**Can We Measure the Badness of Death for the Person who Dies?**

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**Abstract**

I aim to show that the common idea according to which we can assess how bad death is for the person who dies relies on numerous dubious premises. These premises are intuitive from the point of view of dominant views regarding the badness of death. However, unless these premises have been thoroughly justified, we cannot measure the badness of death for the person who dies. In this paper, I will make explicit assumptions that pertain to the alleged level of badness of death. The most important assumption I will address is the assignment of a quantitative value of zero to death, which leads to the conclusion that there are lives not worth living for the affected person. Such a view interprets the idea of a live worth living in quantitative terms. It is in conflict with actual evaluations of relevant people of their lives.

*Introduction*

If death is bad for people, as many philosophers believe,[[1]](#footnote-1) then how bad is it? Many people believe that it is not the worst thing that can happen to people. Philosophers regularly assert that there might be conditions people find themselves in that are worse than death.[[2]](#footnote-2) Hence, death might not be as bad as some conditions but worse than others. In other words, death is somewhere between extremely bad conditions and good conditions on a scale of qualities of life. This seems plausible enough, but I will show that the claim comes with contested assumptions which undermine its credibility.

If we ask how bad death is, we are relying on a comparative evaluation of different possible lives of a person. The values of these lives are usually generated in relation to a person’s wellbeing or, more generally, what is good for them. I will accordingly ignore concerns of other types of values, such as aesthetic or moral values, which might very well also be important when considering the badness of death. But can we actually make sense of the idea that a condition can be worse than death, if death is nonexistence? There are numerous conceptual and logical puzzles involved here. Several of these have been addressed and, as far as I can see, resolved in the relevant literature. However, there is one specific idea that to my mind challenges attempts to include death and nonexistence in a theory of prudential value: That is the idea of death as a point on a scale. It is important to identify the premises leading to this specific idea.

My aim in this paper is therefore to make explicit and critically assess certain assumptions that are regularly made in the philosophical literature on the badness of death. These assumptions become pertinent when claims are made about the level of badness of death, for instance when it is asserted that death is worse for a child than for an old person. Some of these claims express ordinal judgements, that is, they refer to the comparative badness of instances of death without saying how much worse they are. Other judgements rely on cardinal measurement, for instance when it is said that two deaths are twice as bad as one death. Cardinal numbers are also often introduced to align different goods in life on a single scale. Without these cardinals, certain comparative claims remain unsupported.

It should be stressed that I do not doubt the meaningfulness of life comparisons as such, or of assuming values of lives, even numerical values. There are many relevant and helpful assessments of this kind, for instance in health care economics. However, the relevant discussion in the philosophy of death has other purposes and is concerned with the value of life or death *for the* affected *person*. I will show that once the problem of badness of death for the person who dies has been transferred into an abstract problem as to whether death is a bad event, the first step has been done in a string of assumptions. Based on these assumptions, it is but a small step to conclude that lives that contain less quantitative prudential value than death are lives not worth living. The individual steps in this thought process are not necessary, of course, but because they are intuitive, they are also hard to resist. Making the contested steps visible is hence a valuable form of critique, I believe, despite its destructive form.

The assumptions I will tease out are the expression of the locution 'bad-for' in terms of abstract or impersonal value, the summative nature of overall prudential value, the comparability of good (and bad) things, the allocation of negative quantitative values to bad things, the linearity of prudential values and, most importantly, the assignment of a quantitative value of zero to death. All these assumptions are questionable.

In the first section, I discuss ways in which things can be bad for human beings to sort out the feasible options of theories regarding the badness of death. A comparative account and a noncomparative account are the most promising options. They either claim that death is making a person worse off or that death is a noncomparatively bad thing. The second section then elaborates on these accounts of badness in relation to the badness of death and shows that the common explanation, which focuses on the privation of the good things in life by death, leads to an abstract perspective on prudential value. According to such a view, events that are not experienced or even merely counterfactual can have an impact on the value of a person's life. In the third section, I aim to show that, although not in itself a problematic claim, the abstract perspective results in additional assumptions in relation to the cardinal measurement of death. These assumptions are to do with the numerical or quantitative assessment of lives' values. In the fourth section I show how they eventually lead to the notion of a life not worth living via the assumption of a zero level of prudential value.

I do not deny that we can reasonably attach values to human lives. What I deny is that we can measure these values in a personal way, that is, as a value for the person who dies. We can still assign values to lives, for instance if we assume social or economic values. But the value of a life for the person herself cannot be measured because it is not a quantifiable value.

