Suicide
by Shelly Kagan

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The Rationality of Suicide

In the last chapter I asked how the fact of our mortality should affect the way we live. I considered various possible suggestions, but there is one possible reaction that we have not yet considered: suicide. Mortality opens the door to ending one’s life.

Strictly speaking, I suppose, being mortal, per se, does not guarantee that suicide is an option. If we all lived exactly eighty years, for example, and could do nothing about it, we would still be mortal, but suicide would be impossible. Indeed, even if there was variability in how long we lived, as long as we could do nothing to alter the length of our life, suicide would remain impossible. So the possibility of suicide opens up only given the fact that we can control how long we live. But this is, in fact, one of the few things about death that we can indeed control: if I choose to, I can end my life earlier than it would otherwise end.

So the last question I want to explore about death is this: under what circumstances, if any, does suicide make sense? Under what circumstances, if any, is it an appropriate thing to do?

It is, of course, a fairly widespread feature of our culture that suicide is looked upon with such a mixture of disdain, fear, and disapproval that it’s very hard to discuss the topic calmly and clearly. Most people think that you’ve got to be crazy to kill yourself. Indeed, the very fact that you are contemplating suicide is evidence that you’re crazy. And if you’re not crazy,
then it shows that you’re immoral. Suicide, they say, is never the morally right thing to do.

So it’s easy to let our emotions get the better of us when thinking about this subject. Still, what I propose to do is to examine the issue systematically, carefully considering both sides of the question. And the very first thing to do, I think, in thinking about the topic of suicide, is to distinguish questions of rationality from questions of morality. I’m going to begin the discussion by focusing exclusively on the former, asking under what circumstances, if any, suicide would be the rational thing to do. Only later will we turn to questions about morality, asking when, if ever, suicide would be a morally legitimate or morally permissible thing to do.

In posing this distinction, I’m obviously presupposing that these questions can come apart, or at least that they need to be examined separately. There are questions about rationality, on the one hand, and questions of morality, on the other. To be sure, these are all questions about oughts, as we might put it. They’re evaluative questions. But at least most people are inclined to think that we are drawing on different evaluative standards when we raise the one set of questions, as opposed to when we raise the other.

In many cases, no doubt, rationality and morality go hand in hand. And there are philosophical views about the nature of rationality and the nature of morality according to which they always go hand in hand. But many of us are inclined to think that in principle, at least, they can indeed come apart. Take, for example, the possibility of cheating on your income taxes. The rate at which income tax returns get audited is very, very low, and the fines tend to be fairly modest, even if you do get caught. So from the point of view of rational self-interest, at least, the decision to cheat might well be a reasonable one. (You’re not likely to get caught, and even if you do, how bad is the fine anyway?) But even if we were to agree that it is rational to cheat, most of us would then immediately want to follow that remark up by pointing out that this doesn’t at all mean that it’s morally acceptable to cheat on your income tax. So perhaps that’s a case where you are morally required to do something (pay your full taxes) that you are not rationally required to do.

Of course, it might be a mistake to construe rationality quite that narrowly—as though rationality were simply a matter of doing what is in one’s rational self-interest and nothing more. Arguably, there can be reasons to perform a given act (or to refrain from performing a given act) that do not reduce to questions of what best benefits the agent. But that’s a complicated philosophical question that we need not try to settle here.
Instead, let’s simply stipulate, as we turn to the evaluation of suicide from the rational point of view, that we are going to restrict our attention to questions of rational self-interest, questions of what benefits or harms the person who is contemplating suicide. Even if there is more to rationality than simply doing what is best for oneself, it is plausible to think that normally, at least, considerations of self-interest are the most significant ones for determining the rationality of suicide. Accordingly, we can simplify our discussion by focusing on these considerations exclusively.

This means, however, that certain types of cases are simply going to be put aside. For example, we are not going to consider cases where your life is a valuable and satisfying one, but you kill yourself nonetheless so as to help promote a cause that you deeply support or to protect your friends or loved ones. Strictly, it seems to me, cases like this should also be counted as instances of suicide, albeit atypical ones; and a complete discussion of suicide would certainly need to consider such cases as well. But for simplicity I am going to put them aside, so as to focus on the more standard case where you kill yourself out of a concern for yourself—that is to say, because you feel that you would be better off dead. Restricting the discussion of the rationality of suicide to questions of rational self-interest may be simplifying somewhat, but doing this will allow us to focus on what I take to be the central and paradigmatic case.

So when, if ever, is suicide a rational decision to make? Here, too, the first thing I want to do is to distinguish between two different questions. The first question is going to be this: when, if ever, would it be true that you would be better off dead? Could it be the case that your life is going so badly that it would be better for you not to be alive at all? Suppose that the answer to the first question is that under such and such circumstances you would indeed be better off dead. That still leaves the second question: could it ever be rational for you to trust your judgment that this is one of those cases? Could it ever be rational for you to act on that judgment? Conceivably, the answer to this second question might be no. Indeed, even if it were true that you would be better off dead, perhaps it would never be rational to believe this and then act accordingly.

After all, it is conceivable that precisely in those circumstances in which life has gotten so horrible that you’d be better off dead, you can’t think clearly. And the very fact that you can’t think clearly would entail that you shouldn’t trust your judgment that you are, in fact, in one of those cases. Whether that’s a good argument or not is something we’ll have to turn to later. But it’s because of the possibility of an argument like that, that
I want to distinguish the first question (could it ever be true that you would be better off dead?) from the second (could it ever be reasonable for you to act on your judgment that you are actually in one of those situations?). We need to examine them separately. Unless both questions can be answered affirmatively, it doesn’t seem likely that it is ever going to be rational to commit suicide.

The very first question we have to ask, then, is whether it could ever be true that you would be better off dead. And immediately, there’s a kind of logical worry that may occur to you. It isn’t obvious that judgments along the lines of “Jones would be better off dead” even make sense!

After all, it seems that in order to make comparisons of this sort (“he would be better off—or worse off—if such and such were to happen”), you’ve got to be able to talk about what condition or state the person is *already* in (or is going to be in) and what condition or state the person *would* be in (if the change occurred). You’ve got to be able to describe the two alternative conditions or states and compare them—otherwise the comparison doesn’t even make sense. Call this the *two-state requirement*.

(Sometimes, of course, when we make comparisons, *neither* alternative is going to happen unless we first do something. But even here, it seems, we need to be able to compare the condition you would be in under the first alternative, with the condition you would be in under the second alternative. So the two-state requirement is relevant there, too.)

Normally, at any rate, when we make judgments about whether something would leave you better off or worse off, we satisfy the two-state requirement. Perhaps, for example, you’re trying to decide whether or not to lose some weight. You think to yourself, “Here’s how well off I am right now, being overweight, and that’s how well off I would be later, if I were to lose the weight.” You compare the two states and recognize that the second state is better than the first. That’s what makes it *true* that you would be better off losing the weight. And something similar happens when you decide whether to marry your girlfriend, quit your job, divorce your spouse, or move to the country. You compare the two relevant states and see which is better. That’s what allows us to say, “Yes, I’d be better off,” or “No, I would be worse off.” Indeed, it seems to be the very fact that there are two possible states to compare that makes it *true* that you would be better off or worse off, as the case may be.

But if I am contemplating suicide, and start talking about whether or not I would be better off dead, the two-state requirement doesn’t seem to be met. So how can the judgment that I would be better off dead possibly make
sense? Here I am now, in whatever particular condition I happen to be in (or will eventually be in), so we certainly can talk about that state. But if I try to describe the condition I would be in if I kill myself, something seems to go wrong. There is no such condition to describe at all. Nonexistence isn’t a state I will be in after I am dead; it’s not a condition. If death really is the end, if I really won’t exist after I am dead, then there is no state or condition that I will be in afterwards to describe! So there simply doesn’t seem to be a second state or condition of Shelly Kagan to compare to the first. And this means, of course, that the two-state requirement for making comparisons isn’t met.

The thought, in effect, is this. States and conditions presuppose existence. We can ask: Are you happy? Are you sad? Are you bored? Are you excited? All of those things presuppose your existence. Even sleeping is a state or condition you can be in, because you exist while you are asleep. But if I kill myself, I won’t exist. There is no second state to compare. So, how could we possibly say that I would be better off dead? For something like that to be true, there has to be a second state that we can compare to my actual state. And since there isn’t one—or so the argument goes—the judgment that I would be better off dead can’t even get off the ground. A comparison like that doesn’t make any sense.

Various philosophers have been attracted to this line of argument. But it seems to me that it must be mistaken.

Consider the sort of thing we wanted to say when we were discussing the deprivation account: dying would be bad for most of us because it would deprive us of the good things in life that we would get, if only we didn’t die then. That seemed like a natural thing to say. It seemed like an appropriate thing to say. But if we believe in the two-state requirement, then we need to object: how could we have said that? After all, to say that dying right now would be bad for me seems to come to the same thing as saying that I would be better off staying alive. And if we believe in the two-state requirement, then we need to say that this sort of judgment (that I am better off staying alive) only makes sense if there is some state I would be in were I to die that we can compare with the state that I would be in if I didn’t die. But of course, nonexistence isn’t a state, so the two-state requirement isn’t met. So I can’t say that I am better off staying alive. I can’t say that death would be bad for me.

