

Rule-Utilitarianism and Euthanasia

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1 Introduction

As scientific and technological advances enable the medical profession to keep people alive longer, the question arises whether this is always a good thing. Should those who could prolong life step back under certain conditions and allow a very ill person to die? And if allowing to die is sometimes right, then what about actively killing patients when this would be better for the patients than allowing them to die more slowly and painfully?

Such questions are debated under the heading of euthanasia. The term “euthanasia” derives from the Greek term for an easy, painless death. However, we often now hear the term “passive euthanasia,” which refers to passing up opportunities to save an individual from death, out of concern for that individual. If passive euthanasia is indeed one kind of euthanasia, then “euthanasia” cannot mean “killing painlessly”; for to pass up an opportunity to save someone, i.e., passive euthanasia, is arguably not *killing*. Furthermore, the death involved in passive euthanasia is often *painful*. So let us take the term “euthanasia” to mean “either killing or passing up opportunities to save someone, out of concern for that person.” (Note that, on this definition, what the Nazis called “euthanasia” was not euthanasia, because it was not done out of concern for the patients.)

Different moral theories will of course approach questions about the moral status of euthanasia in different ways, though some of these theories will end up with the same conclusions. This essay considers euthanasia from the perspective of just one moral theory. The theory is rule-utilitarianism. Rule-utilitarianism assesses possible rules in terms of their expected utility. It then tells us to follow the rules with the greatest expected utility. (Expected utility is calculated by multiplying the utility of each possible outcome by the probability that it will occur.)

In the next section, I explain what the term “utility” means. Then I outline another utilitarian theory – act-utilitarianism. I do this in order to contrast rule-utilitarianism with this perhaps more familiar theory. I then outline the distinctions between different kinds of euthanasia. The final sections of the paper consider the various factors that would go into a rule-utilitarian decision about euthanasia.

2 Utility

A moral theory is utilitarian if and only if it assesses acts and/or rules in terms of nothing but their utility. Classical utilitarianism took “utility” to refer to the well-being of sentient creatures. And classical utilitarianism took the well-being of sentient creatures to consist in

pleasure and the absence of pain (Bentham, 1823; Mill, 1863; Sidgwick, 1874). On this view, people's level of well-being is determined *solely* by how much pleasure and pain they experience.

If anything is desirable for its own sake, pleasure is. But most utilitarians now think that pleasure, even if construed as widely as possible, is not the *only* thing desirable in itself, and pain not the *only* thing undesirable in itself (Moore, 1903, ch. 6; Hare, 1981, 101ff; Parfit, 1984, appendix I; Griffin, 1986, Part One; Goodin, 1991, p. 244; Harsanyi, 1993). Utilitarians can think that things that are desirable for their own sake include not only pleasure but also important knowledge, friendship, autonomy, achievement, and so on. Indeed, many utilitarians now construe utility just as the fulfillment of desire or the satisfaction of preferences, with relatively few restrictions on what the desires or preferences are for.

One reason most utilitarians have moved away from a version of utilitarianism that focuses exclusively on pleasure has to do with knowledge. Many of us care about certain things over and above the pleasure they typically bring, and one of these things is knowing the important truths (e.g., about the nature of the universe and about oneself), even if not knowing the truth would be more pleasant for us. Bliss isn't everything – for example, if purchased at the cost of ignorance. To be sure, knowledge does not always constitute a more significant addition to well-being than does pleasure. But sometimes it does.

People also care about autonomy, by which I mean control over one's own life. Many of us would be willing to trade away some pleasure for the sake of an increase in autonomy. Again, this is not to say that even a tiny increase in autonomy is more important than a great deal of pleasure; rather, the point is that pleasure is not always more important to our well-being than autonomy. Neither value is always more important than the other.

I agree with such convictions. Knowledge, autonomy, and other things can be beneficial to us, can increase our well-being, over and beyond whatever pleasure they directly or indirectly bring us. I shall presuppose this in what follows.