Before I begin my examination, I need to add a terminological clarification: in the philosophical literature on death, it has become customary to distinguish between three different notions in relation to the phenomenon of death: the process of dying, death itself and being dead.[[3]](#footnote-3) Hardly anyone would question that dying can be bad for the person who dies. It is often a painful and slow process, hence might be very bad indeed, even so bad that death itself may seem a good thing – although in truth the termination of existence is rather the required means to end an unbearable situation. Death is the termination of life. It is probably best to understand death as the end of the process of dying. What criteria exactly mark the occurrence of death is of course contested, but we do not need to be very precise. Many philosophers and medical personnel define death as the irreversible cessation of all vital functions of an organism.[[4]](#footnote-4) There is a definite moment when someone has died – whenever exactly it happens – and this person is then dead and transitions to a state of being dead. We will later see that there are some philosophical puzzles around the notion of nonexistence, which are also pertinent to the state of being dead. The main problem when discussing the badness of death for the person who dies is how to make sense of putting a value on a condition that lies outside a person’s existence.

1. *Bad things*

In this section I discuss ways in which things can be bad for human beings. The badness of these things will be featured in terms of their impact on the wellbeing, welfare or, more abstractly, the good of the affected person. In terms of philosophical value theory, I therefore talk about prudential value, about things that are relevant from the perspective of self-interest.[[5]](#footnote-5)

The problem whether death is bad for the person who dies can be expressed in many different ways.[[6]](#footnote-6) Death might indeed be simply bad, as I just said, without any further specification. Death can also be disadvantageous, not good (in contrast to being positively bad), or harmful; that is, it can have certain bad features and results that altogether make it bad. Death can itself be a harm or an evil, hence constitute a bad thing. Death can also be personally undesired or frightening – and accordingly be an object of negative evaluation. It seems that death is actually bad for human beings in all of these respects, albeit perhaps not always jointly.

Some philosophers have declared that death is actually not bad, because after death there is no person anymore for whom death could be bad. One of the first philosophers to, famously, make that claim was Epicurus in his *Letter to Menoeceus*.[[7]](#footnote-7) As many know, he built his argument on a specific theory of wellbeing, hedonism, according to which things that are bad for sentient beings need to be capable of being experienced. Assuming that we cannot experience anything bad when we are dead, it seems indeed, as Epicurus put it, that death is “nothing to us”. However, this simply means that being dead cannot be bad for the dead person, which is altogether not so great news for those who worry about death, not about what happens after death. The fact that being death is not bad for a person does not mean that death cannot be bad for the person before her death or when death occurs. Although I stay uncommitted regarding the value of afterlife, I still think we should not belittle Epicurus’s insight. After all, for the Ancients it was apparently a constant worry what will happen to the person after death.[[8]](#footnote-8) To be able to ease the fear about individual afterlife and its possible harm was certainly a philosophical accomplishment. Yet, it does not take the sting out of death itself.

In the following, I will refer to ‘bad things’ on numerous occasions. Importantly, this expression allows for experiences, events, resulting facts, and even counterfactual, fictional and hypothetical events to be able to bear the property of prudential badness. I do not regard this as suspicious or problematic. It is important to mention, though, because I will therefore include what Stephen Rosenbaum calls ‘abstract’ bads – events happening in the world – as well as ‘concrete’ bads – conditions of people – in my brief overview.[[9]](#footnote-9) The idea of abstractly bad things is not alien to language use, nor metaphysically dubious.[[10]](#footnote-10) We can similarly use Matthew Hanser's terminology of state-(of-a-person-)based theories of harm as opposed to event-based theories of harm.[[11]](#footnote-11)

I avoid the term *harm* in this paper as much as possible, because it is usually used in ethical contexts, including legal circumstances. These contexts consider acts of harming, which are again considered to be based on intentional or careless action, which might then exclude natural events. To be sure, natural events can put people in a harmed condition,[[12]](#footnote-12) but death or being dead are difficult to be accounted for as a harmed condition of a person. A natural event can certainly be bad for us, even if it might not constitute harming action. Hence, I refer to bad things, not harmful things.

First, events such as death can make us worse off than before. Importantly, some events can be bad although the affected person does not suffer an impairment of wellbeing. This is unusual, because normally an event that makes a person worse off would have to reduce the level of wellbeing. People can be worse off, despite their wellbeing staying on the same level, if they are prevented from reaping a specific benefit. If a gust of wind blows my lottery ticket away and it would have won, even if the latter fact is unknown to me, then that event can make me worse off. Here, the comparison is between a possible future and the actual future of a person’s life. After the lottery draw, I am worse off than I would have been, were it not for the gust of wind. This is the counterfactual sense of being made worse off. It is also called the counterfactual account of comparative harm.

