



## Saving People from the Harm of Death

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### CHAPTER

## 7 The Badness of Dying Early

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### Abstract

A common intuition suggests that it is less bad for an infant to die than for a young adult to die. This is puzzling because the infant has more life ahead of her than a young adult, so it seems she loses more when she dies. Jeff McMahan supports the common intuition and defends it by means of what he calls the “Time-Relative Interest Account” of the badness of death. I shall describe two possible interpretations of the Time-Relative Interest Account and raise a problem for each. Then I shall offer an alternative defense of the common intuition, which is an extension of the theory in population ethics known as “critical-level utilitarianism.”

**Keywords:** [critical level](#), [gradual creation](#), [neutral level](#), [relative value](#), [value of life](#)

**Subject:** [Moral Philosophy](#)

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### 1. Introduction

A common intuition suggests that it is less bad for an infant to die than for a young adult to die. This is puzzling because the infant has more life ahead of her than a young adult, so it seems she loses more when she dies. Jeff McMahan (2002, 165–174) supports the common intuition and defends it by means of what he calls the “Time-Relative Interest Account” of the badness of death. I shall describe two possible interpretations of the Time-Relative Interest Account and raise a problem for each. Then I shall offer an alternative defense of the common intuition.

### 2. Relativism

When you die, you lose the rest of your life. How bad for you is that? Its badness is the difference between how good your life would have been had you not died when you do and how good it is, given that you die when you do.

To judge on this basis how bad your death is, we have to think out how your life would have progressed, and how long you would have lived, had you not died when you do. This is a difficult counterfactual judgment to make in practice, and this chapter is not about how to make it. Once it is made, we then have to assess how good this counterfactual life would be in comparison with the goodness of your actual life. This chapter is about how to make this assessment. It is about the comparative goodness of lives of different lengths.

p. 106 I take it for granted that an account of the badness of death needs to form part of an account of the goodness of lives. The badness of a death is nothing other than the badness of making a life shorter. Hilary Greaves (chapter 13, this volume) points out that McMahan and other authors may not be thinking ↵ of the badness of death this way. But I would like to develop an account of the badness of death that contributes to decision-making about life and death. As Greaves explains, this is the way to do it.

Should we take the goodness of lives to be temporally neutral or temporally relative? It is plausible that goodness can be relative to a person, at least. For instance, we mostly think that parents should promote their own children's well-being more than other people's. One way to explain this is to suppose that goodness is relative to the person from whose perspective it is judged. Goodness from the perspective of a parent gives more weight to her children's well-being than to other people's.

My question is about a different sort of relativity. Should we take the goodness of a life to be relative to times? To start answering this question, notice that our attitude toward different times in our lives typically varies according to our temporal perspective. Most of us at most times are more concerned about nearby times than remoter ones. We are more concerned about the recent past than about the remote past, and about the immediate future than about the further future.

Jeff McMahan suggests that, not only do we typically have this attitude, we are right to have it. Taking his lead from Derek Parfit (1984, pt. 3), he suggests that our self-directed concern at any time should be more strongly directed toward periods of our lives that are psychologically more closely connected to that time. We should to some extent *discount* less closely connected periods. Since we are generally more closely connected to nearby periods than to more distant ones, we should generally be more concerned about those nearby periods and discount more distant ones.

If we are right to have this time-relative attitude, plausibly it reflects a sort of time-relative goodness. If it does, a person's good relative to the perspective of a particular time gives more weight to how well her life goes at nearby times and discounts more remote times. Like McMahan, I shall use the term "interest" for this sort of time-relative good. A person's interest at one time is not the same as her interest at another time.

We may assume that a person has an interest even at times when she does not have any attitude of concern, for instance when she is an infant or when she suffers from bad dementia. Her interest at those times gives more weight to more closely connected periods of her life and discounts more remote ones. An infant is not at all well connected to the rest of her life, so her interest depends little on her life much beyond the present.

p. 107 This means that, relative to the time when a person is an infant, a long life is not much better for her than a short life in which she dies as an infant. Relative to that time, dying as an infant is not very much against her interest, even if she would have had a long life had she not died. On the other hand, a 20-year-old is generally well connected to her future life. So relative to the time when a person is 20, a long life is much more in her interest than a life that ends at 20. ↵ Relative to this time, dying at 20 is very much against the person's interest, if she would otherwise have had a long life. This provides one explanation of why an infant's death is less bad than the death of a young adult.