I shall also follow conventional philosophical opinion in supposing that it is possible to be in such a bad condition that death would be a welcome release. Severe pain can be unremitting, and indeed so overpowering that the person experiencing it can think of nothing else. If the rest of my life would consist of nothing but excruciating physical pain, then I might be better off dead. Indeed, if the rest of my life would consist wholly of intense psychological suffering, I'd be better off dead. Of course, we may argue about where to draw the line between being better off dead and being better off alive (Mitchell, 1995). But it seems deeply unreasonable to insist that there are never any instances of patients who would be better off dead.

Now, what about *divinely bestowed* benefits and harms? Most utilitarians, and all utilitarian writers of our era, have written as if there were no rewards or punishments granted by a god or gods. This is not to say that all utilitarians have been atheists. In fact, many have been religious believers (perhaps most notably, Bishop Berkeley, 1712). Nor would *any* utilitarians – theistic or agnostic or atheistic – hold that a person's religious beliefs are completely irrelevant to the morality of how he or she is treated. For any utilitarian would recognize that people's religious beliefs can have an effect on what brings them pleasure and on what preferences they form. So utilitarianism will favor, for example, freedom of religion and even the neutrality of the state with respect to religion.¹ But while utilitarians can think that people's religious beliefs are often relevant to moral argument about how these people should be treated, modern utilitarians eschew basing any moral argument on the *truth* of any religious belief. And this prohibition on assuming the truth of any religious belief applies to the belief that there are divinely bestowed benefits and harms.

That said, we must also note that utilitarianism is also often said to assume a god's-eye point of view. The main respect in which this is true is that the utilitarian approach prescribes a totally impartial calculation of well-being. To be more specific, in the calculation of utility, benefits or harms to any one person are to count for just as much as the same amount of benefit

or harm to anyone else – that is, count the same without regard to race, religion, gender, social class, or the like.

It is a mistake to think that utilitarians hold that what benefits more people is *necessarily* better than what benefits fewer. Utilitarians focus on the greatest aggregate good. What results in the greatest aggregate good is sometimes not what benefits the majority. This is because the benefits to each of the smaller number may be large and the benefits to each of the greater number small. And large benefits to each of a minority can add up to more than small benefits to each of a majority. Thus, utilitarians will favor what benefits the minority if (but only if) what benefits the minority results in the greatest good overall.

On the other hand, many philosophers have pointed out that utilitarianism gives no intrinsic weight to how equally or fairly benefits are distributed. I myself accept that this is an important potential problem with utilitarianism. But because I don't think these worries about distribution are relevant to euthanasia, I shall ignore them in this paper.

3 Act-utilitarianism

The most direct and most discussed form of utilitarianism is act-utilitarianism. There are different versions of this theory. One version holds that an act is right if and only if its *actual consequences* would contain at least as much utility as those of any other act open to the agent. Another version claims that an act is right if and only if its *expected* utility is at least as great as that of any alternative.

But there are many familiar counter-examples to both versions of act-utilitarianism. Some of these counter-examples have to do with moral prohibitions. For example, both versions of act-utilitarianism imply that killing an innocent person, or stealing, or breaking a promise would be morally right if the expected and actual utility of the act would be greater, even if just slightly greater, than that of any alternative act. We might think that normally prohibited acts could be right in very rare circumstances in which doing such acts is the only

way to prevent something much worse. But we don't think such acts are permissible when the expected and actual utility of such an act would be only slightly greater than that of complying with the prohibition.

Another problem with act-utilitarianism is that it seems unreasonably demanding, requiring acts of self-sacrifice that seem beyond the call of duty. Think how much a middle-class individual in a relatively affluent country would have to give to CARE or Oxfam before further sacrifices on her part would constitute a larger loss to her than the benefit to the starving that CARE or Oxfam would produce with that contribution. Making sacrifices for strangers up to the point that act-utilitarianism requires would be saintly. But morality, most of us think, does not *require* sainthood.