According to the common comparative interpretation, things can only be bad in the negative sense of preventing a good thing if the benefit is expectable, reasonably hoped for, normal or rightfully owed. Not to find Aladdin’s lamp or not being able to jump to the moon, though potentially a huge benefit to a person, are not bad things, or harms for that matter.[[13]](#footnote-13) Hence not all things that would be good for someone and that are prevented from coming about are bad. We need a threshold of normal or expectable good things, which can be set for specific purposes, to distinguish between things that make us worse off and that merely fail to bestow a benefit.

It is usually relatively straightforward to distinguish between bad things and things that are simply not good, though admittedly there is a grey area in terms of the normative elements of being expectable, etc. In relation to the badness of death this specific aspect has led some philosophers to assume that death is only a bad thing for the person if the benefit of a longer life can still be expected or the event of death would be abnormal. In other words, death would not be bad if a longer life cannot reasonably be expected, especially at an advanced age, in terms of statistical probability or medical possibilities.

Second, things can be bad, not due to their results, but due to their inherent features; the way they are as such or directly present themselves in relation to us. The most straightforward example is pain. Pain is bad in itself for a person, due to its phenomenal features. Pain might actually make a person better off than she would have been, for instance when it causes children to turn their hand away from a hot surface. Still, the experience of pain is usually bad for the affected person. Other examples are being bullied, insulted or feeling nauseous. Death, because not being experienced (as we assume), does not easily align with this type of bad.

Events can also be bad for people, despite not being experienced, but still due to their inherent features.[[14]](#footnote-14) If a person is betrayed by a friend, then this is bad for her, even if she does not know about it. The betrayal itself is a bad thing for her, not in the sense that she feels worse as a result or that the experience of being betrayed is bad, but in the sense that she is the object of a bad event, an instance of betrayal. It is, in a word, a noncomparatively bad thing. Such a bad thing can be due to a positively bad thing or a loss of something valuable.[[15]](#footnote-15) Betrayal, for instance, can accordingly be described as a loss of a trustful relationship. Admittedly, this specific type of things being bad is perhaps more contested than the comparative interpretation, because it relies on evaluative claims about certain events, including death, as allegedly constituting inherently bad events. We would need to hear more about the relevant theory of value. But at this point we are concerned with the types of bad things, not its most plausible content.

There are more ways in which things can be bad for people, for instance in the sense that they are opposed to the goods of a human life form. But the two important interpretations for our purposes are of the comparative and the noncomparative type. Death can make us worse off or it can be noncomparatively bad. Both these types of bads cannot be due to any phenomenal features, if we assume that death involves the end of all experience for the affected person. This is one of the reasons why much of the philosophical literature focuses on the event or fact of death – in other words, on abstract evaluations.

An abstract or impersonal perspective comes with a perhaps unwanted consequence. It allows to discuss badness in a sense that seems unrelated to the personal way we normally conceptualise bad things. If *events* – in addition to conditions that affect people – can be bad for someone, they might also be bad as such, without concretely affecting the relevant person. In an extreme version there might then be events that are bad for nobody but nevertheless bad things to happen.[[16]](#footnote-16) This can be an awkward consequence for our purposes, because when talking about the badness of death, we normally consider the problem as involving an assessment of the concrete badness of death for the person who dies; we usually do not consider the badness of death from an abstract or even impersonal perspective.

Death and life, at least in a first approximation, are not abstract values, but values for persons. ‘Personal values accrue to objects in virtue of the fact that those objects have value-for, or are valuable to, someone – not in virtue of the fact that those objects have value simpliciter, or are valuable, period’.[[17]](#footnote-17) We will see that the modern philosophical debate on the badness of death has led to perspectives that make death a value simpliciter – a zero value to be precise.

1. *How death is bad*

We have seen that two explanations of the badness of death seem most plausible: A comparative and a noncomparative account. The comparative account maintains that death is bad for the person who dies, insofar as it prevents valuable things to continue in her life or makes people worse off. The noncomparative account holds that death as such is a bad thing to happen to people. In this section we will look more closely at these two types of accounts.

The comparative account of the badness of death is usually linked to the privation (or deprivation) account because it focuses on what death takes away from us or deprives us of. Death involves the absence of the good things for the person who has died. In the modern analytical debate on the badness of death, this theory originated from Thomas Nagel and was further developed by Fred Feldman.[[18]](#footnote-18) Today it has numerous supporters.[[19]](#footnote-19) Although the deprivation account is usually put forward in a comparative version, it does allow a noncomparative version as well. Here, the event of death involves a loss of inherently good things.