The idea of time-relative interest suffers from a difficulty. Each person occupies a sequence of different temporal perspectives. If her interest varies according to the perspective, this can lead to incoherence in

how she ought to act in promoting her interest. Suppose that from the perspective of Monday, it would be more in your interest to go to London on Friday than to go to Paris on Friday. Then it may be that on Monday you should buy a ticket to London. But suppose that on Tuesday it would be more in your interest to go to Paris on Friday than to London on Friday. Then it may be that on Tuesday you should exchange your ticket to London for a ticket to Paris, even if there is a penalty for doing so. Suppose you know on Monday what your interest on Tuesday will be. If you do, you rightly buy a ticket on Monday in the knowledge that on Tuesday this will be the wrong thing to have done. It may even be that on Monday you should take action to prevent yourself from making the change that on Tuesday you should rightly make.

It can plausibly happen that what one person ought to do is to frustrate what another person ought to do. This could be so in a competition, for example. But it could not plausibly happen that what one person ought to do at one time is to frustrate what she ought to do at another time. This implies an implausible fragmentation of personhood. Yet if interest is time-relative, this can happen. The fact that it can lead to this sort of fragmentation constitutes a case against time-relative interest.

In commenting on McMahan in my book *Weighing Lives* (Broome 2004, 250–251), I gave an example of this sort of incoherence arising in a case of life-saving. That example involved two people. Now I shall give an example that involves only a single person. Suppose you have a disease that will kill you when you are 90 if it is not treated. Treatment is available that will save your life at that age and give you another 10 years of good life. This treatment, which you will have to undergo at 90, is very unpleasant but takes only a few weeks.

On your 30th birthday, you are fairly well connected psychologically to yourself in your 90s. In your 90s you will remember your 30th birthday, you will remember the resolutions you made then, and you will stick to them. So from the perspective of your 30th birthday, dying at 90 would be against your interest. The unpleasant treatment is worthwhile for the sake of 10 more years of life.

However, by the time you reach your 90th birthday, your short-term memory is weak. On that birthday you are only weakly connected to your later life. From the perspective of your 90th birthday, the 10 more years of life count little. They are not enough to make it in your interest to suffer the painful treatment in the immediate future for the sake of saving your life. From this perspective, it is in your interest to die at 90.

p. 108 Suppose you ought to act at each time according to your interest at that time. At 90 you ought to decline the treatment. At 30, knowing this, you ought to try to find a way to prevent yourself from declining the treatment. Perhaps you can make a living will or appoint an attorney to prevent it. But it cannot plausibly be right that you ought to frustrate what is in your future interest in this way, to prevent yourself from making a decision at 90 that is in your interest at that time. This is a difficulty for the idea of time-relative interest.

### 3. An Alternative Interpretation

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At first, I thought that McMahan's Time-Relative Interest Account of the badness of death is the one I have just given. A person has an interest that is relative to times. The goodness or badness for her of an event is the degree to which the event promotes or harms her interest. This has to be time-relative too since her interest is time-relative. The consequence is that the goodness or badness for a person of an event, including dying, is relative to the time when it is evaluated. Dying at a particular time may receive different evaluations from the perspective of different times. This leads to the potential difficulty of incoherence I described.

However, it turns out that I misinterpreted McMahan. As I now understand him, McMahan intends the badness for a person of dying to be evaluated always on the basis of the person's interest at the time she dies. It depends on the time of the death, but it does not depend on the time when the death is evaluated.

Take my previous example again. On the new interpretation, dying at 90 is always beneficial for you, whether evaluated when you are 90 or at any other time, because it is in your interest when you are 90. I previously said that dying at 90 is against your interest when evaluated from the perspective of your 30th birthday. But on this new interpretation, it is good for you even when evaluated on your 30th birthday.

The valuation of your dying is not time-relative, even though it is based on your time-relative interest at the time you die. If you die at some time and your death is bad for you, it is bad for you simpliciter – nonrelatively – and not merely bad for you from the perspective of a particular time. Dying at that time is worse for you than continuing to live would have been. By this I mean that the life in which you die at that time is worse for you than the longer life you would otherwise have lived.

p. 109 I am not sure whether I have understood McMahan correctly this time. But my new interpretation is at any rate the account of the badness of death I once proposed myself (Broome 1985) and immediately rejected. I cannot now see the attraction of it. We are assuming you have a time-relative interest. When, at some time, you are evaluating your death, why would you not evaluate it on the basis of your interest relative to that time? In my example, when you are  $\hookrightarrow$  30, why would you not evaluate your death according to your interest at 30? Dying at 90 is against your interest at 30; why would you not recognize that?