That should give one pause. It would, I suppose, be one thing if the only implication of accepting the two-state requirement were that we couldn’t ever say that someone would be better off dead. Maybe we could
accept that implication. But it turns out that the two-state requirement also has the implication that we can’t even say that you are better off staying alive! And that’s very, very hard to believe.

Imagine some incredibly happy person with a wonderful life filled with whatever goods you think are worth having in life—love and accomplishment and knowledge and whatever it is. She’s walking across the street, and she’s about to get hit by a truck. And so, at some risk to yourself, you leap into the street, pushing her out of the way and saving her life. Happily, you don’t get hurt either. She looks up, realizes that she was this close to death, and she says, “Thank you. Thank you for saving my life.”

And now what you have to say is, “I’m afraid you’re rather confused. Because to thank me for saying your life is to presuppose I’ve benefited you in some way. To presuppose I’ve benefited you is to assume that it’s a good thing that your life has continued, that you are better off staying alive! But, you see, given the two-state requirement, we can’t say it’s a good thing that your life continued, because the two-state requirement says we can make that kind of remark only when there is a state that you would have been in had I let you die. But had you died, you wouldn’t have existed at all, and nonexistence is not a condition you would have been in. So you see, you are really rather philosophically confused in thinking that I’ve done you some sort of favor by saving your life.”

I can’t take that argument seriously. I hope you don’t either. Of course you are doing someone a favor when you save their life, given the assumption that their life has been and would continue to be wonderful. So what does that show? Certainly not that nonexistence really is a kind of spooky, super thin state or condition after all. No, nonexistence is nonexistence. It’s no kind of condition or state that I am in at all. What it shows, rather, is that the two-state requirement isn’t a genuine requirement on these sorts of evaluations. When we point to the person whose life you have saved, and say that you did her a favor, that she’s better off alive, we don’t have to be claiming that had she died she would have been in some inferior state. We simply have to be claiming that the life she will have (thanks to your having saved her) is a great life. Since it is (and will continue to be) good, to have lost it would have been bad. Since losing it would have been bad, saving her life is benefiting her. It is doing her a favor. If the two-state requirement says otherwise, then it is the two-state requirement that has to go.

But having gotten rid of it, we can, in principle, say something similar in the opposite case. Imagine someone whose life is horrible, full of pain and
suffering and misery. Whether there really could be such a person is a question that we’ll turn to in a moment. But if there were such a person, then we can say that for their life to continue isn’t good for them; it’s bad for them. Their life is full of misery and suffering and frustration and disappointment. And the longer the life goes on like that, the worse it is. To live a life of one hundred years, where every moment is torture and pain, is worse than to live a life of thirty years where every moment is torture and pain. So if you had such a person, for their life to go on longer would be bad for them. In which case, of course, having a shorter life would be better for them.

And that’s all we mean when we say they’d be better off dead. We’re not claiming that there is some spooky super thin and hard-to-describe condition that they’d be in if they were dead. We are simply comparing the two different lives that they could have. Think again about the person with the wonderful life who you save. We compare the life with ninety wonderful years to the life she would have if it ended after a mere thirty years, and we immediately see that the first life is better. So saving her life is a good thing for her. Similarly, when thinking about someone with a miserable life, we compare the long life of misery with a shorter life of misery, and we see that the long life of misery is a worse life to have than the shorter life. That being the case, we simply say that he would be better off dead. It is not that, were he dead, he would be in some condition that is a good one, or a better one than being alive. It is simply that were he dead he would avoid this miserable condition, which is clearly a bad one. That’s all it takes for it to be true that he would be better off dead. If the two-state requirement says otherwise, so much the worse for the two-state requirement.

Of course, this doesn’t yet tell us whether it could, in fact, be the case that somebody’s life is so bad that they’d be better off dead, whether a life could indeed be worse than not existing at all. All we’ve done so far is open the door to the possibility of saying that coherently. But that doesn’t mean it’s ever true. Whether there could be such lives depends on your view about the correct account of well-being, what makes someone’s life worthwhile. And as we have seen, this is a controversial topic. People disagree about the ingredients of the best kind of life. Given these differences, we’re going to get philosophical differences of opinion with regard to whether or not a life could be so bad that it would be better for it to come to an end.

Suppose, for example, that you accept hedonism, according to which the quality of life is a matter of adding up all the pleasure and subtracting all the pain. Since the question we are asking is whether it would be better for me to have my life end now, what we want to know is whether the life I
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would have from here on out (that is, if I don’t die now) would be good on the whole, or bad. So we add up the total amount of pleasure I would have, and we add up the total amount of pain—taking intensity and duration into account for both calculations—subtract the pain from the pleasure, and look to see what the grand total is. If it’s positive, your life is worth continuing. And the greater the positive number, the more your life is worth continuing.

If it’s negative, though, if the life you would have from here on out would be filled with sufficient pain and suffering to outweigh whatever pleasures you would have, then your life is not worth continuing. If it has a negative balance, then that’s a life that it is bad for you to have, and you would be better off not having it. You would be better off dead. That, at any rate, is the verdict of hedonism.

Of course, if we are not hedonists we’ll accept a more complicated theory of well-being. So when doing the calculations we will need to take into account other things besides pleasure and pain. In evaluating what your life would be like from here on out, we will need to take into account not just what your mental states would be like, but also what your life would be like in terms of the various relevant external goods and bads. For example, will you continue to accomplish things with your life, or will you be frustrated and crippled, unable to achieve your significant aims? Will you continue to have friendships and other loving relationships, or will others neglect you, abuse you, or abandon you? Will you continue to learn and know about your place in the universe, or will your future life be one of ignorance and illusion? I won’t try here to settle the exact list of external goods and bads. Whatever the list might be, we’re going to want to somehow add up all the various goods and bads—internal and external—and see where the balance lies. If it is positive, if the goods will outweigh the bads from here on out, then your life is worth continuing—you are better off alive. But if the balance is negative, if the bad will outweigh the good, then your life is not worth continuing. You are better off dead.

It is important to notice, however, that all of our calculations so far have been concerned solely with determining the value of the contents of a life (from here on out). On some views, of course, that’s enough. If you accept a neutral container theory—where life has no value in and of itself, and the only thing that matters is the contents of the life—then our calculations are complete once we have determined whether your life would contain more good than bad. But the requisite calculations will be more complicated still if you accept a valuable container theory, according to which the
very fact that you are alive is a good thing, in and of itself. On a view like this, after we have calculated the value of the contents of the future life that you would have, we also have to add an appropriate additional (positive) amount, so as to reflect the additional value arising from the sheer fact that you would be alive. How much will we need to add? That will depend on the particular version of the valuable container theory. But the point, of course, is that even if the contents of your life would be negative overall from here on out, it might still be the case that you are better off alive, since the grand balance (once we have added the additional value of life per se) might still be positive. It is only if the overall balance—the value of the contents plus the value of life per se—is negative, that we can correctly say that you would be better off dead.

Can this happen? Can someone’s grand balance be negative? According to those who accept modest container theories, it might. In principle, at least, the positive value of being alive could be outweighed if the contents would be bad enough. But according to those who accept fantastic container theories, it cannot. On views of this sort, the value of being alive is so tremendous that it doesn’t matter how bad the contents get (from here on out)—the grand total will always be a positive one. Thus it will never be true that somebody could be better off dead. Pretty clearly, then, from the perspective of fantastic container theories, suicide will never be rational, because it is never true that it would be better for you to have a shorter life rather than a longer one.

Most of us, I imagine, find the fantastic container theory implausible; we believe in either the neutral container theory or a modest container theory. Either way, then, if the contents of a life are bad enough, this can result in the life having a negative value overall. And if the contents of the life you would have from here on out are sufficiently negative, then it might well be true that you would be better off dead.

Of course, at this point optimists will insist that in point of fact no one’s life ever is so bad that they would indeed be better off dead. And pessimists will insist that everyone’s life is bad enough that they would be better off dead. But I imagine that the commonsense view is that neither of these extremes is correct. Some lives are so full of suffering, inability, misery, and failure—or, at least, they will be—that these people would indeed be better off dead. But not all lives are like this. It depends on the facts of the individual case.

I share this moderate perspective. As far as I can see, it’s just not true that everyone has a life that is and will continue to be worse than nothing.
But neither is it true that everyone has a life that is and will continue to be *better* than nothing. Horribly enough, there are cases where things are going to be so bad from here on out that this simply outweighs whatever value there might be in being alive per se.

We might, for example, imagine someone in the late stages of a debilitating (and eventually fatal) illness. Perhaps his cancer is causing him a great deal of pain—so much pain, in fact, that he really can't do much of anything other than suffer. It isn't as though he can work on his novel, or tend his garden, enjoy poetry, or even, for that matter, enjoy the company of other members of his family. He is just distracted by the pain, overcome by the pain, wishing the pain would come to an end. Or perhaps he has a degenerative disease which is progressively leaving him less and less capable of doing the things that give life value, less and less capable of taking care of himself in even the most basic of ways. (Indeed, the very realization that he is in that situation and no longer able to do much of anything may itself be a source of significant pain, misery, and frustration.)