4 Rule-utilitarianism

Rule-utilitarianism differs from act-utilitarianism in that rule-utilitarianism does *not* assess each act solely by its utility. Rather, rule-utilitarianism assesses acts in terms of rules, and rules in terms of their utility. Rule-utilitarianism holds that an act is morally permissible if and only if the rules with the greatest expected utility would allow it. The expected utility of rules is a matter of the utility of their "general" internalization, i.e., internalization by the overwhelming majority. For a code of rules to be internalized is for people to believe these rules justified and to be disposed to act and react in accordance with them. Assume I have internalized a rule against killing people against their will. If this assumption is correct, I will (a) think this kind of act wrong, (b) be disposed not to do this kind of act, and (c) be disposed to react negatively to those who I think have done it.

To say that rule-utilitarians focus on the consequences of the general internalization of rules does not mean that they consider only rules that existing people *already* accept. Rather, the question rule-utilitarians ask about each possible code is what the effects on utility would be of the code's being successfully inculcated in people who had no prior moral beliefs or atti-

tudes. At least in principle, the code of rules best from a utilitarian point of view might be very different from those now accepted in any given society. (For developments of this sort of theory, see Brandt, 1963, 1967, 1979, part two; 1988; Harsanyi, 1982; Johnson, 1991; Barrow, 1991; Hooker, 1995, 2000.)

The intuitive attractions of rule-utilitarianism become clear as we notice the ways in which this theory seems superior to act-utilitarianism. For unlike act-utilitarianism, rule-utilitarianism agrees with common conviction that individual acts of murder, torture, promise-breaking, and so on can be wrong even when they produce somewhat more good than their omission would produce. For the general internalization of rules prohibiting murder, torture, promise-breaking, and the like would clearly result in more good than the general internalization of rules that did not prohibit such acts. Thus, on the rule-utilitarian criterion of moral permissibility, acts of murder, torture, and so on, can be impermissible even in rare cases where they really would produce better consequences than any alternative act.

Likewise, rule-utilitarianism will not require the level of self-sacrifice act-utilitarianism requires. For, crudely, rule-utilitarianism approaches this problem by asking how much each relatively well-off person would have to contribute in order for there to be enough to overcome world hunger and severe poverty. If *the overwhelming majority of the world's relatively well-off* made regular contributions to the most efficient famine relief organizations, no one would have to make severe self-sacrifices. Thus, rule-utilitarianism is not excessively demanding (Hooker, 1991, 2000; cf. Carson, 1991).

The advantages of rule-utilitarianism over act-utilitarianism are often construed as utilitarian advantages. In other words, some philosophers have argued that rule-utilitarianism will in fact produce more utility than act-utilitarianism (Brandt, 1979, pp. 271–7; Harsanyi, 1982, pp. 56–61; and Johnson, 1991, especially chs. 3, 4, 9; Haslett, 1994, p. 21; but compare Hooker, 1995, section III). I am *not* running that argument. Instead, I am merely pointing out that rule-utilitarianism seems to have implications that

are more intuitively acceptable than those of act-utilitarianism (Brandt, 1963; 1967).

5 Kinds of Euthanasia

We need to distinguish three different kinds of euthanasia, or rather three different ways euthanasia can be related to the will of the person killed. Suppose I ask you to either kill me or let me die should my medical condition get so bad that I am delirious and won't recover. If you then comply with my request, we have what is commonly called *voluntary euthanasia*. It is voluntary because the person killed asked that this be done.

Now suppose that I slip into an irreversible coma without ever telling anyone whether I wanted to be killed in such circumstances. If I am then killed or let die, we have what is commonly called *non-voluntary euthanasia*. The distinguishing characteristic of non-voluntary euthanasia is that it is euthanasia on someone who did not express a desire on the matter.