I am not persuaded by the idea of time-relative interests. But if I were, I would be thoroughgoing about it. I would evaluate everything relative to time-relative interests. Take another example. I would be willing to believe that, had I died as an infant, my dying would not have been greatly against my interest at that time. Evaluated according to my interest at that time, it might not have been a great tragedy. But now I am old I have had and still have many good things in my life. If I had died as an infant, I would have missed all those things. These are things that, from my present perspective, it is very much in my interest to have and to have had. So from my present perspective, dying as an infant would have been a great loss to me. From my present perspective, it would have been a tragedy.

True, the new interpretation avoids the problem of incoherence I mentioned in section 2. But it has its own, different problem of incoherence. Think of three possible lives you might have that can be described respectively by the three vectors  $(1)$ ,  $(1, 1, 1)$ , and  $(1, -1, 4)$ . Each place in a vector stands for a period of life: the first infancy, the second childhood, and the third adulthood. In the first of the three lives, you die at the end of infancy. Each place in a vector contains a number that represents your well-being in the period it stands for. I assume for the sake of argument that the measure of well-being is cardinal, and the zero is set at what I call *the neutral level for continuing to live*. This is the level such that living through a period at that level is equally as good as not living through it and dying instead.

Suppose that you as an infant are psychologically connected to some extent with your childhood but not at all with your adulthood. Then  $(1)$ , where you die as an infant, is more in your interest at that time than  $(1, -1, 4)$ . So if you die as an infant and, had you lived, your life would have been  $(1, -1, 4)$ , then dying is in your interest when you die. According to the new interpretation, it is therefore good for you nonrelatively. The short life  $(1)$  is nonrelatively better for you than the long life  $(1, -1, 4)$ . Correspondingly,  $(1, 1, 1)$  is more in your interest in infancy than is  $(1)$ . Dying as an infant is against your interest when you die if, were you to have lived, your life would have been  $(1, 1, 1)$ . Therefore  $(1, 1, 1)$  is nonrelatively better for you than  $(1)$ .

p. 110 Between  $(1, 1, 1)$  and  $(1, -1, 4)$ , which is better for you? This is a matter of how the overall goodness of your life depends on your well-being during the various periods of your life. If we assume for simplicity that, when we compare lives of the same length, their overall goodness is just the total of your well-being in all the periods of life, then  $(1, -1, 4)$  is better for you than  $(1, 1, 1)$ . We end up with a cycle of betterness for you:  $(1, -1, 4)$  is better for you than  $(1, 1, 1)$ , which is better for you than  $(1)$ , which is better for you than  $(1, -1, 4)$ . If the goodness of your life were to depend in a different way—not simply the  $\hookrightarrow$  total—on your well-being in the periods of life, I would change the numbers to produce the same cyclic result.

But there cannot be a cycle of betterness for you. Betterness is necessarily an acyclic relation. So this conclusion is incoherent. There must be something wrong with a theory that leads to it.

## 4. An Integrated Account of the Value of Life

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I have a different explanation of why dying early may be less bad than dying later. It develops a suggestion made by McMahan himself. McMahan says that “the death of an infant is . . . intermediate between nonconception and the death of a person” (2002, 171). To develop this idea, I shall start by inserting nonconception into a broader account of the goodness of lives.

A benefit of doing so is that it integrates an account of the badness of death with an account of the goodness of people’s existence or nonexistence, with population axiology, that is to say. Creating a person and extending a person’s life are both ways of adding life to the world. So we clearly should have an account that incorporates both. The aim of my book *Weighing Lives* (Broome 2004) was to provide one. Here I shall slightly extend the account in my book to explain how dying early may be less bad than dying later.

The work will be easier if we adopt a specific account of the goodness of lives to start off with. I shall assume the one that is developed in *Weighing Lives*: that one life is better than another if and only if it contains a greater total of well-being. That is to say, one life is better than another if and only if it contains a greater total of the well-being that the person enjoys in the various periods of her life. This is a simple account to work with, and it is defended in my book, but what follows does not depend on it essentially. I could have used another account instead, though it would have made the work more complicated. In any case, I shall modify this account in what follows.

The various lives you might lead are ordered by their goodness for you, from the best to the worst. For instance, given my account,  $(1, -1, 4)$  is above  $(1, 1, 1)$ , which is above  $(1)$ . The next task is to place nonconception somewhere in this ordering, above lives that are worse than nonconception and below lives that are better than nonconception.