Obviously, I wouldn't want to claim that lives like these become not worth living at the very onset of the disease, or as soon as the illness begins to take any kind of toll at all. And for that matter, I also don't want to claim that for every disease that will eventually prove fatal there must come a point at which you would be better off dead. But in at least some such cases, it seems to me, the patient does reach such a moment. Horribly enough, in some cases the future holds an ever worsening balance of pain, suffering, incapacity, and misery. So as your condition becomes worse and worse, you may well reach a point at which it is truly the case that you would be better off dead.

Taking this point as given—that in at least some cases, at some point, one would be better off dead—let me now try to say something a bit more precise about when suicide would make sense. Once again, I think it may be helpful to illustrate the main ideas with graphs that show how well-being varies over time. In Figure 15.1, as well as in the other graphs in this chapter, the X axis represents time, with later times shown further to the right. The Y axis represents how good or bad it is to be alive at a given time. (The higher up the Y axis, the better the life; the lower down the Y axis, the worse the life.) Points below the X axis are sufficiently bad that one would (if it continued like that) be better off dead. Note, incidentally, that the Y coordinate is intended to represent the *overall* value of the life; it represents not merely the value of the *contents* of the life, but rather the value of the contents plus the extra value, if any, that one gets from being alive per se. Thus, regardless of whether you accept a neutral container theory or a valuable
container theory, the Y coordinate represents the overall bottom line: how good (or bad) it is to be alive at that time.\textsuperscript{1}

![Diagram of Good vs. Bad over Time]

Fig. 15.1

Figure 15.1 is an example of what a life might look like. It’s going along pretty well and then, starting at point A, things get worse. (Perhaps you get ill at point A, or your disease begins to show symptoms.) The quality of life begins to deteriorate. Point D, at the far right end of the line, represents the moment when you will die of natural causes. Thus, the line represents how your life will go. Or rather, somewhat more precisely, it represents how your life will go if you do not kill yourself somewhere along the way.

Our question, of course, is whether it would be rational to kill yourself, whether suicide would make sense in a case like this. And it is pretty clear that the answer is no. Admittedly, toward the end of the life, things are not as good as they were when you were young and healthy and vigorous, and had all sorts of opportunities and accomplishments. But still, up till the very end, the value of your life remains positive (it is always above the X axis). Things never become so bad that you would be better off dead. So suicide doesn’t make any sense.

In particular, then, it would be a mistake to point to A and say that this is the moment when suicide first becomes reasonable since that marks the moment when things start to get worse. Yes, after point A the value of your life is lower, and eventually it is significantly lower, but it is never so bad that you would be better off dead. With a life like this, it always remains the case that more is better. So suicide wouldn’t make any sense at all.

For suicide to make sense, it’s got to be the case that your life takes such a dramatic turn for the worse that for some stretch of your life the line
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goes below the X axis. There has to be some period of your life where we can truly say that your life is worse than nonexistence. In short, for suicide to make sense there has to come a time when you would be better off dead! And we simply don’t have that in Figure 15.1.

But we do in Figure 15.2. In Figure 15.2 you start out, again, healthy, vigorous, and successful. But you’ve got some degenerative disease (let’s suppose) that is going to make things worse and worse for you. Once again, point A marks the moment when the overall value of your life begins to decline. But this time around, things get sufficiently bad so that, starting at point C, your existence is going to be worse than nothing. D again marks the point at which you will die from natural causes—your disease—unless you kill yourself first. And what we are struck by, in looking at Figure 15.2, is the realization that here there is a period in which it is true that you would be better off dead. From C to D you are not better off staying alive. Rather, you would be better off dying sooner rather than later.

![Fig. 15.2](image-url)

In this case, then, it seems that we can reasonably broach the question of suicide. Here, it seems, it might well be rational to think about ending your life.

There is, however, a crucial qualification that must be made explicit. Suppose that there is some cure for your disease that is available, or at the very least there is a treatment that would significantly improve the quality of your life. Imagine that if only you were willing to be treated, the line would never dip below the X axis at all! And yet, foolishly, and without any good reason, you simply refuse to get the relevant treatment. In such a case,
obviously enough, suicide is not a reasonable course of action. Even though it would be true, after point C, that you would be better off dead, nonetheless in a case like this what you have reason to do is to *improve* the quality of your life—not end it!

Accordingly, in discussing this case (and, for that matter, our other cases as well), we need to assume that there is *no* further suitable treatment available. We need to assume that you will indeed readily avail yourself of appropriate ways of improving the quality of your life. Thus the line shown cannot be improved upon. If it dips down, there is no reasonable course of action available to you that would make things better. The only way to avoid a life worse than nothing is to end it.

If this is the way we understand the example shown in Figure 15.2, then it does seem that suicide may well be a rational choice. From point C on, you would be better off dead. Suicide allows you to avoid that.

But at what point does suicide become a rational choice? Not at point A. Admittedly, from A on there is a downturn, and things begin to get worse. But life doesn’t become worse than nonexistence until point C. And what this means, of course, is that there is a period of time *between* A and C—whether it is six months, a year, or five years—where even though it is true that life isn’t as good as it had been earlier (before A), it remains better than nothing. So killing yourself at point A (let alone at any earlier moment) would be premature. It is throwing away a “chunk” of life that would still be worth having.

Instead, the relevant time for ending your life seems to be point C. That marks the precise moment when life becomes worse than nothing. Up until that moment, after all, your life was worth living; after that moment, it isn’t. To be sure, for some initial stretch after C life won’t be *very* much worse than nothing. Nonetheless, from C onward the overall value of your life is and remains negative: you are better off dead. So if you have complete control over when to kill yourself, it is clear that C would be the time to do it.

Suppose, however, that you *don’t* have complete control. Imagine that your degenerative disease is going to progressively strip you of the ability to control your body, but your mind will be in perfect working order for a much longer time. So there may come a period of time in which you will be confined to your hospital bed, unable to take care of yourself, unable to even feed yourself. But even though you can’t use your arms, you will still be able to listen to your family as they tell you the news; you will still be able to enjoy reading, or listening to music, or conversing with friends. During
this time your life certainly might still be worth living—though we can imagine that the time is eventually going to come when your life won’t be worth living. Suppose, however, that at that later point you will no longer have the ability to kill yourself, because you won’t have the relevant ability to control your body.

As I am sure you can see, the question of suicide here turns into the question of euthanasia, mercy killing. Under what circumstances, we might ask, is it ever rational to ask someone to kill you? Under what circumstances, if ever, is it morally legitimate to kill somebody else?

But let’s continue to focus on the case of suicide itself. Suppose you live in a society that is so unenlightened as to have ruled out euthanasia. In fact, you live in our society. And so you cannot plan on having someone end your life when the appropriate time comes. Your situation, rather, is this. You know that at a certain point in the future—C—it will be true of you that you would be better off dead. But once you are at that point, sadly, it will be too late: you won’t have the ability to kill yourself, and nobody else will be able to do it for you. In a case like this, I think, killing yourself earlier than C might well make sense.

Consider point B. Suppose that B is the last moment at which you are still able to kill yourself. Should you do it? Admittedly, if you do, you will be throwing away some life that is worth living: the period between B and C. But if, as we are assuming, you will be unable to kill yourself after B, then it still might make sense, rationally, to do it at B. After all, you don’t really have the choice of ending your life at C. Instead, your choice comes down to this: you can end your life at B, and thus throw away the entire last bit (B to D), or you can not end it then, and continue on until you die from the disease at D.

So the question you need to ask yourself is, what is the overall value of that last bit—from B to D? Obviously enough, it’s got a good part (B to C) and a bad part (C to D). Is it better to have both the good part and the bad part, or is it better to have neither? And the answer, roughly, is that if the bad part is going to continue on long enough (and be bad enough), then it is better to have neither than to have both. The bad will outweigh the good. That is, in fact, what we have in the case as I have drawn it. So in this case, at least, the rational thing to do would be to decide to end your life at a point like B, while you still can, rather than to condemn yourself to the long final stretch of life not worth living.

But what if the last time that you are able to kill yourself is well before B? Indeed, what if it is way before A—all the way back at Q? Imagine that,
for whatever reason, you have access to the means to kill yourself back at Q, but you won't have access later. Would suicide still make sense? Notice that your life is going to have tremendous value for a very long time after Q. Of course, as we also know, it will eventually have a bad period (C to D) as well. So here too you face a choice between having a good part and a bad part, or having neither. But this time the good part is significantly greater than the bad part. So even though it is true that unless you kill yourself at Q you are condemning yourself to the entire future that I’ve drawn, including the bad finish, nonetheless, killing yourself at Q simply doesn’t make sense.

Here’s a rather different way things might go. Suppose your life is going along really well, but then it is going to take a drastic turn for the worse. Eventually, however, it is going to get better. Would suicide make sense here? In Figure 15.3, life becomes worse than nothing for a while, but you recover; unless you kill yourself, you’re going to return to a life that’s worth having. Indeed, the final stage of your life is well worth having. Here, then, the crucial point to notice is that even though for a while your life will be worse than nothing, that doesn’t actually suffice to establish that it ever makes sense to kill yourself. For if you do kill yourself—for example, at point A—although you avoid the bit below the X axis (A to B), doing this also throws away the large final part (B to D) where your life returns to being better than nothing. This has to be taken into account when deciding whether suicide makes sense.

