak 2005). But proponents of the Millian Argument typically view intellectual disability as a *noninstrumental* harm, which makes intellectually disabled individuals worse off quite independent of its having such effects as stress and frustration. This seems important for their typical conclusion that there are substantially weaker reasons to preserve the lives of intellectually disabled individuals than those of individuals with merely physical disabilities or social disadvantages like poverty.

Other authors object to the inference from (2) to (3), claiming that even if we are better off than intellectually disabled individuals, there are no stronger moral reasons to preserve our lives. Some take the extreme view that all considerations of well-being are irrelevant to decisions about saving lives (Ramsey 1978, p. 191). But on reflection this is deeply implausible. Suppose you must choose between:

(O1) saving Alice, who will go on to live 60 happy years, and

(O2) saving Bill, who will die in the next few minutes anyway or spend his remaining time in unmitigated agony.

It would seem horribly unfair to Alice to confer a trivial benefit (or indeed a harm!) on Bill rather than a substantial benefit on her. A much weaker and more plausible view is that while sufficiently great differences in levels of well-being are relevant to whom to save, relatively small differences are irrelevant (Kamm 2009). But this would be sufficient to undermine the Millian Argument only if the differences in well-being between those with intellectual disabilities and those without were sufficiently minor. Because many

authors think the differences are quite great, we would need to defend the view that they are mistaken to reject the argument on these grounds.

Another objection to the inference from (2) to (3) is that it illicitly moves from a comparison of absolute levels of well-being to a conclusion that depends upon relative differences in levels of well-being. Suppose that Disa is intellectually disabled and Able is not. Let D^+ designate Disa's life-long level of well-being if she continues to exist, let D^- designate her level of well-being if she perishes now, and let A^+ and A^- similarly designate the levels of well-being that Able will have if he continues to exist or perishes now. Plausibly, there are stronger moral reasons to preserve Able's life than there are to preserve Disa's if the difference existence makes to Able's well-being, $(A^+ - A^-)$, is significantly greater than the difference existence makes to Disa's, $(D^+ - D^-)$. But Able could be better off if he lives than Disa would be if she lives in the sense that A^+ is greater than D^+ , without $(A^+ - A^-)$ being any greater than $(D^+ - D^-)$.¹

The main problem with this objection is that whatever considerations support the view that A^+ is greater than D^+ seem to support the view that $(A^+ - A^-)$ is greater than $(D^+ - D^-)$. If Able and Disa are too young for differences in intellectual ability to have yet affected their well-being, they both will have the same life-long level of well-being if they perish now, and the difference between $(A^+ - A^-)$ and $(D^+ - D^-)$ will be identical to that between A^+ and D^+ . Even if Able and Disa are older, whatever has made the last N years they have lived better for Able than Disa would seem to make an additional M years better for Able than Disa by a margin that is at least as great. If Q_A is the quality of life enjoyed by Able (or the average contribution an additional year makes to his life-long well-being) and Q_D is that enjoyed by Disa, then the difference between A^+ and D^+ will be $(N + M) \times (Q_A - Q_D)$, while the difference between $(A^+ - A^-)$ and $(D^+ - D^-)$ will be $(M) \times (Q_A - Q_D)$. Our reasons for thinking that the former difference is positive—namely that Q_A is greater than Q_D —would seem to entail that the latter difference is also positive.

That said, the sense in which it is plausible that Able's quality of life will be non-instrumentally "better" than Disa's might be irrelevant to the question of whether survival is *better for* or a greater *benefit* to Able than Disa (cf. Kagan 1994, esp. 321). Moreover, our moral reasons to preserve the lives of Able and Disa might depend centrally not on whose kind of life will be "better," but on how much each will benefit from living. I believe that this objection is sound, and that it best explains the general invalidity of the Millian Argument. But it requires further clarification and defense. In Section 2, I explain the notion of well-being involved in such assessments of the extent to which an outcome benefits an individual. I proceed to argue in Section 3 that this is the kind of well-being with which morality is centrally concerned. Finally, I contend in Section 4 that the extent to which existence benefits an individual in this morally relevant sense is not diminished in a noninstrumental way by intellectual disability.²

2 Well-being and rational care

There are good reasons to think that the question of what would benefit or harm an individual is importantly distinct from the general question of what she should prefer.