“Better” and “worse” in what sense? So far I have been dealing only with goodness for you, the person whose lives we are considering. I call this your *personal good*. Some philosophers (e.g., Broome 1999) say that nonconception cannot be better or worse for you than living a life, so it has no place within the ordering of personal goodness. Others (e.g., Arrhenius and Rabinowicz 2015) say it can, so it does have a place. We have no need to settle this debate. We can switch our attention away from personal good toward general good, and it will soon turn out that we have to do so anyway. General good is the  $\downarrow$  goodness of the world. It is made up, at least partly, of the good of people. Each person’s personal good contributes to general good.

In switching attention to general good, I shall continue to concentrate on only one person. I shall attend to general good only insofar as it is affected by this person’s existence and life. We can hold constant everything apart from whether or not this person is conceived, and if she is conceived, how her life goes. Holding all this constant, the greater is a person’s personal good, if she is conceived, the greater is general good. So, holding all this constant, the ordering by general betterness of worlds where she is conceived exactly matches the ordering of this person’s lives by betterness for her.

What if she is not conceived? Still holding all other things constant, the world in which this person is not conceived has a place in the ordering of worlds by general betterness: it is generally better than some worlds in which she is conceived, and generally worse than others in which she is conceived. The place of this world in the ordering of worlds by general betterness gives the person’s nonconception a position in the ordering of lives by their betterness for the person. It is higher than some lives and lower than others.

But where, actually, in the ordering of possible lives does nonconception come? Let us ask first where it stands in comparison with lives that contain no well-being, such as  $(0, 0, 0)$ ? Given the way I defined the zero of well-being, these are lives that are lived throughout at the neutral level for continuing to live. Once a life like this has started, continuing to live it is always equally as good as dying. I call it a *constantly neutral life*.

I assume that nonconception is better than a constantly neutral life. I have various grounds for this assumption. The first is that it is intuitively attractive. It means that if someone's life is only just on the borderline of being worth continuing once it has started, it would have been better if it had not started at all. This is intuitively plausible.

My second ground is that this assumption provides a persuasive response to some of the difficulties of population axiology, including the repugnant conclusion. *Weighing Lives* explains how (see also Blackorby, Donaldson, and Bossert 2005).

My third ground is that it has a further intuitively attractive consequence. Imagine that some period of life with a given level of well-being can somehow be added to the world. It could be added to the life of someone already living, or alternatively, a new person could be created who lives through this period. The assumption implies that the former option is better than the latter. As means of adding well-being to the world, extending life is better than creating life. For example, it is better to have one person with the life  $(1, 1, 1)$  than two people with the lives  $(1, 1)$  and  $(1)$ . This is intuitively plausible in its own right, and I shall show how it can be developed in a way that explains why dying early may be less bad than dying later.

p. 112 For all these reasons, I assume that nonconception is better than a constantly neutral life. It will be equally as good as some particular life that is better than a constantly neutral life. Just for the sake of an illustration, let us assume that nonconception is equally as good as the life  $(1, 1, 1)$ . Then  $(1, 1, 1)$  is equally as good as the person's never living at all. Given my assumption that the goodness of a life is the total of the well-being it contains, so are other lives with the same total of well-being, such as  $(0, 3, 0)$  and  $(4, 0, -1)$ . The life  $(1, -1, 4)$  is better than nonconception because it is better than  $(1, 1, 1)$ . The life  $(1)$  is worse than nonconception because it is worse than  $(1, 1, 1)$ . In general, a life is better than nonconception if and only if its total of well-being is more than 3. I call the goodness of a life that is equally as good as nonconception *the neutral level for existence*. In this case it is 3.

You can think of this neutral level as a sort of premium that has to be deducted from general good for the sake of each person's existence. I call it an *existence-premium*. Suppose there is a choice between extending an existing person's life, thereby adding some amount of well-being to her total, or creating a new person who will have a life that contains that same amount of well-being. The latter option is worse, because the premium will need to be set against the well-being. It is always better to add well-being to an existing life than to create a new person to enjoy that amount of well-being.

Now we can return from nonconception to death. We are pursuing the idea that the death of an infant is intermediate between nonconception and the death of a person. A way to make sense of this is to suppose that a person is created gradually. The process of coming into existence starts at some instant, but takes a while to complete. Only once it is completed does a person fully exist.<sup>1</sup>

This idea of gradual creation raises metaphysical puzzles, but nevertheless, it is intuitively very plausible. Indeed, the opposite is very implausible; it is very implausible that a person springs fully into existence at some single moment. It is plausible of many things, such as houses and paintings, that they are created gradually. Intuitively, many things have vague boundaries. For example, as you drive into a city, the place where you enter the city is often vague. Intuitively, cities have vague spatial boundaries, and things such as houses and paintings have vague temporal boundaries. I assume the temporal boundary of a person is vague at least at the person's beginning: people are created gradually.