Think of this life as potentially having three stages or three acts. In the first act (up to point A) life is clearly worth living, in the second act (A to B)
it is worse than nothing, and in the third act (B to D) it is worth living once again. Ideally, you would like to have act one and act three without having to live through act two. But of course you don’t have this choice. You must either take both act three and act two (along with act one) or do without either (and have act one alone). And given that the value of the positive third act is as great as it is, it makes sense to suffer through the negative second act in order to get it. So even though your life will be worse than nothing for some stretch, suicide wouldn’t be a rational decision.

Note, however, that this argument makes essential use of the fact that the positive value of the third act is sufficiently great (it lasts long enough, and at a high enough level) that it outweighs the negative value of the second act. That is certainly true in Figure 15.3, but it is easy to imagine a variant of this graph where that isn’t in fact the case.

In Figure 15.4, although you can still recover from the second act (where life is not worth living), and go on to have a third act (where life is once again worth having), nonetheless the positive value of act three isn’t great enough to outweigh act two. There is indeed a recovery, but it is too short and at too low a level to outweigh the bad of the second act. Thus, if you are contemplating killing yourself at point A, this might well be a rational decision.

Of course, here too the rationality of suicide depends on when it can be done. Suicide at point A may well be rational—given that it allows you to completely avoid act two. But it is a different matter altogether if what is
Suicide under consideration is suicide at point C. At C, obviously enough, the fact that you’ve gone through act two is now history. There’s nothing you can do about it. To be sure, you’ve had an utterly horrible period of your life. But now it’s over. Your question is not, should you avoid act two? It’s too late for that. You are simply asking yourself what you should do about act three. Yet act three is worth living; throwing it away makes no sense. So suicide at point C wouldn’t be rational, even though it would have been rational earlier, at point A. More complicatedly, suicide may well be rational even after A—during act two—provided that what remains of the second act is bad enough to outweigh the good of act three. Nonetheless, at a late enough stage of the second act—such as, for example, point B—suicide will no longer be rational, since what remains of act two won’t be great enough to outweigh act three.

Consider an accident victim who suffers horrible burns over large parts of his body and has to go through a very long period of treatment, immobilized and in a great deal of pain, while his nerves and skin regenerate. Such a person might well believe that he will eventually recover and go on to have a life worth living. And yet, for all that, during his treatment he might also believe—and believe correctly—that what he will have to go through to reach that final stage will be so horrible that it isn’t worth it. He might well insist that he would be better off dead.

Imagine that this patient is physically unable to kill himself. He asks others to do it, but they refuse. So he undergoes years of incredibly painful medical treatment and eventually reaches the stage at which he has recovered sufficiently so that he can now have a life worth living. Finally, he is released.

This person might well acknowledge that his life is now once again worth living. And since it is worth living, suicide—now that he is physically able to do it—no longer makes sense. And yet, for all that, he might still insist—and insist correctly—that it would have been better for him to have died earlier, before being forced to undergo the years of pain and suffering. Had he been able to kill himself earlier, it would have been rational for him to do that.

So there are cases, I think, where suicide may well make sense, rationally speaking. At least, it makes sense given our assumption that you are thinking clearly, and able to objectively assess your situation, so that you can correctly appraise the future that continued life holds out for you. I do, however, want to emphasize a point I made earlier—that suicide only makes sense from the standpoint of rational self-interest if at some point your life
will be sufficiently bad that you would in fact be better off dead. For I have no doubt at all that in many actual cases of suicide, this crucial condition is not, in fact, met.

The point to remember is this: even if your situation deteriorates—and, indeed, even if your situation will never improve—that still doesn’t make suicide rational. The question is not are you worse off than you were before, nor is it are you worse off than you might have been. The question is, rather, will you be so badly off that you are better off dead? And the truth of the matter is, if the earlier part of your life is sufficiently good then there is a great deal of room for things to get worse, while still ending up at a level that is better than nothing. In such a case, suicide is not rational at all.

![Diagram of Good vs. Bad over Time]

In Figure 15.5, for example, suicide simply does not make sense. Even though the life you will have after point A is worse than the life you had before—and even though the life you will have after point B is significantly worse than the life you had before—at no point does the line ever dip below the X axis. By hypothesis, this is still a life worth living. Suicide is unjustified.

It is easy to lose sight of this point. After all, from A on you are sliding further and further down. Sometimes all that you can see is the fact that your life is getting worse and worse. So it is natural to find yourself thinking, “I am better off dead.” But in Figure 15.5, at least, that’s a mistake. You aren’t better off dead.

Many cases of suicide, I am sure, find their origin in a mistake of this sort. Your girlfriend has left you. You’ve lost your job. You didn’t get into law school. You’ve been in an accident and will have to spend the rest of
your life in a wheelchair. You’ve been through an ugly divorce. So you compare your life to the way it was, or to the way you dreamed it would be, or to the way that others around you are living, and you conclude that your life is not worth having. But frequently enough, that’s just not the case. Even though your life is less worth living than you had hoped it would be, it is still better than nothing.

Indeed, I imagine that for many people contemplating suicide, a more accurate graph might look like Figure 15.6. Things take a temporary turn for the worse—and from down in the middle of the dip you just don’t see that if you can just hold on, things will eventually get better. In cases like this, obviously enough, suicide would be a horrible mistake.

![Fig. 15.6](image)

Nonetheless, it does seem to me that there are cases in which the line really does cut below the X axis and remains there for a sufficiently long time (perhaps staying there until the very end), so that it really is true that the person would be better off dead. It is terrible that such cases ever arise, but given that they do, it seems to me plausible to say that if only the person could recognize the facts and know for a certainty that this is what their life would be like, suicide would, at certain times, be rational.

Of course, I have been deliberately bracketing the question of whether you could ever reasonably judge that you are in this situation. Someone who believes that suicide is never rationally justified might well agree that suicide would be reasonable if you could know you would be better off dying now, but in fact you never can know this. Perhaps suicide would be rational in certain cases if you had a crystal ball. But you don’t, and you never will.
It is, after all, easy enough for me to draw my various lines and confidently assert that given what the future holds in this case or that case, suicide makes sense. But in real life we never have the guarantee that this is, in fact, the way things are going to go. So the question we need to turn to next is whether it could ever be rational for you to judge that your own situation is one in which you would be better off dead, and whether it could ever be rational for you to act on that judgment.

It will probably be helpful to think about this question in two stages. First, let's ask what we should say if you were thinking clearly. After that we can take into account the possibility that your thinking may be clouded. After all, it is reasonable to worry that in the type of cases where suicide might otherwise be rationally warranted, it is going to be so stressful that nobody in those circumstances can think clearly. And so, even if it were true that you might reasonably decide to commit suicide if only you were thinking clearly, perhaps nobody ever does think clearly in those situations, and so no one should trust their own judgment that they would be better off dead.

We can come back to that worry about cloudy thinking in a moment. First, though, let's suppose that you can think clearly about your situation. Perhaps you've got some sort of painful disease, but the disease is not painful constantly. There are periods in which the pain comes to an end, brief periods in which you're able to assess your situation and weigh up the facts. Could it ever be rational in a situation like that to decide to kill yourself? Perhaps we would agree that if you had a crystal ball, and knew for a certainty that you would never recover, it would be rational to commit suicide. But as I have already noted, you don't have a crystal ball. What should we say in light of that fact?

Those who deny the rationality of suicide might insist that since you never know for sure that you won't recover, suicide never makes sense. After all, we all know that medicine is constantly making advances. Researchers are always making breakthroughs. What seems like an incurable disease one day may have some sort of cure the next. But if you kill yourself, you throw away any chance of getting that cure. What's more, diseases sometimes simply have miraculous remissions. You might just get better spontaneously. That's always a possibility, too. It doesn't happen very often, but it does happen now and then. And so, here too, if you've killed yourself, you've thrown away any chance of recovery.

Some will argue that given that there's a chance, however small, of recovery—whether through medical progress or just some sort of medical
suicide simply doesn’t make any sense. It’s not a rational choice. But I think that this position has got to be mistaken.

It is, of course, true that we don’t have a crystal ball, and so in deciding whether to kill yourself, what you are doing is playing the odds. You are gambling. But gambling in this sense is something we do all the time. Indeed, there is no getting away from the need to take chances. The necessity of making decisions in the face of uncertainty is simply one of the facts of life. And if somebody suggests that given this uncertainty it never makes sense to throw away the small chance of recovery, then I can only answer that this position doesn’t seem to accord with the principles that we would normally use in deciding how to make a decision.

Imagine you are in a kind of twisted game show. You are in a room with two doors. And you have to decide which one to go through. Suppose that if you go through door number one it is virtually guaranteed that what will happen is that you will be kidnapped, and your kidnappers will then torture you for a week, after which you will be released. As I say, it is virtually certain that this is what will happen: it is 90% certain, 99% certain, perhaps 99.9% certain.

There is, however, a small chance that you won’t be kidnapped and tortured. Instead, you might be whisked away to a wonderful tropical vacation, where you will have a fantastic time for a week and then be sent home. Admittedly, it’s not very likely, but it isn’t impossible. Perhaps the chances are 1 in 1,000. Or 1 in 10,000. Maybe less.

So if you go through door number one, you have a 99.9% chance or a 99.99% chance of being tortured for a week, and a 0.1% or a 0.01% chance of having a wonderful vacation.

On the other hand, if you go through door number two, it is 100% guaranteed that the following is going to happen: you will immediately fall asleep, and you will remain in a deep, dreamless state for the entire week, at which point you’ll wake up.

