Comment on Brown and Savulescu

Per Algander

Rebecca Brown and Julian Savulescu argue in ‘Responsibility in Healthcare Across Time and Agents’ that if responsibility should play a crucial role in healthcare, then we need a concept of responsibility that reflects that an individual’s behaviour is sometimes, if not routinely, influenced by external factors in various ways. As Brown and Savulescu convincingly show, health-related behaviour in particular is often affected by other agents and typically involves multiple decisions on different occasions. Smoking and a poor diet are but two examples where these factors are salient. Since health-related behaviour is often influenced by others, and often spread out over time, a notion of responsibility that does not take these two factors into account will be inadequate.

In this comment to their paper I wish to raise an issue concerning Brown and Savulescu’s characterisation of individual responsibility for health-related behaviour that involves multiple choices by the same agent over a period of time. For simple acts—smoking a cigarette or eating some junk food for example—Brown and Savulescu assume two necessary conditions for responsibility: a ‘control condition’ and a ‘epistemic condition’. These conditions are intended to capture the plausible idea that agents must have sufficient control over their behaviour and be sufficiently aware of the probable consequences of their actions in order to be responsible for their behaviour.

For complex acts, spread out over time, Brown and Savulescu claim that an adequate notion of responsibility should focus on whether an agent is responsible for the repeated behaviour of, say, smoking rather than whether the agent is responsible for each particular instance of smoking. To deal with these cases they introduce a third condition: the diachronic condition. According to this condition, an agent is responsible for a complex act—the repeated behaviour of smoking for example—only if the agent is responsible for a sufficiently large part of the constituent acts. To illustrate, the diachronic condition holds that an agent is responsible for smoking 20 cigarettes a day for 20 years only if she is responsible for a sufficient number of the simple acts of smoking.

Adding the diachronic condition to the control and epistemic condition seems somewhat puzzling. If a complex behaviour, such as smoking 20 cigarettes a day for 20 years, is an act, then it is unclear why a further condition is warranted. After all, responsibility for such complex behaviour can be assessed by reference to the control condition and the epistemic condition that seems plausible for simple acts. We can ask whether an agent had control over the complex behaviour and whether they were aware of the probable consequences of it. It is therefore unclear why the third condition is needed, at least in so far as a complex behaviour constitutes an act.

Brown and Savulescu might however intend the diachronic condition to be needed in cases where a complex behaviour does not qualify as an act. This would be understandable since much of the complex behaviour that we engage in cannot plausibly be described as acts. For example, complex behaviour such as smoking 20 cigarettes a day for 20 years is typically not the object of any intention to act in such a way and may even be at odds with an agent’s central aims. This suggests that while such behaviour may have acts as constituents it is not itself an act.

However, if a complex behaviour of this kind is not an act then any question of the agent being responsible for the complex behaviour is of questionable relevance, at least in so far as agents are typically not responsible for things they do that are not acts, such as reflexes or automated behaviour. In particular, it raises the question whether we should focus on an agent’s responsibility for her behaviour or for outcomes that are related to her behaviour in some salient way.

Here I think it is more fruitful to pay attention to whether an agent is responsible for an outcome, especially if we consider responsibility across agents. Suppose that Jill has an unhealthy diet because her partner, Jack, offers her unhealthy food on a daily basis. However, were she to reject Jack’s offers then she would be offered and accept her brother Joe’s equally unhealthy food. In this case Jill arguably has control over her act—she could reject Jack’s offers—but she does not have control over the health-related diseases she suffers because of her diet.

Cases with this structure can also arise in diachronic single-person cases. Suppose John is responsible for smoking 20 cigarettes a day for 20 years. However, if John had not smoked to this extent, then he would have smoked to only a slightly lesser extent, which would still have caused the same health-related diseases. John is, therefore, it seems, responsible for his behaviour, but he has no control over the outcome of his behaviour.

Should Jill and John bear the costs of their unhealthy behaviour? That is a question beyond the scope of this comment and also one that Brown and Savulescu do not aim to answer in their paper. However, it seems to me that focusing on whether Jill and John are responsible for the outcomes—their health-related diseases—is to focus on the right thing. If we only pay attention to whether they are responsible for their acts, then we risk missing the seemingly relevant fact that they lack control over, and therefore perhaps also responsibility for, the actual outcome.

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