Now, there seems to be a problem for the comparative account because the relevant comparison seems to be between the life of a person and the condition of this person when being dead. Yet the person does not exist after death, of course, at least not in the relevant sense of allowing a meaningful comparison in terms of, say, quality of life, or other interpretations of prudential value. This can be called the no-wellbeing-without-being problem. There are two routes to answer this problem:[[20]](#footnote-20) One is to claim that we do not need to compare a condition of life with a condition of death, but only two conditions of life. The other is to allow for counterfactual conditions of people to be added to the comparison.

Both these replies must retreat to more abstract aspects of the lives of people. To be plausible, they cannot rely on a comparison of real conditions of people but assume a comparison of events or ‘social situations’.[[21]](#footnote-21) In other words, they move from a personal stance to an impersonal stance. In addition, comparative accounts must assume a summative theory of wellbeing or prudential value: Additional goods in life can only add to the value of a person’s life if the temporal values can be added in some way.[[22]](#footnote-22) Otherwise no meaningful comparison between states of affairs would be possible.

The first response to the no-wellbeing-without-being problem has been put forward by Feldman and refined by other theorists.[[23]](#footnote-23) Feldman suggests comparing the value of the life of person P at t1, the moment of death, with the value(s) of the life of the same person P at t2, which is a moment in the nearest possible world.[[24]](#footnote-24) The nearest possible world is the one which is different in only one respect: P has not died. We can assume, for instance, that in the nearest possible world P lives on for another 30 years and enjoys numerous goods. Whatever the quantitative value of this life in the possible world is, it is presumably higher than the value of P’s life at the time of P’s death in the real world. After all, her life was cut short by death and we can safely assume that living longer would have involved good things for her. That’s why death is bad for her.

Note that this verdict cannot be generalised. Death is not always bad for the person who dies according to this theory. If the life of P in the nearest possible world would not have led to more good things, then death would not be bad for the person who dies. But be that as it may, what exactly happens in the nearest possible world is of course not known to us. This fact poses an epistemological problem in assessing the relevant values. This might not be a huge problem, because it seems a safe bet to claim that more life is normally better than less life, so we can at least make an ordinal comparison between life and death. Death is hence a comparative bad for the person who dies. But it will be very difficult, if not impossible, to determine cardinally how much worse the shorter life is compared to the longer life. This problem will become more relevant at a later stage of this paper, but it is worth mentioning here, because it naturally leads to the idea of putting a zero value on death.

The counterfactual theory of comparative harm similarly introduces possible alternative scenarios to the death of the person.[[25]](#footnote-25) If the person had not died, she would have very likely made more pleasurable experiences, achieved relevant goods or had some important desires fulfilled. So whatever theory of prudential value we assume, it is again relatively plausible to claim that death prevents an improvement in the value of life.

Altogether the comparative account – be it its possible world or its counterfactual variant – seems plausible and can straightforwardly explain the badness of death for the person who dies. However, it relies on two important assumptions that need to be scrutinised and that might lead to consequences that are not necessarily foreseen by the proponents of the comparative account.

First, because we do not have access to the actual value of people’s lives in possible worlds or in counterfactual situations – that would, at least according to many theories of prudential value, require access to their subjective point of view – the comparative theories need to revert to states of the world, including persons for whom certain events are good or bad. Thus, Feldman says that his theory ‘calculates the value of a *state of affairs* for a person by considering what would happen (whether as consequence or not) if the *state of affairs* were to occur, as compared to what would happen (whether as consequence or not) if it were to fail to occur’.[[26]](#footnote-26)

Second, the comparative theory additionally needs to assume that the good things for a person can be accumulated in some way. Good things add up to a bigger value of a life and bad things reduce the value. But this assumption may well be controversial.[[27]](#footnote-27) Simple accumulation is particularly controversial if a further assumption regarding the linearity of relevant values is added. We can reasonably deny that the good life for human beings is gradable along a scale and instead hold that it involves an absolute, nongradual achievement. Epicurus, for instance, thought that the best condition of a human being to achieve was *ataraxia*, which is usually interpreted as absence of all mental pain, a kind of calmness, free of fear, or tranquillity of the soul. If we have achieved this ideal state, there can be no improvement to our life. Whether this is plausible or not is not our concern, of course, but accumulative accounts of the good for human beings are certainly not the only reasonable option.