What should you do? Which door should you pick? Notice that this choice isn’t quite the same as simply choosing between being tortured and sleeping. For if you choose the first door, you can’t quite be certain that you will be tortured. I suppose we would all agree that if we had to choose between the certainty of being tortured and the certainty of sleeping, the rational thing to do would be to choose the second door, and fall asleep. Dreamless sleep has no intrinsic value in and of itself, but on the other hand there is nothing particularly negative about it either. I suppose that if we
were going to slap a number on it, we would give it a zero. But torture is clearly a negative. And a week of torture is obviously a very large negative. So if it was a choice between the certainty of torture and the certainty of sleep, we would all agree that you should pick dreamless sleep for a week. Given certainty, the rational choice is the second door.

But of course, it isn’t certain that you will be tortured if you go through the first door. It is just very, very likely. So imagine someone saying that in light of this uncertainty the rational choice is actually to choose the first door. “Go for the gold!” they insist. “Sure, it is overwhelmingly likely that you will end up being tortured if you pick the first door. But there is, after all, a very small chance that you will get a wonderful vacation! In contrast, if you pick door number two, you are throwing that chance away. Because of this, the only rational decision is to pick the first door—holding out for the chance, no matter how small, of getting that fantastic vacation. No other decision would be rational.”

If anybody were to say that, I’d laugh at them. Admittedly, if you tweak the case, the rational choice might depend on the details. (What if the “torture” is actually no more severe than a bad paper cut? What if the odds of winning the vacation are actually somewhat higher than 1 in 1,000?) But in the case as I have described it, there is an overwhelming likelihood of genuine torture and only a desperately small chance of winning the vacation. And if anyone were to say of that choice that the only rational decision is to hold out for the chance of the vacation, I would have to say that they are simply mistaken. You are not rationally required to disregard the odds and pick the first door.

Am I cheating in spelling out the example this way? I am hoping that you will agree with me that suicide may be a rational choice if the chance of recovery is small enough (and what you face otherwise is bad enough). Just as it may be rational to choose sleep so as to avoid torture—even though this throws away any chance of a vacation—it may be rational to choose death so as to avoid a life of pain and suffering, even though this throws away your only chance of recovering a life worth living. But perhaps the analogy is a flawed one. After all, I deliberately framed the example in terms of a choice between being tortured for a week and being asleep for a week. But death doesn’t merely last a week; death is forever. If you kill yourself, you throw away the only chance you will ever have of having a life worth living. In contrast, if you refuse to go through the first door, you only throw away the chance of going on vacation this week! There will be other chances in the future.
So let’s change the example. Suppose that instead of everything lasting only a week, each outcome—sleep, torture, or vacation—will last the rest of your life! Thus if you go through the first door there is a 99% or a 99.9% chance that you will be tortured for years, perhaps decades, until you die. And there is a 1% or 0.1% chance that you will be whisked away to a wonderful vacation that will also last for years or decades, until you die. But if you go through the second door, you will immediately fall into a deep, dreamless sleep, from which you will never awaken. You will stay in that dreamless sleep until you die of natural causes, years or decades later.

Now imagine that someone comes along and insists that the only rational decision to make in this case is to go through the first door. After all, they point out, if you choose the second door, you are throwing away the only chance you will ever have of gaining the wonderful experiences you would have if you win the vacation. In light of this, they insist, the only rational decision is to choose the first door, despite the fact that you will probably end up being tortured for the rest of your life.

That still seems to me to be wrong. Even when I think about the modified example, where you are throwing away your only chance of ever getting the vacation, it still seems to me that choosing the second door is a perfectly rational choice. It is, after all, overwhelmingly likely that if you choose the first door you will end up being tortured for the rest of your life. And we are assuming that this is genuine torture we are talking about: the pain and suffering will be great enough that it will indeed be the case that you would be better off dead, rather than having it continue. But continue it will, for months, years, or decades. Given all of this, it seems to me clear that it might well be rational to prefer the dreamless sleep—even though this throws away the only chance you will ever have for the vacation. If the torture is great enough, and the chance of winning the vacation slight enough, choosing the second door may well be a rational choice. It just isn’t right to say that the only rational choice is door number one.

Mind you, I am not claiming that one must choose the second door. While I have some sympathy for this position, that’s a bolder view than the one I am trying to defend here. All I am saying is that choosing the second door is a perfectly reasonable decision. It is rationally acceptable. If anyone says otherwise, it seems to me that they are wrong.

Similarly, then, when it comes to choosing suicide, if the life you would otherwise have is overwhelmingly likely to be one that is not worth living, suicide may well be a rationally acceptable choice as well. To be sure,
if you do kill yourself, you throw away forever any chance of recovery. That’s an important point, one worth thinking about. But it is also important to think realistically about the likelihood of recovery, and just how badly off you will be if your life continues in the way that it most likely will. In short, it seems to me that there are cases in which suicide would be a rational choice—or at least, it would be rational given the assumption that you are able to think clearly about your situation.

But that still leaves us with the question, can one really think clearly about these issues if one is in the middle of the sort of situation that we have been talking about? Even if we grant, for the sake of argument, that there could be cases in which a person’s life is so bad that unless they recover dramatically and unexpectedly they would be better off dead, and even if we grant that if only they could think clearly about their situation, suicide would be a rational or reasonable choice—still, isn’t it plausible to think that in real life, people just can’t think objectively and reliably about their situation, precisely when they are in situations like that?

Look, it is one thing for me to be writing calmly about these issues as I sit in my office, healthy and comfortable, with a life very much worth living. Similarly, I certainly hope that you too have a life worth living, so that you too are able to consider these questions in a calm, clear-headed, and objective fashion. But things are going to be quite different for anyone who actually must face these questions as something more than philosophically interesting possibilities! Think about it. What would have to be true of you for your life to be so bad that suicide might be a rational choice, so bad that you would be better off dead? The odds are that you would have to be in a tremendous amount of physical pain, a great deal of physical pain. Beyond that, it would probably also have to be the case that you were incapacitated in a large number of ways. You would probably have to be bedridden, unable to accomplish anything, unable to read novels, unable to enjoy discussions with your friends, unable even to enjoy television. (A life watching television may not be as fantastic as the life that you are able to have, but it still might be better than nothing.)

To imagine a life this bad, we have to imagine a life with so much pain and physical disability that the amount of emotional distress is simply going to be overwhelming. But precisely because it would be overwhelming, we have to ask: how could anybody think clearly in a situation like that? Yet if you can’t think clearly, how can you rationally trust any judgment you might make that you are in fact in a situation where suicide is indeed a reasonable choice?
To be sure, you might *believe* that you would be better off dead. But should you trust your own opinion on the matter? Probably not! The odds are, after all, that your own thinking on the subject is clouded by your pain, suffering, and emotional distress! Indeed—the argument goes—anyone for whom it is *true* that they would be better off dead would have to be in so much pain and distress that they simply wouldn’t be able to think clearly about their own situation. But if they aren’t able to think clearly, their judgment on the matter isn’t trustworthy. And if their judgment isn’t trustworthy, they shouldn’t trust it! And so, it seems, suicide could never turn out to be a rational decision after all.

That’s certainly an interesting argument; it’s an argument worth taking seriously. For it does seem as though we should be more skeptical about decisions made when we are in a lot of pain or under a great deal of stress. But even here, I’m not convinced. To evaluate this line of thought properly we need to ask, is it *always* unreasonable to trust the decisions you make when your thinking is potentially clouded by pain and stress?

Suppose you’ve got some medical condition that causes you a great deal of pain and has severely limited your physical abilities. But as it happens, there is a surgical procedure that can be done, and the surgical procedure is almost always successful—leaving the patient pain free and able to return to their previous life. It is almost always successful, but not always.

What are your choices? One option is to have the surgery. Surgery almost always works. In 99% of the cases, 99.9%, 99.99% of the cases, it works. Of course, like all surgery, there are risks. Sometimes, after one puts this sort of patient under general anesthesia, the patient doesn’t wake up. It doesn’t happen very often, maybe once every 1,000 operations, or once every 10,000 or 100,000 operations. Still, there is some chance the surgery won’t work, some chance that you will die on the operating table. But it is a very, very small chance. It is overwhelmingly likely that the surgery will succeed. And if it does succeed, your recovery will be complete. That’s option number one.

Your second option, of course, is to refuse the surgery and continue in your current state, suffering and incapacitated, unable to lead a rewarding life. That, at any rate, is the most likely outcome of refusing surgery. But sometimes—not often, but sometimes—the condition clears up spontaneously, even without surgery. This is, of course, extremely rare. Perhaps one patient in 1,000 has the condition clear up on its own, or one in 10,000. But in 999 out of 1,000 cases or 9,999 out of 10,000 cases, if surgery is refused
the condition just continues without improvement until the patient dies some years down the road.

So there’s your choice: should you have surgery or not? And I imagine that what we all think is that of course you should have the surgery. You’d be a fool not to have the surgery. It is, after all, overwhelmingly likely that it will cure you! So let us suppose that this is, indeed, the decision that you reach.

But now we worry. Wait a minute. Can you trust that judgment? The condition you are in is so stressful, and so painful, that you are obviously very emotionally worked up. Any judgment that you make—that it’s reasonable to have this surgery—is a judgment that you’re making while under a cloud of pain and emotional distress. How could you possibly trust that judgment? And so, someone might argue, you shouldn’t trust the judgment. It would never be rational to agree to the surgery in this situation.