You should presumably prefer that a stranger you meet on a train, who you will never see again, be cured of his fatal disease. But if, unbeknownst to you, he is cured, this seems to do nothing to make you better off. Moreover, it seems that you should sometimes prefer what is worse for you but better for others (Parfit 1984, p. 494; Adams 1999, pp. 87–8; Darwall 2002, pp. 22–8). A natural response to this observation is to hold that a state is intrinsically better for an individual if she should prefer it and the state makes essential reference to her (Parfit 1984, p. 494; Overvold 1980, p. 117–8n). But as Darwall (2002, pp. 29–30) has argued, it seems that an individual could have a reasonable intrinsic preference for a state in which she keeps her promises to a state in which she is better off as a result of breaking them.

One might try saying in response that a state is intrinsically better for an individual if it makes essential reference to her and she should prefer it for *nonmoral* reasons. There may, however, be nonmoral reasons to intrinsically prefer that your life goes a certain way, which do not contribute to its being better for you. As Adams (1999, p. 88) suggests, “One may clearheadedly do what is worse for oneself out of regard for virtue, or for some other ideal,” where the virtues or ideals need not be moral, as in the case of someone who “refuses to abase herself, at great cost to herself and for nobody else’s benefit.” Similarly, it seems that one can with good reason intrinsically prefer to sacrifice one’s own well-being for the sake of accomplishing something of great artistic or intellectual value, quite independently of its effects on the lives of others.

Below I will argue that well-being does in fact come apart from these sorts of self-regarding reasons. But even if this is incorrect, it seems to be a *coherent* position, in which case the *concept* of an individual’s well-being must be distinct from that of what she has most self-regarding reason to prefer. Indeed, as Scanlon (1998, pp. 134–5), Adams (1999, pp. 92–3), and Darwall (2002, pp. 1–49) suggest, the concept of an individual’s well-being does not seem very important from the standpoint of that individual’s thinking about what *she* should prefer. It seems, rather, to be important primarily from the standpoint of someone who loves, wishes to benefit, or has good reason to care about that individual. Darwall consequently argues that we can informatively analyze the concept (or at least one important concept) of an individual’s well-being as what we should want out of care for that individual.

For instance, Darwall (2002, p. 11) contends that when we argue about whether pleasant illusory beliefs are good for someone, we are not arguing about whether *she* should prefer to have them. Perhaps she shouldn’t, but only because she should want to know the truth, even if knowing is worse for her. We are rather arguing about whether, assuming we should care for the individual, our care for her should incline us to prefer her having pleasant illusory beliefs. Of course, if care for someone were simply a desire for her well-being, this might seem circular. But as Darwall argues this is not so. It is possible to have an intrinsic desire for someone’s well-being without caring for her, for instance if the desire arose as a result of associative processes or admiration. Darwall (2002, pp. 1–2, 50–72) argues that we can understand care or sympathetic concern for someone as a psychological natural kind, which is related to forms of empathy that involve vicariously feeling things as from her perspective, but is directed towards her

perspective from one's own (rather than towards one's own vicarious analogue of her perspective).

3 Well-being and morality

Having isolated the concept of an individual's well-being as what we should want out of care for her, I will now argue that morality is centrally concerned with well-being in this sense. No other proposed moral principles seem more plausible in the abstract—or indeed as plausible in the abstract—as the following two:

The Principle of Nonmaleficence: There are intrinsic moral reasons to avoid harming others, and

The Principle of Beneficence: There are intrinsic moral reasons to benefit others.

My claim is that the senses of 'harm' and 'benefit' in these principles are those of causing or bringing about outcomes that we should respectively disprefer and prefer out of care for the others in question.