A noncomparative account of the badness of death claims that death involves the loss of something valuable for human beings. As we have seen, it is more difficult to find something positively bad in death, because it is not an event in our life. But death can be bad in the privative sense of taking noncomparatively good things from us. According to Frances Kamm, for instance, it is ‘the fact that death deprives us of goods of experience and action that makes death bad for us’.[[28]](#footnote-28) Other noncomparative theories similarly allege agency, absence of pain etc. as intrinsic or basic goods for human being.[[29]](#footnote-29) It is hence not a bad experience or a bad personal condition that makes death bad, but a fact about the loss of good things.

The noncomparative account can avoid the somewhat implausible consequence that the comparative account faces, according to which death at very old age is not bad for the person who dies. Death in old age still takes away the good things of life, so it is inherently bad, although it might be accepted that it is comparatively not as bad as dying young. More generally, the noncomparative account can explain that under specific circumstances death might be the lesser evil, but still (noncomparatively) bad. This seems to be an important insight. ‘When a person dies, her death thwarts all her ongoing plans and projects, thus rendering some of her past efforts futile. This makes a person’s death absolutely bad for her, even when it is overall good, thereby potentially turning her death into a lesser of two evils’.[[30]](#footnote-30)

The main problem for the noncomparative account is to make good the claim that some things, such as experience or agency are good things for human beings. Why not *ataraxia* or indeed even a life full of pain and danger instead? On what basis do we decide what is the correct account of a good life for human beings? Arguably the most plausible strategy is to simply leave the evaluation of the life of people to the relevant individuals themselves. In other words, it is not a fact about something being present or not that makes personal life good, but whether the person makes the life good, in the sense of infusing their life with things they find valuable. But then it is not clear anymore why death could be deemed bad for a person from an abstract perspective, without considering her individual assessment of her own life.

In this section, we have looked more closely at the most common theories of the badness of death for the person who dies. They come in two main types, a comparative and a noncomparative version. Although both theories are successful in explaining the badness of death, they need to revert to controversial assumptions. Comparative theories need to assume an accumulative nature of the good things for human beings. They also need to revert to an abstract account of bad things for persons, which refers to events, facts or states of the world. The latter assumption is often shared by noncomparative theories. Noncomparative accounts usually presume certain objective goods or bads, and they hence also retreat to an abstract perspective where the concrete evaluation of, or the meaning of things to, people does not count for establishing the value of things in life.

1. *How bad is death?*

Whether death is bad for the person who dies has been traditionally an important problem in philosophy. We have seen that there are reasonable arguments affirming death’s badness. But there is a second problem that needs to be answered: How bad is death? This question goes over and above the ordinal problem posed before, at least in the comparative perspective, where the badness of death has been explained by an interpersonal ordinal comparison – death makes people worse off. In order to say how bad death is we need to expand our view to cardinal evaluations.

The idea of measuring the level of badness of death for the person who dies might seem ludicrous. If we ask, for instance, how bad death might be for ourselves, it will be very difficult to come up with an answer. We would not even know what kind of measure would be involved. Are we supposed to put a monetary value on our life, in the sense that we might say: death would for me be equivalent to, say, a loss of £500K? Or should we state that death is as bad as having to eat 300 marmite sandwiches in a day? The whole idea is obviously not easy to make sense of.[[31]](#footnote-31)

But at least ordinal comparative evaluations of deaths seem to be feasible. Philosophers certainly think that they can achieve these. Christopher Belshaw, for instance, quite simply says: ‘For someone in good health, hit by a bus, death at eighty-two is considerably worse than it is for someone who is already terminally ill. And this is true whether or not it is in some sense absolutely bad.’[[32]](#footnote-32)

In addition, many researchers rightly insist that there are numerous occasions where we need to assess the relative value of death.[[33]](#footnote-33) For instance, when allocating scarce resources in medicine, we want to know whether it would be better to invest into, say, treatment of extremely premature newborn babies or of dementia patients.[[34]](#footnote-34) If we think that this kind of assessment should be made with the impact on affected people in sight and not based simply on external considerations, such as the impact of deaths on the nation’s economy, we need some kind of comparison of death for different people. Perhaps we are then able to say that death for a newborn is worse than death for a demented patient.

Similarly, we might encounter ethical questions where different policies have an impact on future life and deaths.[[35]](#footnote-35) For instance, if we do not prevent climate change, many people will die due to floods or droughts. But if we invest into alleviating climate change, we have less resources available to research into medical treatment. Accordingly, more people will die from theoretically preventable or curable diseases. Which deaths are ethically more significant?

There are also occasions where we want to assess death within the context of an individual life. People who contemplate suicide or euthanasia on behalf of incapacitated patients seem to assess the death of an individual person in terms of comparing (perhaps vicariously) death to the current quality of life of the person. Occasionally, they might come to the assessment that death for this person or themselves is actually better than continuing life.[[36]](#footnote-36) To make sense of such evaluations we need some idea about the comparative value of death.