But that can’t be right. Surely we agree that it could be reasonable to trust your judgment in this situation. Now, to be sure, the fact that you are in all of this pain should make you pause, it should make you hesitate, it should make you think twice, and then think again, before deciding what to do. But still, if somebody says that since you are so worked up, it could never be rational to decide to have the surgery—that just seems to be going too far. After all, you’ve got to make some kind of decision. You can decide to have the surgery or you can decide not to have the surgery, but either way you are making a decision. And either decision is one that you will have to make while worked up, stressed, and under the cloud of pain and suffering. There’s no getting around that. So think twice. Think a third time. Seek out the opinions of others. All of that seems appropriate. But if somebody says it could never be rational to decide to have the surgery and then to act on that decision, they’re just wrong.

Return, then, to the case of suicide. It seems to me that in the relevant respects this is (or can be) similar to the example we were just discussing. On the one hand, if you decide not to commit suicide, it might be overwhelmingly likely that you will continue to suffer. And while there may be some slight chance that if you don’t kill yourself you will eventually recover a life worth living, it can be far, far more likely your suffering will simply continue or even grow worse. On the other hand, if you do kill yourself your suffering will come to an end. Obviously, that’s not nearly as good as actually having a cure for your condition—and in this regard, perhaps, the analogy to surgery isn’t perfect—but still: if your condition is so bad that
you are better off dead, and the chance of recovery is vanishingly small, then it might well be rational to decide to kill yourself. And if someone insists that since you are suffering so greatly your judgment must be cloudy, and so you should not trust your own judgment about the matter, I can only reply that this can’t be a good argument. If it wasn’t a good argument in the surgery case—and it wasn’t—then I can’t see how it could suddenly become a good argument in the suicide case.

What does seem right, rather, is that precisely because you’re working and deciding under the cloud of emotional stress and pain, you should think twice, and think a third time, and perhaps think yet again. The decision to kill yourself should not be made in haste. You should discuss it with your doctors. You should discuss it with your loved ones. But if somebody insists that you could never reasonably trust the judgment that you make while in these circumstances, I can only say that this doesn’t seem like a sound piece of advice. That claim doesn’t seem right to me.

I conclude, accordingly, that as long as we’re focused on the question of the rationality of suicide, suicide is sometimes justified. More precisely, suicide can be rationally justified under certain circumstances if we are evaluating suicide from the perspective of rational self-interest. You could have a life that is worse than nothing. You could have good reason to believe you are in that situation. And you might be able to assess your situation calmly and objectively. Alternatively, even if pain and stress inevitably cloud your thinking and leave you worried and uncertain, you might nonetheless still find the odds in favor of suicide sufficiently strong so as to eventually make it reasonable to trust your judgment on the matter. In principle, then, suicide can be a rational choice.
The Morality of Suicide

holding off on the particular topic of suicide for the moment, let’s ask ourselves more generally, what is it exactly that makes an action morally acceptable or morally forbidden?

This is, unsurprisingly, something that different moral theories disagree about. But there is at least one idea that all, or almost all, moral theories share, and that is the idea that the consequences of your action matter. Of course, we might or might not think that the consequences are the only thing that matters for determining the morality of a given action, but surely it is one thing that matters. It is always morally relevant to ask what the consequences of your action are going to be. So let’s think about the morality of suicide with an eye toward the consequences, bearing in mind the fact that since we’re looking at things from a moral point of view, we need to take into account the consequences as they affect everybody.

Now I suppose it is obvious that the person who is typically most affected by suicide is the person who is killing himself. And at first glance, at least, it seems pretty clear that the consequences of suicide are bad with regard to that person. After all, the person was alive, and now they’re dead—and we normally take death to be a bad result.

Suppose, for example, that I point to a switch on the wall and tell you that if you flip the switch, a thousand people who would otherwise remain alive will end up dead. You would normally take that to be a pretty compelling argument against flipping the switch! Why? Because the result would be bad: a thousand people would end up dead. Of course, one person ending up dead isn’t as bad as a thousand people ending up dead, but for all that, shouldn’t we still say it’s a bad consequence? But if so, then don’t we have to say that to whatever extent consequences matter in morality, to that extent, at least, suicide is morally objectionable?

But not so quick! Even though it’s true that death is normally a bad thing, it’s not always a bad thing. This is a point we learned long ago, when thinking about the nature of the badness of death. In typical cases, no doubt, the person’s dying robs them of a chunk of life that would have been good for them overall, and because of that fact dying now is bad for the person. But in the kinds of cases that we’re thinking about here, cases where suicide would be rationally acceptable from a self-interested perspective, the person is better off dead. What life now holds out for them is on balance negative; they are better off dying sooner rather than later. And what that means, of course, is that death is not bad for them but, rather, good for them. So death, in this case, is not a bad consequence, it’s a good consequence.
Thus, provided that you are prepared to accept the possibility of cases in which somebody would be better off if his life ended sooner rather than later, we’re led to the conclusion that the consequences of suicide might actually be good rather than bad. The person will free himself, let’s suppose, of the suffering he would otherwise have to undergo. Thus, even though at first glance it seems as though an appeal to consequences will oppose suicide, a second glance suggests that at least in the right circumstances an appeal to consequences may actually support the decision to kill oneself.

But a third glance reminds us that we can’t just focus on the consequences for the person who is contemplating suicide. As we have already noted, from the point of view of morality we have to consider the consequences for everyone. So we need to ask, who else might be affected by the death or suicide of the person? And presumably, the most important people for us to think about in this connection are the family and loved ones—the people who most directly know about and care about the person who is contemplating suicide. Yet with regard to this wider circle of individuals, at least, it does seem plausible to suggest that the consequences of suicide are normally bad. Typically, after all, when a person kills himself, this causes a great deal of distress and suffering for the person’s family and friends.

Of course, even if that’s true, we still have to ask, how do the various consequences compare to one another? After all, we live in a world in which few, if any, acts have only good consequences or only bad consequences. More typically the consequences of our actions are mixed—some good, some bad—and we have to ask whether the good that we would bring about with a given act is greater than the bad we would bring about, or vice versa. (And then we have to compare this mixed set of results with the mixed results that would come about if we performed some different act instead.) So even if there are negative consequences from suicide in terms of distress and pain for the family, friends, and loved ones of the person who kills himself, all of that might still be outweighed by the benefit to the person himself, if it really was the case that he would be better off dying.

Furthermore, it is also worth bearing in mind that insofar as we are thinking about people who love and care about the person who is considering death, then they may actually be relieved, on balance, if the suffering of their loved one comes to an end. They will, of course, all be horribly distressed that nature—or God, or the Fates, or what have you—has brought it about that this person’s choices are now reduced to killing himself or continuing through the terminal stages of some illness where he’s incapacitated and in pain. They will, of course, wish there was a serious prospect of
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a cure, some chance of recovery. They will wish he had never gotten ill in the first place. But given the limited choices—continued suffering and pain, on the one hand, or having an end to that suffering and pain, on the other—if the person can rationally assess his prospects and reasonably come to believe that he is better off dead, then that’s a judgment his loved ones can come to share as well. They may well regret the fact—more than regret, curse the fact—that these are the only choices he has, but still, given these limited choices they may come to agree that it is better to put an end to the suffering. And so, if the person kills himself, they may second that choice. They may say, “At least he’s not in pain and agony anymore.”

As far as consequences are concerned, then, it might well be the case that suicide is sometimes justified. Imagine, then, a moral view according to which consequences aren’t just one thing that matters morally when thinking about what makes an action right or wrong, they are the only thing. Imagine that we take the bold position that the consequences are the only things that are morally relevant. There are, in fact, moral theories that take this position. I suppose that the best known example of this kind of consequences-only approach to morality is utilitarianism. Utilitarianism is the moral doctrine that says right and wrong is a matter of producing as much happiness for everybody as possible, counting everybody’s happiness equally. And when you can’t produce happiness, then at least you should try to minimize the misery and suffering, counting everybody’s misery and suffering equally.

Suppose we accept this utilitarian position. What conclusions would we come to with regard to the morality of suicide? I believe the conclusion would be a moderate one. On the one hand, we would reject the extreme view that says that suicide is never morally acceptable, because to say that, you would have to be claiming that suicide always has bad consequences overall (as compared to the alternatives). And that strikes me as a rather implausible empirical claim. Sadly enough, it is not too difficult to describe cases in which the results may actually be better if the person kills himself rather than having his suffering continue. It may be better for him and better for his family.

On the other hand, if we are utilitarians we also won’t want to go to the other extreme and say that suicide is always morally acceptable, because, of course, to say that it’s always morally acceptable is to say that the consequences are never bad overall when you kill yourself. And that’s also pretty obviously an implausible thing to claim. Many people, for example, are young and healthy, with great futures in front of them. If someone like
that kills herself, the results aren’t good overall, they’re bad. In such cases, suicide cannot be justified morally.