To argue for this claim, I must begin with cases in which our moral reasons are exclusively those of nonmaleficence and beneficence, as opposed to those described by two distinct principles which *may* be just as basic, namely:

The Principle of Respect for Autonomy: There are moral reasons to avoid interfering with agents' autonomous choices about their own lives, and

The Principle of Support for Autonomy: There are moral reasons to help agents realize the objects of their autonomous choices about their own lives.

Welfarists claim that all moral reasons, including reasons to respect and support autonomy, are derived from reasons to promote or avoid decreasing well-being (Keller 2009). My argument will not require this strong *Welfarist* claim. I begin with the much weaker claim that our moral duties to those who have never been autonomous are governed by reasons of nonmaleficence and beneficence, rather than distinct reasons of respect and support for autonomy. These *never-autonomous* individuals simply have no actual autonomous preferences to respect or support. We might ask what they would choose if they were autonomous, but the only plausible moral reasons to care about someone's autonomous choices, *beyond* their tracking or affecting her best interests, are *antipaternalistic* reasons not to act against her *actual* autonomous decisions and values (Thomson 1990, pp. 187–91; Beauchamp and Childress 2009, pp. 135–40).

When *never-autonomous* individuals, like typical human children, will one day be autonomous, there are reasons to prepare them to make carefully reasoned choices. But antipaternalistic reasons to support actual autonomous choices do not favor *making* individuals autonomous or "forcing them to be free." There may be reasons to provide "general purpose means" to support the decisions of a child's future self if we know it will exist. But reasons to support the choices of a child's merely potential future self cannot explain why we should preserve her life or cause her to become autonomous, any more

than reasons to support the choices of merely potential agents give us reasons to create them. On the other hand, preserving a child's life and equipping her to function effectively in it does seem to contribute to her well-being. It is our reasons to benefit the child in these ways that explain why we should do so for *her* sake.

In the case of never-autonomous individuals, determining what would constitute the harms and benefits proscribed and recommended by morality seems clearly to be a matter of determining what we should disprefer and prefer out of care or sympathetic concern for them. Consider determining whether a distressing social encounter or painful medical procedure is in a young child's best interests, and consequently something to which it would be good or wrong to subject her. It seems that one must empathically simulate what it will be like for the child to experience the distress or pain, what it will be like for her to have the benefits of these experiences, and to determine what intrinsic preference one should have between these outcomes for the child's sake or out of concern directed towards her. Similarly, the plausible thought that it is intrinsically better for children to have *genuine* loving relationships, in a sense that would make it wrong to abandon them in experience machines, seems to be that, out of care for children, we should intrinsically prefer their having genuine loving relationships.

In order to give a plausible account of the relative strengths of our moral reasons to do and avoid doing things to different individuals, I think that we must also understand many of our moral duties to autonomous agents as shaped by considerations of beneficence and nonmaleficence, the strengths of which are determined by our reasons to want things out of care for them rather than their self-regarding reasons. Suppose that Christine is a young child or severely intellectually disabled adult and Arthur is a talented artist. All else held equal, we seem to have the same moral reasons to prevent Christine and Arthur from experiencing comparable amounts of suffering. Now Arthur might for good self-regarding reasons prefer completing a great masterpiece and undergoing years of suffering unrelated to its completion to experiencing no suffering but not completing the masterpiece. Suppose, however, that you must choose between:

- (O1) preventing Christine from experiencing years of suffering, and
- (O2) enabling Arthur to finish his masterpiece.

Surely our moral reasons decisively favor (O1); it would be seriously wrong to take option (O2) instead. Moreover, consider the moral difference between acts of:

- (a) *inflicting* years of suffering on Christine in order to enable Arthur to finish his masterpiece, and
- (b) *preventing* Arthur from finishing his masterpiece in order to prevent Christine from experiencing years of suffering.

Clearly, (a) seems deeply wrong—indeed, it would seem monstrous to inflict years of suffering on a single child for even a city's worth of artistic achievement, as in the case Ursula Le Guin's (1973) *Omelas*. But (b) seems perfectly permissible if not mandatory. If the only way to free *Omelas*'s victim was to bash down the door to her cell with

and consequently destroy the unfinished masterpiece sculpture of an artist from a neighboring city, it would seem obviously right to do so.