So, there is some need for interpersonal and intrapersonal comparative assessment of death. It might be possible, in some contexts, to restrict the relevant evaluation to ordinal judgements, for instance when we come to the conclusion that death early in life is worse than death later in life, or that life for a particular individual is worse than continuing to live. However, it seems that at some point we also require cardinal judgements, because occasionally we will deal with different numbers of people. Is saving two babies from death better than treating fifty dementia patients and preventing their deaths for another year? Similarly, whether life for a specific individual is worse than death will depend on some considerations of their wellbeing or quality of life over time. This might also require some cardinal evaluation to make good the overall assessment.[[37]](#footnote-37)

It is easy to see how there will be an incentive for putting a specific value on death, not just because we need to make the mentioned judgements but also because it will allow us to compare policies involving the death or nonexistence of people with alternatives that affect the prudential value of people. In other words, it is beneficial for the mentioned practical purposes to make death comparable in a wider sense. However, as we will see, such a move comes with problems that are often overlooked.

In the discussion so far, we have already achieved an abstract perspective on the value of death. This allows us to seamlessly aim at putting a value on death for a person that is not determined individually by the person herself, but by an assessment of the relevant events involving the deaths of people. We have also seen that the comparative account assumes the accumulative nature of the good things in life. Theorists can therefore be hopeful to make use of the comparative account and develop it for the practical purposes of measuring the badness of types of deaths – for instance the deaths of infants in comparison to the deaths of old people – and perhaps even individual tokens of death – for instance whether the death of a specific person might be better for her than going on living.

Cardinal measurement requires numerical values. As we have seen, it will not do, for certain practical purposes, to restrict our assessment of death to ordinal measurement. For instance, is the event of the death of two healthy babies worse than the death of fifty demented patients? If the values of the individual deaths itself were equal, then the answer would be easy. The event of the death of fifty people is worse than the death of two. But the very idea of the comparative account of the harm of death was to say more than just that death is bad. It was supposed to allow an assessment of *how bad* death is. The answer of the comparative account is that death is bad relative to the loss of the value of possible life.[[38]](#footnote-38) Accordingly, we cannot simply equalise the value of the death of a healthy baby with the value of a demented person and then multiply with the numbers of affected individuals. Rather, we have now additional factors to include in our overall assessment. Similar considerations might be factored into individual lives. Whether a person, say, has important life plans can have an impact on how much of a loss death would be for her. Similarly, whether death spoils the story of a person’s life – one’s life’s unity – might be included in the assessment of the badness of an individual death.[[39]](#footnote-39)

Importantly, to determine the level of badness of a death requires a metric. A way of factoring in considerations such as length of life, narrative significance or mental restrictions can only be factored in if values are made comparable. This is often achieved by introducing numerical values. The most obvious metric is drawn from quality of life or wellbeing measures. There are numerous available in welfare and health care economics.[[40]](#footnote-40) Philosophers who write on the value of death usually do not invest much time into this and make up their own values. This seems acceptable because they do not normally speak to real policy issues. But it requires certain assumptions that are worth being made explicit because they are certainly debatable.

The first assumption is that good and bad things in life can be made comparable. For instance, a possible life where a person moves to another city to take up a new job can be compared to a life where she stays, keeps her job and buys a puppy. In other words, different good and bad things in life need to be integrated into a single scale.[[41]](#footnote-41) Yet it seems fairly difficult to make the relevant comparisons. Joseph Millum states that ‘crucially, we do not know the relative weight that should be given to each of these characteristics. For example, how important is simple sentience as compared with self-awareness?’.[[42]](#footnote-42) Perhaps we can isolate certain features of a life, for instance the length of the life or the health status of the person who lives the life. Accordingly, we might be able to maintain that a longer life is better than a shorter one, or that life in health is better than the same life where the person has a disease. Still, to make more complex comparisons, especially cardinal measurements, we need to assume comparability of fairly complex features of individual lives.[[43]](#footnote-43)

The second assumption of the cardinal comparative account is that bad things have a negative value.[[44]](#footnote-44) This seems intuitive enough; after all, pain, harms and losses are negatively evaluated. So why not assign them negative values? Yet, there are already problems with the simple valence of affect.[[45]](#footnote-45) Although pain is usually worse than pleasure, that does not seem to be true for all examples. Pain attended by significant others, or pain that is instrumental to achieve a thing of value, or desired pain, are all not necessarily negative, and they are most likely not worse than any conceivable pleasure, such as a warm bath.[[46]](#footnote-46) Accordingly, even simple sensations such as pleasure and pain are not clearly distinguishable in terms of valence. For purposes of measurement, they would need to be translated into a publicly available and intersubjective scale. The problems which come with this task had already been appreciated by Bentham, despite his reputation of inventing a simplistic hedonistic calculus.[[47]](#footnote-47)