But what if I do express a desire not to be killed no matter how bad my condition gets? Then killing me would constitute what is called *involuntary euthanasia*. Quite apart from its moral status, involuntary euthanasia can seem puzzling. To be euthanasia, it must be done for the good of the person killed. Yet if the person concerned expresses a desire that it not be done, how can it be done for this person's own good? Well, involuntary euthanasia may be morally wrong (we will discuss why in a moment), but we must start by acknowledging that people are *not always* in the best position to know what is best for themselves. Someone could be mistaken even about whether he or she would be better off dead than alive in a certain state. And other people could think that the person in front of them had made just this kind of mistake. If they not only thought this but also were motivated to do what was best for this person, they might contemplate euthanasia. What they would then be contemplating would be involuntary euthanasia.

Another important distinction is the distinction between active and passive euthanasia. Active euthanasia involves actively killing some-

Euthanasia

one out of a concern for that person's own good. Passive euthanasia involves passing up opportunities to prevent the death of someone out of concern for that person's own good.

The distinction between active and passive euthanasia cuts across the distinction between voluntary, non-voluntary, and involuntary euthanasia. In other words, either with my consent, or without knowing what my wishes are or were, or against my wishes, you might kill me. Likewise, either with my consent, or without knowing what my wishes are or were, or against my wishes, you might pass up an opportunity to keep me from dying. Thus we have:

Active Voluntary Euthanasia

Active Non-voluntary Euthanasia

Active Involuntary Euthanasia

Passive Voluntary Euthanasia

Passive Non-voluntary Euthanasia

Passive Involuntary Euthanasia

6 Law and Morality

We also need to distinguish between questions about law and questions about moral rightness, permissibility, and wrongness. Utilitarians, as well as moral philosophers of many other stripes, can think that there may be some moral requirements that the law should not try to enforce. A relatively uncontroversial example concerns the moral requirement forbidding breaking verbal promises to your spouse. There may be good utilitarian reasons for not bothering the law with such matters – to police the give and take of such relationships might be too difficult and too invasive. This isn't to deny that breaking verbal promises to spouses is usually morally wrong, only that the law shouldn't poke its nose into this matter.

So, initially at least, there is the potential for divergence in what the rule-utilitarian says about the law and about morality. There is less scope for this on rule-utilitarianism, however, than there is on some other theories. For both in the case of law and in the case of morality, the first thing rule-utilitarianism considers is the consequences of our *collective* compliance with rules. (See Mill, 1863, ch. 5.)

With respect to euthanasia, rule-utilitarianism is especially likely to take the same line on law as it does on morality. That is, if rule-utilitarians think that people's being allowed in certain circumstances to kill or let die would have generally good consequences, then they will think such acts are *morally* allowed in the specified circumstances. They will also think the *law* should allow them in the specified conditions. And if they think the consequences would be generally bad, then they will think morality does, and the law should, prohibit the acts in question.

Thus, in the following discussion of the rule-utilitarian approach to euthanasia, I will focus on just one realm and assume that the other follows suit. The realm on which I shall focus is the law. The question, then, is: what kinds of euthanasia (if any) should the law allow?

7 The Potential Benefits of Euthanasia

Perhaps the most obvious potential benefit of permitting euthanasia is that it could be used to prevent the unnecessary elongation of the suffering experienced by many terminally ill people and their families. What about painkilling drugs? Some kinds of pain cannot be eliminated with drugs, or at least not with drugs that leave the patient conscious and mentally coherent. And in addition to physical agony, there is often overwhelming emotional suffering for the patient, and derivatively for friends and family in attendance. All this could be shortened if euthanasia were allowed.

To the extent that the point is speedy termination of physical and emotional suffering, active rather than passive euthanasia can seem desirable. For passive euthanasia would often involve a slow and painful death, whereas active euthanasia could end the patient's suffering immediately. There may, however, be especially large costs associated with allowing active euthanasia. I shall consider these later.