I contend that the best explanation of why our moral reasons decisively favor (O1) over (O2) and why (a) is much worse than (b) is:

- (I) Out of equal care for Arthur and Christine, we should be more averse to Christine's experiencing years of suffering than we should be to Arthur's failing to complete his masterpiece, and
- (II) All else held equal, the considerations that determine the moral priority of treating Arthur in certain ways in relation to Christine are reasons of beneficence and nonmaleficence, the relative strength of which consists in how strongly we should want Arthur and Christine to be treated in these ways out of equal care for both of them.

In support of (I), note that out of care for Arthur and Christine, we seem to have very strong reasons to prefer that neither experiences years of suffering. Out of care for Arthur we should plausibly want him to have stimulating experiences and personal achievements by overcoming challenges that he finds difficult and engaging. But out of equal care for Arthur and Christine, we should be much less averse to Arthur missing one big episode of stimulation and personal achievement than we should be to Christine's suffering for years. On the other hand, primarily out of concern for his art rather than himself, Arthur may have very strong self-regarding reasons to prefer finishing a masterpiece with exemplary aesthetic value, which from his own perspective outweigh his reasons to avoid his own suffering. From the perspective of care for someone, considerations like the objective aesthetic value of her undertakings seem much less important than they do from the agent's own perspective.³

In support of (II), note that *ceteris paribus* Arthur's avoiding a *greater harm*, like months of suffering, would take moral priority over Christine's avoiding a lesser harm, like minutes of suffering. But as we have seen, the mere fact that Arthur autonomously wants (perhaps reasonably) to finish his art project cannot take priority over Christine's suffering a greater harm in the sense of an outcome that we should more strongly disprefer out of equal care for her and Arthur. Arthur's failure to complete certain autonomous projects will constitute absences of personal achievement, and may result in frustration or depression. Preventing *these* features of the nonfulfillment of Arthur's autonomous preferences can take moral priority over preventing Christine's suffering a harm like a stubbed toe. But this seems to be because these features would make the nonfulfillment of Arthur's preferences a greater harm in the sense of an outcome to which we should be more strongly averse out of equal care for Arthur and Christine. Apart from affecting these features that matter from the perspective of care, the mere strength, autonomy, or self-regarding reasonableness of Arthur's desire to finish his masterpiece cannot make his doing so take moral priority over preventing a greater harm to Christine.

This suggests that reasons of beneficence and nonmaleficence set a kind of threshold of what we owe an individual in relation to other individuals. If there are underivative reasons to respect and support agents' autonomy, they seem primarily to *shift* our

obligations from omitting to harm and benefitting them to omitting and doing whatever the agents designate as substitutes for our default concerns with their well-being. For instance, if the autonomous adult citizens of Omelas choose to waive their moral protections and volunteer to suffer in order to facilitate Omelas's artistic achievements, this plausibly undermines our reasons to protect them from this suffering. Moreover, especially if these self-regarding choices are reasonable, some of our reasons to prevent their suffering are plausibly replaced by reasons to actively help them suffer. But reasons of beneficence and nonmaleficence play the indispensable role of defining the initial moral protections that are there to be waived or replaced—and always remain unwaived and unreplaced in the case of never-autonomous individuals.

4 The case of intellectual disability

I have thus distinguished how much an outcome benefits an individual from how much self-regarding reason she has to prefer it, and argued that the former—rather than the latter—determines the moral priority of securing that outcome for her rather than distinct outcomes for others. If this is correct, then as I explained in Section 1, the Millian Argument invalidly infers that there are stronger moral reasons to preserve the lives of those who are not intellectually disabled from its initial premise that we have self-regarding reasons to want to avoid intellectual disability.

I will conclude by making a positive case that our noninstrumental self-regarding reasons to want to avoid intellectual disability are unrelated to the extent to which intellectually disabled individuals benefit from existence, and consequently do not give others stronger moral reasons to preserve our lives than they have to preserve the lives of intellectually disabled individuals. In real life, intellectually disabled individuals face significant instrumental disadvantages. Moreover, many of our strongest reasons to want to avoid intellectual disability are not self-regarding but reasons to want to have greater abilities to benefit others and avoid others' bearing the costs of our dependency.