What is more, we should not forget that the metric for cardinal comparison is our own making. Less charitably put, it is arbitrary. In order to indicate the relatively lower value of pain as opposed to pleasure, we might as well assign lower values, not negative values. For instance, we could say that a toothache is worth 5 units, whereas eating a piece of chocolate cake is worth 20 units. That would also allow to assign positive and even higher values for certain types of pain in comparison to pleasures, instead of the straightforward but controvertible allocation of negative values to bad things and positive values to good things. From the comparative account as such, in combination with assumptions about prudential value, we can merely infer that pain is normally worse than pleasure. Regarding more complex events, we can also legitimately assume, say, that winning the lottery is (other things being equal) better than losing a leg.

Still, to claim that bad things are of a negative numerical value seems to be justified by the assumption that there is a neutral level of wellbeing, relative to the good and bad things for us; some kind of indifference that is usually represented by the value of zero on a scale. This is sometimes illustrated by a state of unconsciousness[[48]](#footnote-48) or by “an empty life”.[[49]](#footnote-49) Ben Bradley similarly states: "When I am sitting in a chair and having no pleasant or painful experiences, I have a wellbeing level of zero".[[50]](#footnote-50) Since pain and losing a leg is worse than the neutral level, it seems legitimate to assign them negative numbers, after all. But, again, the neutral level could alternatively be set on a scale as, for instance, a point of 100 units of the metric of wellbeing – whichever is chosen for the purpose of introducing cardinal comparisons. The comparative account as such does not require a value of zero for representing a neutral level of wellbeing.

The third assumption is linearity of assigned values. Here, the idea is that values that can be put into a scale form a steady gradient, so that, for instance, five instances of toothache are five times as bad as one. In other words, the increase or decrease between intervals of numeric values is supposed to be constant, similar to metrics such as the usual temperature scales or distance measures. Again, this seems acceptable, at least as regards simple experiences, such as toothache. To allow for known deviations from linearity, for instance marginal utility, we can incorporate additional factors into our function. But how plausible is the assumption of linearity, really?

Take pain for instance. As Daniel Wodak rightly points out: ‘The spectrum from indifference to noticeable pain to agony is vast. To represent this by using numbers linearly would be a “cumbersome task”’.[[51]](#footnote-51) This is obviously an understatement, given the problem of identifying a single dimension of comparison for such diverse experiences. In addition, we might easily fall into the trap he calls the representational fallacy and consequently make false assumptions. We can easily forget that our values are fairly arbitrarily chosen numbers on a scale which we have assumed to be organised in a linear fashion. From these representational values we can then easily slide into unaccounted and potentially false assumptions, say, that 8 units of pain are twice as bad as 4 units, similarly to the false assumption that 30 degrees Celsius is twice as hot as 15 degrees Celsius.[[52]](#footnote-52)

In this section, we have started from the practical requirements of being able to make cardinal evaluations of situations involving the deaths of persons. We have seen that there are numerous assumptions involved that could potentially lead to false conclusions. In the next section of the paper, I will focus on one specific assumption that – to my mind – has particularly harmful consequences that are normally not appreciated: the representation of death by a zero level of prudential value.

1. *Zero level of prudential value*

Consider the following example that Derek Parfit introduces in his book *Reasons and Persons*. It’s a hypothetical case; he calls it ‘the Wretched Child’: ‘Some woman knows that, if she has a child, he will be so multiply diseased that his life will be worse than nothing. He will never develop, will live for only a few years, and will suffer pain that cannot be wholly relieved’.[[53]](#footnote-53) For Parfit, this is an example of a life that he calls ‘not worth living’. Although he says that ‘[t]his description can be ignored by those who believe that there could not be lives that are not worth living’,[[54]](#footnote-54) it is indeed hard to avoid such a notion if we assume that certain situations come with persistent negative values for human beings and, importantly, if we also assume that above the negative, accumulated value there is a better situation for the person, namely death, which is represented by a zero level of whatever the exact metric of assessment is. In other words, the notion of a life not worth living is a conclusion that follows from certain assumptions, especially the alleged negative numerical value of bad things in life and the alleged zero value of death. It is then easy to see how philosophers come to the conclusion that there are real (or potential) lives of human beings that are comparatively worse than death. With the relevant assumptions in place, it is but a small step to translate ‘worse than death’ to ‘not worth living’.[[55]](#footnote-55) In this section, I want to scrutinise the premise according to which death can be represented by a zero value.