So the utilitarian position is in the middle. It doesn’t say that suicide is never acceptable, and it doesn’t say that suicide is always acceptable. It says, perhaps unsurprisingly, that suicide is sometimes acceptable; it depends on the facts of the case. It depends on the results. We have to compare the results of killing yourself with the results of the various alternatives open to you. For example, even if your life right now is horrifically bad and it would be better for you to be dead than to have it continue like that, if there is some medical procedure available to you that would cure you or significantly improve your condition, then suicide is not in fact the act with the best consequences. Getting medical help is preferable.

We can even think of cases where you would be better off being dead than having your life continue like this, and there is no medical treatment available, and yet, for all that, it still isn’t morally legitimate to kill yourself as far as utilitarianism is concerned. This is because, as always, we have to think about the consequences for others. There may be others who would be so adversely affected by your death that the harm to them outweighs the cost to you of keeping yourself alive. Suppose, for example, that you are the single parent of young children. You’ve got a moral obligation to look after them. If you were to die, it would be simply horrible for them. It’s conceivable, in a case like that, that the suffering of your children, were you to kill yourself, would outweigh the suffering that you yourself would have to undergo were you to keep yourself alive for the sake of your children. So it all depends on the facts.

Still, if we accept the utilitarian position we do end up with a moderate conclusion. In certain circumstances suicide will be morally justified. Roughly speaking, it will be justified in those cases where you would be better off dead and the effects on others aren’t so great as to outweigh that fact. Those will be the paradigm cases in which suicide would be morally legitimate, according to utilitarianism.

But of course, that doesn’t necessarily mean that suicide is indeed ever morally legitimate; for we may not want to embrace a utilitarian theory of morality. Utilitarianism is (very roughly) what you get when you say that consequences matter and they’re all that matters. But most of us are inclined to think that there’s more to morality than consequences. Most of us are inclined to think that there are cases in which actions can have good results and yet still be, for all that, morally forbidden. That’s not to say that consequences don’t matter morally; it’s to claim, rather, that consequences
aren’t the only things that matter morally. Consequences can be outweighed by other morally relevant factors. At any rate, that’s the position that’s held by those who accept the approach in ethics known as deontology.

Deontologists say that other things matter morally besides consequences. In deciding whether your action is right or wrong, you do have to pay attention to the consequences, but you have to pay attention to other things as well. What other things? Unsurprisingly, deontologists differ with one another over the details, but a common enough thought here is that in addition to paying attention to the results, we also have to pay attention to how you bring about those results. We can’t just ask what the results will be; we also have to ask about your means of achieving those results. And in particular, most deontologists say that it is highly relevant whether you have to harm anybody to produce the results.

Most of us are inclined to think it’s wrong to harm people, or at least innocent people. Indeed, it’s wrong to harm innocent people even if the results of doing that might be good. To be sure, I do have to throw in that qualification about harming innocent people because it’s also true that most of us are inclined to think that self-defense can be justified; it may well be legitimate to harm someone who is unjustifiably attacking you or your friends or your fellow countrymen. So it’s not as though we want to say that it is never legitimate to harm someone. But those people are guilty; they’re aggressors. What most of us are inclined to think, in our deontological moods, is that it is never legitimate to harm an innocent person. But the crucial point, at any rate, is this: deontologists think it’s wrong to harm an innocent person even if the overall results would be better if you did!

Of course, in practice even utilitarians will almost always condemn killing innocent people, since the results of harming an innocent person are almost always bad (compared to the results of the alternative acts one could perform). If I walk into a crowded room, for example, and start shooting people with my Uzi submachine gun, the results would obviously be horrible; so it isn’t just the deontologist who is going to condemn that action, the utilitarian will do so as well. Precisely because killing an innocent person almost always has very bad results, it normally doesn’t make much of a practical difference whether it is utilitarianism or deontology that we accept.

Accordingly, if we want to think about the differences between utilitarians and deontologists, we shouldn’t focus on a typical case. We need, instead, to think about an atypical case—a case where killing an innocent person has good results. In real life, of course, it’s hard to think of cases like
that; but we can go science-fictiony and imagine an appropriate example. Doing this will allow us to zero in on the crucial difference between utilitarianism and deontology.

Suppose that we have five patients in a hospital who are going to die because of organ failures of one sort or another. One of them needs a heart transplant, one of them needs a kidney transplant, one of them needs a liver transplant, and so forth and so on. Unfortunately, because of tissue incompatibilities we can’t use the organs from any of the five (after they die) to save the others. Meanwhile, here in the hospital for a routine check-up is Fred. Fred is perfectly healthy. And as you examine him—you’re the doctor—you discover that he’s exactly suitable to be an organ donor for all five of the patients. It occurs to you that if you were to find some way to kill him, but cover up the cause of death so it looked like he died of a seizure, you could then use his organs to save the five. This one gets the kidney, that one gets the heart, that one gets the liver, and so forth and so on. So your choice, roughly, is this: just give Fred his routine medical exam, in which case the five other patients die, or kill Fred and chop him up, using his organs to save the five patients.5

What should we say is the right thing to do in the organ transplant case? In terms of consequences it looks as though—if we tell the story right—the results would be better if you chop Fred up. After all, it’s one versus five. And although the death of Fred is a horrible result, the death of the five is an even worse result. And so the results would be better if you were to kill innocent Fred.

Obviously, there is a lot to dispute about the way I have just told this story. Will the results really be better if you kill Fred? What if the organ transplants fail and you end up with six people dead? What will the long-term effects on health care be if you get caught and it comes out that sometimes doctors murder their healthy patients? But rather than trying to tweak the example here, let’s just suppose that we could eventually get the details right: the results really would be better if you chop up Fred. Is that the right thing to do?

It seems as though utilitarianism should say that it is the right thing to do. But exactly for that reason most of us would then want to say that there is more to morality than what utilitarianism says! Now whether that objection is a good one is a very, very complicated question, and if you want to pursue it then I invite you look at some introductory books on moral philosophy. But for present purposes, let’s just suppose that most of us are on board with the deontologists when they say that there is more to morality.
than bringing about the best results. Intuitively, at least, it’s wrong to kill somebody who is innocent, even though by hypothesis the results would be better (in our example, five alive versus only one). As we might put it, people have a right to life, a right not to be killed. More generally, most of us accept a deontological moral prohibition against harming an innocent person—even when the results really would be better.

In a book on moral philosophy we would immediately want to ask a lot of important questions about this prohibition, including, for example, what its basis is, and what exactly it rules out. But for present purposes we can just ask, suppose we do accept a deontological prohibition like that, what are its implications for the morality of suicide? And it seems that the answer to that question is this: we have to say that suicide is wrong; it is morally unacceptable. Because when I kill myself, I’m killing somebody. And didn’t we just say, as deontologists, that killing an innocent person is morally wrong? Well, I’m a person. In fact, I am an innocent person. So, killing me is morally wrong. So my killing myself is morally wrong.

And if we do say that, then it won’t really change anything to point out that in the sort of case that concerns us I am better off dead. Even if we suppose that the results will be better overall if I kill myself, that fact is neither here nor there, because as deontologists we said that the right to life is so powerful that it outweighs consequences. Just as it was wrong to chop up Fred, even though the results would be better (five alive versus one), it’s wrong to kill yourself, even if the results would be better. In short, even if suicide is the only way to put an end to your pain, and so has good results overall, that just doesn’t matter since the right to life outweighs the appeal to consequences. As deontologists, it seems, we have to say that suicide is forbidden—full stop.

As usual in philosophy, however, it’s not quite as simple as that. Some people argue that morality is only about how I treat others, not how I treat myself: how one treats oneself falls outside of the scope of morality altogether. Obviously, if we were to accept a claim like that then it would immediately follow that although the right to life rules out killing other people (even when the results would be good), it simply does not apply to cases where a person kills himself. And of course, if the right to life doesn’t exclude self-killing, then suicide may be morally acceptable after all.

It should be noted, however, that it is not at all obvious why we should accept the claim that morality only concerns the treatment of others. Suppose we took it upon ourselves to try to explain why it would be wrong for me to kill you. Doubtless, we would point to things like the fact that you are
a person, and as such you can’t be treated as a mere object, as a mere means of bringing about some goal, no matter how worthy. As a person, there are certain things that shouldn’t be done to you, even if the results would be better overall if we did. But of course, I’m a person too. Even when I contemplate killing myself, I’m contemplating destroying a person. And it is difficult to see why the mere fact that I am contemplating killing myself should suddenly render the fact that I am contemplating killing a person altogether morally irrelevant.

Admittedly, the issue is a complicated one, and to do justice to it we would need to consider rival theories concerning the ultimate basis of morality, a complex subject that I won’t try to examine here. So let’s simply suppose, for the sake of argument, that morality isn’t limited to the treatment of others. Can’t we at least agree that if that’s right then suicide is immoral? If morality is indeed concerned (at least in part) with how I treat myself, and if, among the moral rules, there is a deontological prohibition against harming innocent people, doesn’t it follow that suicide is wrong?

But at this point it seems important to point out a significant difference between the organ transplant case—where I chop up Fred to save five others—and the case of suicide. When I kill Fred, I am harming one person so as to benefit others. But if I kill myself, I am doing it for my own sake. That fact seems highly relevant when thinking about the morality of suicide.

It certainly does seem relevant. But it’s not 100 percent clear what to do with that thought. Here are two possible suggestions. First of all, you might think that the relevance of saying that I’m harming myself for my own sake is this. In the kinds of cases we are focusing on, suicide is rational from a self-interested perspective. The person would be better off dead. This means that if I do kill myself, although I am certainly harming myself in one way, I am not harming myself overall. On the contrary, I’m actually benefitting myself overall. That’s obviously an important difference from what happens in the organ transplant case, where I clearly do harm Fred overall.