If a person's creation is gradual, and if it is not completed until sometime after birth, the death of an infant is in a clear sense intermediate between ↪ nonconception and the death of a person. It is the death of something that is partway through the process of becoming a person. This is why we have to attend to general goodness rather than the goodness of a person. Some periods of a life do not belong to a fully created person.

When we turn to the goodness of lives, the existence of an infant that is not fully a person should not require the full existence-premium of a person. Assuming it does not, let us continue with the example. Suppose a person's creation is completed only when she is a child, sometime after she has ceased to be an infant. I continue to assume that the existence-premium for a person is 3. But let us assume that the existence-premium at the end of infancy is only half as much, 1.5. Now suppose someone might die early at the end of her infancy so her life is (1) or else die later at the end of her childhood so her life is (1, 1). Which of these latter two lives is worse?

We can work out the answer by comparing the goodness of the various possible lives with nonconception. Nonconception occupies a fixed place in the ordering of lives by their betterness. So this will indirectly allow us to compare the goodness of the various lives with each other. To compare the goodness of a life with nonconception, we subtract the existence-premium from the total well-being in the life. If the result is positive, the life is better than nonconception; if negative, worse than nonconception.

The life (1, 1) ends at the end of childhood when the creation of a person is already complete, so the existence-premium is 3. The total well-being in this life is 2. So this life is worse than nonconception by 1. The life (1) ends at the end of infancy when the existence-premium is just 1.5. Its total well-being is 1, so this life is worse than nonconception by 0.5. Since 0.5 is less than 1, we conclude that (1, 1) is worse than (1). It is better to die at the end of infancy than at the end of childhood. This is the conclusion I was aiming at: this theory explains how dying early can be less bad than dying later.

A consequence of this conclusion is that living at level 1 through childhood is actually worse than dying before childhood. In her discussion of "Choice Between Deaths," Hilary Greaves (chapter 13, this volume) takes this consequence to be obviously false. I agree it seems puzzling. How could it possibly be true? Because the period of childhood partly constitutes the creation of a person. Just as early death is intermediate between nonconception and the death of a person, adding a period of childhood to a life is intermediate between extending the life of a person already living and creating a new person. I have been assuming that creating a new person whose total well-being is 2 is a bad thing. Extending life from (1) to (1, 1) shares some of its badness.

One technical problem remains. I originally defined the zero of well-being as the level at which continuing a life is equally as good as dying. But that definition has gone by the board. In my example, (1, 1) is worse than (1), even though well-being through the second period of life is positive. What should be done about this?

That (1, 1) is worse than (1) is not because of any lack of well-being in the second period. It is because of the existence-premium, which is to do with the creation of a person and not with well-being. We can continue to define the zero of well-being as the level of well-being in a period of life that is equally as good as dying, provided this period is added to the life of someone who is fully a person. This defines zero for an adult. Then we can say that any other period of life has zero well-being if its well-being is the same as this. This gives us a definition of the zero well-being for an infant or a child.

But to make sense of it, we must be able to identify when an infant or a child has the same well-being as an adult whose well-being is zero. Comparing the well-being of infants, children, and adults is difficult because they lead such different lives. I shall not try to resolve this difficulty here.

## 5. Conclusion

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To summarize my conclusion: I propose that the general goodness of a life—the life’s contribution to the goodness of the world—is the difference between the total of well-being it contains and the existence-premium at the end of the life. If this difference is zero, then a world where this life is lived is equally as good as a world where it is not lived but that is otherwise similar. If the difference is positive, the world is made better by the life’s being lived. If the difference is negative, the world is made worse.

If the creation of a person is gradual, this account of the value of a life explains why dying early may be less bad than dying later. Alternative explanations rest on the Time-Relative Interest Account. I have raised objections to those alternative explanations, and I think this new one is preferable. However, I recognize that metaphysical doubts could be raised about gradual creation.

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## Notes

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- 1 Dean Jamieson et al. (2006) evaluate early deaths using a quantity they call *Acquisition of Life Potential*, which grows from 0 to 1 around the time of a person's birth. The name they give this quantity suggests they may be motivated by the idea that a person's creation is gradual. However, the use they make of it is much better suited to measuring a person's time-relative interest, as Andreas Mogensen explains in chapter 3, this volume.

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