Suppose, however, that you were the last sentient being ever to exist, and you might have either of the following equally lengthy lives:

(L1) No intellectual disability, and you find enjoyment, fascination, challenge, and personal achievement in scientific, philosophical, or artistic endeavors, or

(L2) Intellectual disability, but you find equally great enjoyment, fascination, challenge, and personal achievement in simpler activities, tasks, and choices.⁴ This is also involves slightly more enjoyment than L1.

Are there self-regarding reasons to prefer L1? While this is questionable, there plausibly are, in virtue of the intrinsic intellectual or aesthetic value it would involve.

But would you benefit any more from living L1 than someone born into L2 would benefit from L2? It is crucial to distinguish the enjoyment, fascination, challenge, and personal achievement that *we* find in philosophy and artistic creation from their intrinsic intellectual and aesthetic value—and to free ourselves from smugness. Consider

(L3) The equally lengthy life of some greater human or alien genius, who finds our intellectual and artistic endeavors boring, but finds equal enjoyment and challenge in activities with greater intrinsic intellectual or aesthetic value. This is also slightly more dissatisfied than L1.

Out of equal care for this genius and us, others should be no less averse to our losing our lives, which are no less enjoyable, engaging, or challenging, than they should be to this genius losing her life. It may be better in the sense of more choiceworthy to be this genius dissatisfied than us satisfied, but because she benefits no more from her life than we benefit from ours, she has no stronger moral claim on the lifesaving aid of others than we do.

The exact same considerations establish that we should, out of equal care for you and the individual born into L2, be no less averse to her dying than you. Plausibly you should, out of concern for art and philosophy rather than yourself, choose L1 over L2. Morality should leave you free to pursue such nonmoral values when this does not interfere with your duties to others. But since, as I have argued, our default moral priorities are set by our concerns for you and the individual living L2 — rather than these nonmoral values — this gives us no moral reason to preserve your life rather than hers.

I have thus argued that lesser intellectual ability does not in itself weaken our moral reasons to preserve someone's life. It is currently assumed that intellectual disability, quite independent of its instrumental effects, diminishes the extent to which a neonate's interests in survival can morally outweigh the costs to others of caring for her (Wilkinson 2006, 2011). The unsoundness of this assumption may be among several important consequences of my conclusion.⁵

Notes

- 1 I am grateful to an anonymous reviewer for *Thought* for suggesting this objection, and for pointing out the need to explain the relationships between my account of the Millian Argument's invalidity and the objections discussed in this section.
- 2 My account of comparisons between how much outcomes benefit different individuals can make sense of the penultimate objection's claim that, although intellectually disabled life would be noninstrumentally worse for Able, he does not benefit more from nondisabled life than Disa benefits from intellectually disabled life. My conclusions are officially neutral between this view and the view (which I find more plausible) that, although we all have noninstrumental self-regarding reasons to avoid becoming intellectually disabled, intellectual disability is not noninstrumentally worse for us.
- 3 A related but distinct point is that a plausible asymmetry, according to which there are stronger reasons to prevent harms like pain than to realize benefits like stimulation (Hurka 2010; Mayerfeld 1999; Moore 1903), seems much more pronounced from the perspective of care.
- 4 On some ability of even profoundly intellectually disabled individuals to do this — as well as form intimate personal relationships (see Maes et al. 2007; Petry, Maes, and Vlaskamp 2005).
- 5 There are questions about the extent to which death harms *any* infant in light of her psychological relation to her future (McMahan 2002). I hope to show elsewhere how infants

have the relations that matter from the perspective of care, even if they lack many that affect our self-regarding reasons. Everything I have said about intellectually disabled humans applies equally to mentally comparable nonhuman animals. Many smugly assume that they benefit immeasurably more from their lives than nonhuman animals benefit from theirs. But I see every reason to think that this is simply an epistemically worthless speciesist prejudice.

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