This fact is relevant because it’s possible that the deontological prohibition against harming is really only a prohibition against harming people overall. Suppose, for example, that you have an infection in your leg that will kill you unless your leg is amputated. So you go to the surgeon and she removes the leg. Has she done something immoral? It doesn’t seem as though she has. But wait a minute: she chopped off your leg! She harmed you! You used to have a leg and now you don’t have one. That’s clearly a form of harm.
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So isn’t what she did immoral? Presumably, however, what we want to say is that although she harmed you, she didn’t harm you overall. She left you better off overall, not worse (compared to the alternatives available to her). And since she didn’t harm you overall, she didn’t really violate the deontological rule against doing harm.

If that’s the right thing to say, then maybe suicide needn’t be considered immoral after all. Even if there is a deontological prohibition against harming innocent people, maybe what this prohibition really comes to is a prohibition against harming people in such a way as to leave them worse off overall. But if I would really be better off dead, then when I kill myself I am not harming myself overall, I am benefiting myself. So the prohibition against overall harm hasn’t been violated. If that’s right, then even from the deontological perspective suicide may be morally legitimate in certain cases.

That is one way of developing the thought that when I kill myself, I act for my own sake. Here’s another. When I kill myself, given that I’m doing it for my own benefit, I am obviously in favor of what I am doing. I approve of my action; I’ve agreed to it. Notice how different this is from the organ transplant case. When I kill Fred, presumably, I don’t have his approval. I act against his will. But since suicide is something that I do to myself, I can’t do it against my own will. I always act with my own consent. And that seems to be a morally relevant fact as well.

To accept this idea is to say that we need to add yet another factor into our deontological theory. We already know that consequences are morally relevant, and so is the question of whether innocent people are being harmed to bring about those consequences, but now we also have to take into account the relevance of consent. And on reflection, I suspect, most of us would be inclined to agree that consent can make it acceptable to treat people in ways that would otherwise be wrong. In particular, although it is normally wrong to harm people, it is quite a different matter when you have the consent of the person being harmed. For example, in the amputation case it certainly seems relevant that the surgeon has your permission to operate. (We’d feel quite differently about some random stranger who started to amputate your leg without your permission!)

Here’s another example that shows the relevance of consent. It would not be morally permissible for me to go up and hit you on the nose. Similarly, it wouldn’t be okay for you to come up and hit me in the gut. And yet boxing matches are, I suppose, morally acceptable. Why is that? An important part of the answer, I imagine, is that when people are boxing, they have
agreed to it. I give you permission to hit me, or at least to try to hit me, in exchange for your giving me permission to hit you, or at least to try to hit you. And it’s the presence of that consent that makes it permissible for me to harm you, or for you to harm me.

So consent makes it morally legitimate to harm people, even though in the absence of consent it wouldn’t be legitimate. And if that’s right, this has a bearing on the morality of suicide. Admittedly, when I kill myself, I am harming an innocent person. But since I am killing myself, I obviously have given myself permission to do this. I act with the consent of my “victim.” So if consent makes it permissible to do what would normally be forbidden, then consent makes it permissible for me to kill myself. Thus, from the perspective of this more fully developed deontological theory—one that takes into account the relevance of consent—it seems that we have to say that suicide is morally permissible after all.

Indeed, this line of thought may quickly lead us to a rather extreme position concerning the morality of suicide. If the consent of the victim always makes it permissible to do what would otherwise be morally forbidden, then it will turn out that suicide is always morally permissible. For in every case of suicide, I take it, the person killing himself has consented to what he is doing to himself.

But we probably shouldn’t agree that the power of consent is unlimited in this way. Suppose that you and I meet one day and you say to me, “Shelly, you’ve got my permission to kill me.” So I get out my gun and I shoot you to death. That certainly doesn’t seem morally acceptable, even though you gave me your permission. Or suppose that you are feeling guilty because you believe you killed John Smith. As it happens, you are just crazy. You didn’t kill John Smith. John Smith isn’t even dead. But in your insanity you think you did do it, and so you say, “Shelly, please kill me.” Imagine that I know that you are insane, but I kill you anyway. Well, that clearly isn’t acceptable either. Or suppose you are playing with your three-year-old nephew, and he says, “I don’t like being alive. Kill me.” Clearly that doesn’t make it permissible to kill him either.

If we accept the unlimited power of consent, we are led to some pretty implausible conclusions. So I take it that on reflection we won’t want to embrace an unlimited consent principle. Perhaps, then, we should rethink our position and deny the relevance of consent altogether? Maybe consent doesn’t really have the kind of moral significance that it initially seemed to have. Maybe it doesn’t actually have any genuine moral relevance at all.
I suspect, however, that saying this would be to go too far in the other direction. We need some kind of consent principle—even if only a qualified one—because otherwise we won’t be able to say some things that most of us very much want to say. Imagine, for example, a soldier in a war, where a hand grenade has been thrown into the dugout. Unless something happens very quickly, the grenade is going to blow up and kill the soldier’s five buddies. Unfortunately, they don’t see the grenade, and there isn’t enough time to warn them. So the soldier’s choices are these: He can do nothing, in which case his friends will get killed, but he won’t be badly harmed (he is farther away from the grenade). Or he can throw himself on the grenade, in which case his body will absorb the blow from the explosion and he will be killed, but his buddies will be saved. Imagine that he throws himself on the grenade. He has sacrificed himself for his friends.

Few of us, I fear, would have it within ourselves to do this, but amazingly enough, some people do. And we admire and praise these people for their incredible acts of heroic self-sacrifice. We say that such actions are morally praiseworthy, above and beyond the call of duty. But wait a minute: how can they be praiseworthy? The soldier threw himself on a hand grenade, knowing the result of this was that he was going to die. And so he killed a person—an innocent person—apparently violating the deontological prohibition against killing innocent people.

It won’t help to point out that the results are better if the soldier sacrifices his life. To be sure, the results are better—five alive rather than just one—but in our deontological moods that shouldn’t sway us. After all, suppose that when the soldier sees the hand grenade what he does is push another soldier onto the grenade! That’s obviously not permissible, even though the results are the same (five alive rather than one). That’s deliberately killing an innocent person! And deontologists think that that’s wrong, even though the results are good.

So what explains the difference? Why is it morally legitimate for the soldier to throw himself on the grenade, but not to push someone else? The most plausible answer, I think, is that it is permissible for him to throw himself because he agrees to it. When the soldier throws himself, he has consented to being harmed. That makes an act that would otherwise be impermissible into something permissible. Yet if we reject the consent principle altogether, we’re forced to say that the soldier’s act of self-sacrifice isn’t morally admirable. It’s morally appalling, morally forbidden. I can’t believe that.
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So deontologists need some kind of consent principle. But on the other hand, we don’t want to go with such a bold consent principle that we claim that it is okay to kill people just because they say, “Oh, kill me.” What we need, then, is a more moderate form of the consent principle. We need to say that consent can make the impermissible permissible—but only under certain conditions.

What exactly are the relevant conditions? This is, of course, one more topic open to debate. But among the more plausible suggestions are these: We might insist that the consent has to be given freely. And it has to be given by someone who understands what the results of the relevant action are going to be (or what they might be). It has to be given by someone who is sane, rational, and competent to make this kind of decision. Finally, we might want to require that the person have good reasons for giving his consent. (That might be necessary to deal with the case where you just come up to me and tell me to kill you. In that case, after all, you needn’t be insane; it’s just that you don’t have any good reason to say what you say. Maybe that’s enough to undermine the force of consent.)

Suppose, then, that we have a suitably modified version of the consent principle. What will we end up saying about suicide? It seems to me likely that what we will be led to, once again, is a moderate view about suicide. The mere fact that some person wants to kill herself won’t suffice to show that it is morally permissible for her to do so because, of course, even though she has given herself permission to do this, she may be insane, or not competent at that moment to make that kind of decision, or she may simply lack good reason for killing herself. But for all that, if we can have cases—and I take it that we can have such cases—where someone rationally assesses their situation, sees that they would be better off dead, thinks the case through, doesn’t rush into it, makes an informed and voluntary decision, with good reason behind it, then the modified consent principle might well come into play, in which case consent will trump or nullify the force of the deontological prohibition against harming innocent people. So suicide will again be acceptable in some cases, though not in all.

And that’s the conclusion that seems to me to be the correct one, whether we accept the utilitarian position or a deontological alternative. Suicide isn’t always legitimate, but it is sometimes legitimate.

This still leaves an important question: what should we do when we come across somebody trying to kill himself? Here, I think, there is good reason to ask yourself, are you confident that the person has satisfied the relevant conditions on the consent principle? Perhaps we should err on the
side of caution, and assume that the person is acting under distress, not thinking clearly, not informed, not altogether competent, not acting for good reasons. But to accept this sort of initial negative presumption is not the same as accepting the stronger conclusion that we must never permit anyone to kill himself. Suppose we become convinced that they have thought it through, that they do have good reason, that they are informed, and that they are acting voluntarily. In some such cases, it seems to me, it may well be legitimate for the person to kill himself, and for us to let him.