Another advantage of permitting euthanasia – and again the advantage is even more pronounced in the case of permitting active euthanasia – concerns resource allocation. The resources, both economic and human, that are

now devoted to keeping alive people who have incurable and debilitating diseases could often more cost-effectively be devoted to curing people of curable diseases, or to funding preventive medicine, or even just to feeding the starving. What I mean by saying that the change in resource allocation would be more cost effective is that this would increase average life-expectancy and quality of life.

For utilitarians who count personal autonomy as a value over and above whatever feelings of satisfaction it brings and frustration it prevents, there is an additional consideration. It is that *voluntary* euthanasia must increase personal autonomy, in that it gives people some control over *when* their lives end. And if active voluntary euthanasia were allowed, this would give people some control over *how* their lives end. Concern for people's autonomy obviously counts only in favor of *voluntary* euthanasia. It is irrelevant to the discussion of non-voluntary euthanasia of any kind, and opposes involuntary euthanasia of any kind.

8 The Potential Harms of Allowing Involuntary Euthanasia

A law permitting active *involuntary* euthanasia is likely to be strongly opposed by rule-utilitarians for other reasons as well. One such reason is that many people would be scared away from hospitals and doctors if they thought that they might be killed against their wishes. I cannot imagine how allowing involuntary euthanasia could generate benefits large enough even to begin to offset this loss. The last thing a public policy should do is scare people away from trained medical experts. A related point is that allowing involuntary euthanasia would terrify many people taken to a hospital while unconscious. Imagine waking up to find that you had been taken to a hospital where people can, *against your wishes*, kill you, as long as they (claim to) think this would be best for you.

Furthermore, to allow the killing of innocent people against their wishes would be difficult to square with other moral prohibitions of supreme importance. In particular, the general feeling of abhorrence for the killing of innocent

people against their wishes is, as Hobbes (1651) insisted, the bedrock of social existence. Without communal acceptance of that prohibition, life would be precarious and insecure. No law should be passed which genuinely threatens to undermine people's commitment to the general prohibition on killing the innocent against their wishes.

At this point someone might say, "Ah, but we can distinguish between killing innocent people against their wishes but *for their own good*, and killing them *for some other reason*." True, we can make that distinction. But is it a distinction whose enshrinement in law would be felicitous? No, again because people would not feel secure in a society where they might be, against their wishes, killed for their own good.

These points about insecurity add up to a very persuasive rule-utilitarian argument against permitting *active* involuntary euthanasia. But do they count against *passive* involuntary euthanasia? In the case of passive euthanasia, there isn't such a risk that people will stay away from doctors and hospitals for fear of being made worse off than they are already. Suppose you had a serious illness and found yourself in a society where active involuntary euthanasia was neither permitted nor practiced, but passive involuntary euthanasia was permitted and practiced. Then, you would not need fear that going to the hospital would get you killed against your wishes. But you might worry that the doctors or hospital would, against your wishes, pass up opportunities to prolong your life. Yet you probably wouldn't live longer if you stayed out of the hospitals. Indeed, if you were under the care of a doctor, you would probably suffer less. Thus, you have less to lose by going into the hospital in a society where passive involuntary euthanasia is permitted than you do in a society where active involuntary euthanasia is permitted. If passive involuntary euthanasia only were legally and morally permitted, the consequence would not be that everyone who thought they had or might have a fatal disease would avoid doctors. So the disadvantages of allowing passive involuntary euthanasia are clearly less than the disadvantages of allowing active involuntary euthanasia.

The disadvantages of allowing passive involuntary euthanasia may nevertheless be enough to convince rule-utilitarians to oppose it. Utilitarians have long argued that their doctrine is generally anti-paternalistic (Mill, 1859). Grown-up human beings are generally the ones who know which of the ways their lives might unfold would be best for themselves, because they are generally the ones who know best their own aspirations, tastes, talents, sensitivities, vulnerabilities, etc. Of course there are general exceptions – e.g., people with permanent or temporary mental impairments. But, by and large, people are the best guardians of their own well-being.