To represent the event of death as a zero value is actually fairly common in the philosophical debate.[[56]](#footnote-56) Sometimes the assumption is made about the possible state of nonexistence, where this value is assigned during existence (to avoid assigning values to lives that will never come into existence). More importantly for our purposes, the zero value is also assigned to death. Christopher Belshaw expresses this idea most clearly: ‘Death brings our level of well-being down to zero. This is surely, in part, what is bad about it’.[[57]](#footnote-57) To assign a zero value of wellbeing (or another evaluative metric) to nonexistence allows additional comparative judgements that are not pertinent to our purposes, so I will ignore the difference between nonexistence and death.

One problem with the zero level is the possible confusion of a numerical value, zero, with the absence of anything that could be valued. Because there is nothing that could be valued in relation to death, it seems we cannot put death on our scale. David Heyd agrees: ‘[T]here is no way to compare the amount of suffering of states of actual people and the state of nonexistence of these people. We should resist the temptation of assigning a zero-value to nonexistence, thus making it quantitatively commensurable with either the positive or the negative net value of the lives of actual people’.[[58]](#footnote-58)

Still, it is important to appreciate that the problem we are facing here is not the same as the no-wellbeing-without-being problem discussed earlier. We have left the latter problem behind by introducing events or states of the world as the relevant features for comparison. The problem at this point is an axiological one. It concerns the specific value given to death, namely zero. The problem is that this is an unwarranted choice, based on the dubious assumption regarding negative and positive numerical levels of prudential value and the idea of identifying death with a level which is devoid of valuable events.

What is worse, it leads to ethically dubious conclusions, such as Parfit’s wretched life case. Here, the impersonal perspective is easily confused with a personal one. In fact, there is a clash between the theoretical claim that a specific type of life is not worth living with the real assessment of people who are in the suggested states.[[59]](#footnote-59) People who live allegedly wretched lives are often in reality leading happy lives to their own standards. To assign to them a life not worth living is a form of usurping their wellbeing. Of course, many will quickly respond that the lives they use as examples are far worse than lives with relatively common disabilities. In other words, they will say that wretched lives are extremely rare and usually lead to a very early death. But my point is a different one. It is not about the referents of the concept of a wretched life or a life worse than death, but the very concept itself. It is an ethically unwanted concept that is only made possible by dubious theoretical assumptions.

Although there are numerous purposes for discussing the comparative values of lives and deaths, there is no additional purpose served by introducing the notion of a life not worth living,[[60]](#footnote-60) or of ‘being better off dead’.[[61]](#footnote-61) It seems better to ‘eliminate’ or put to death the notion of a life not worth living, as Roberto Fumagalli has recently argued.[[62]](#footnote-62) I agree, although I would recommend restricting the elimination to the quantitative interpretation of the notion. It is indeed regrettable that the positive ideal of a life worth living, understood as an examined life, has been replaced by a reductionist conception focused on quantitative value. In this way, philosophy has replaced a traditional and valuable philosophical idea with a superfluous, contested and potentially harmful conception.

*Conclusion*

The problem whether death is bad for the person who dies has led to a considerable amount of philosophical debate. The most attractive position seems to be provided by a comparative version of the privation account. According to this view, death is bad because it deprives the dead person of the good things in life. The comparative account also allows for ordinal and cardinal evaluations of deaths, which can indeed be helpful in practical contexts, such as health care economics or population policies. Yet, such evaluations are helpful only if they are reliable and accurate, otherwise the help is illusory and may even lead to harm.

In order to determine *how bad* death is for a person, an abstract perspective is required, which does not sit well with the initial problem, because it leads to a perspective on death’s badness that is disconnected from the badness for a person. It also leads to the assumption that for some people death is actually not bad, independent of their own assessment of their lives. As we have seen, the common explanation of the grade of badness of death rests on numerous contested claims. Especially the comparability of different prudential values, their linearity, the negative numerical values of bad things and the zero value of death are dubious assumptions.

We cannot measure the badness of death for the person who dies. Indeed, this type of badness of death does not pose a quantitative question. Common philosophical explanations lead to a conclusion that is untenable: the idea that there are lives that are not worth living for reasons of lacking a sufficient amount of positive value to make them better than death. This idea should be rejected, as long as no better justifications of the underlying assumptions are available.[[63]](#footnote-63)

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