As noted at the very end of the previous section, rule-utilitarians can have another reason for opposing involuntary euthanasia, passive just as much as active. This reason comes from the idea that autonomy is an important component of well-being. Indeed, this seems to be the strongest rule-utilitarian reason for disallowing passive involuntary euthanasia.

9 The Potential Harms of Allowing Voluntary and Non-voluntary Euthanasia

Turn now to the harms that voluntary and non-voluntary euthanasia might involve. Suppose the doctors tell Jones he has disease X. This disease almost immediately produces excruciating pain, dementia, and then death. Jones asks to be killed, or at least allowed to die, before the pain gets too severe. The doctors comply with Jones's wishes. Later, however, a post-mortem reveals that he didn't have disease X at all, but instead some curable condition. As this story illustrates, euthanasia can inappropriately take a life after a mistaken diagnosis.

And yet how often do medical experts misdiagnose a condition as a terminal illness when it isn't? And how wise is it now to go against expert medical opinion? And are there ways of minimizing the risk of doctors acting on misdiagnoses? Euthanasia could be restricted to cases where three independent medical experts – and I mean *real* experts – make the same diagnosis. With such a restriction, the worry about misdiagnoses seems overblown.

But closely associated with the point that doctors sometimes misdiagnose someone's condition is the point that doctors are sometimes wrong about what will happen to someone whose condition is correctly diagnosed. Suppose the doctors rightly believe that there is now no treatment known to prevent the disease some people have from bringing acute pain followed by a painful death. But a cure or more effective pain block might soon be discovered. If people are killed or allowed to die today and the medical breakthrough comes tomorrow, euthanasia will have amounted to giving up on those people too soon – with obviously tragic results.

However, again restrictions could be put in place to prevent the losses envisaged. One restriction could specify that euthanasia is completely out of the question until someone is fairly near the final stages of a disease, where new cures or treatments are very unlikely to be able to change the fatal path of the disease. (And one way of approximating this restriction would be to allow *passive* but not *active* euthanasia. But this seems an unnecessarily crude way of ensuring that people aren't killed before they could be cured.) Another restriction could specify that euthanasia be out of the question until after a thorough and disinterested investigation into the state of research on cures and treatments. When this investigation shows that the development of a cure or new treatment is a *realistic* possibility during the life of the patient, euthanasia would again be prohibited.

From a rule-utilitarian perspective, the points about mistaken diagnoses and future cures seem to mandate restrictions on when euthanasia would be considered, but they don't preclude euthanasia altogether – even active euthanasia. Something else, however, does threaten to add up to a conclusive case against allowing any kind of euthanasia, especially active euthanasia. This is the danger of intentional abuse.

Think of the people who might be in a hurry for some ill person's death. Some of these might be people who have to care for the ill person, or pay for the care and medicine the person receives. Another group, often overlapping with the first, is made up of the person's heirs. The

heirs might even include the hospital in which the person lies. With so much to gain from an early death of the ill person, these people might easily convince themselves that the ill person would be better off dead. If it were left up to these people, many ill people might unnecessarily be killed or allowed to die. A system which allowed this would both result in unnecessary deaths and terrify the ill.

Even without these points about intentional abuse, rule-utilitarians have enough reason to disallow *involuntary* euthanasia. But do the points about intentional abuse add up to a compelling rule-utilitarian argument against *voluntary* euthanasia? Certainly they necessitate severe restrictions at the very least.

One sensible restriction would be that, with a single exception, the people given authority in the decision about euthanasia must be people with nothing to gain directly or indirectly from their decision. The single exception is of course the patient himself or herself. But heirs and those who stand to benefit from heirs could be denied any authoritative say in the matter. Thus if a hospital is itself an heir, its doctors could be precluded from having any role, including that of making or confirming the diagnosis. The law could be designed to ensure that the decision to perform euthanasia on a patient is made by people focusing on the wishes and best interests of the patient. Of course the patient may ask loved and trusted others, including heirs, what they think. But the law could insist that doctors with nothing to gain certify that the patient really would be, at the time of the euthanasia, better off dead. And the law could insist that the patient be asked on a number of occasions whether he or she really does want euthanasia. Patients will need the law to protect them against coercive pressures by family and other heirs (not that the law can ever entirely protect us from our families).

Focus now on *non-voluntary* euthanasia – euthanasia performed on people who have not indicated whether or not they want their lives to be prolonged. Some patients have never been in a position to give or withhold consent. This is true of individuals who never developed sufficient rationality to be capable of consenting. Any euthanasia performed on such people will

be non-voluntary euthanasia. Rule-utilitarians might well think that a cost–benefit analysis of this sort of euthanasia would end up supporting it – given that the law is designed so as to ensure that the people making the final decision are experts with nothing but the best interests of the patient in mind.

But what about patients who were once rational enough to consent or withhold consent but never made their wishes known and now are incapable of prolonged rationality? Rule-utilitarians can think that to allow euthanasia would be best here too. A more important question, however, might be whether the law should require adults now in possession of their faculties to indicate formally whether they want euthanasia if they become terminally ill and are plagued by acute pain which can be mollified only by severely mind-altering drugs. It might actually increase autonomy to get people to decide whether they would want euthanasia for themselves before they are unable to make such decisions. Obviously, the system for doing this would have to involve informing people what they were being asked to decide about. It would also need to be designed so as to make sure people's decisions are their own, i.e., not the result of some sort of coercion. Furthermore, ideally the system would annually ask for confirmation that people haven't changed their minds (there could be a box to check on annual tax returns).

Some people will think that, no matter how clever rule-utilitarians are in adding safeguards to a law allowing euthanasia, there will be at least a few people who manage to subvert it, and so abuses will occur. Rule-utilitarians may grant this, but then ask how many such abuses there would be. Would there be so many abuses as to terrify the general population? These questions are ones of sociology and social psychology. If the answers to them are that the abuses would be extremely rare and the general population would not become paranoid over them, then a rule-utilitarian might be willing to accept that, if some abuse is inevitable, this cost of a few abuses would be worth the benefits of allowing euthanasia.

There is one more potential harm associated with allowing voluntary and non-voluntary

Euthanasia

active euthanasia. To allow them might seem to be a step onto a slippery slope to a very undesirable position. As I have already noted, the prohibition on killing the innocent against their will is an immensely valuable, indeed essential, prohibition. Would people slide away from a firm commitment to that prohibition if they came to accept the permissibility of voluntary and non-voluntary active euthanasia?

This question, like the question of whether the level of intentional abuse would be unacceptably high, is really one for social scientists. Any answers to such questions have to be partly speculative. We ought to know by now that large social, economic, or legal changes often have unexpected results. We cannot be *certain* what the results of allowing voluntary and non-voluntary active euthanasia would be. Rule-utilitarians have to make a judgment based on what they think the probabilities are. And with respect to the sorts of changes under discussion here, reasonable people can disagree about the probabilities. Thus, reasonable rule-utilitarians can come down on different sides about the permissibility of voluntary and non-voluntary active euthanasia.

But even where there is reasonable disagreement, there can be a right answer. The success of voluntary active euthanasia in Holland suggests that the worries about abuse and slippery slopes can be answered. Of course any law allowing euthanasia (especially, active euthanasia) would need to be very carefully drafted. And the law would have to be rigorously policed, to prevent abuse. Though not certain, I am confident these things could be done. And, undeniably, the benefits, mainly in terms of the decrease of suffering and the increase in autonomy, are potentially enormous.

Notes

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- 1 Though utilitarians may also favor some restrictions on this. I remember that in Tennessee in the 1960s there was a Christian sect using rattlesnakes in church services. As I remember, the govern-

ment stopped the practice after it led to a few deaths, and the courts upheld that freedom of religion did not extend to persuading people to submit to lethal dangers during worship. These decisions could well be supported on utilitarian grounds.

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