

Book Review: Fourie, C. and Rid, A. (eds) 2017. *What Is Enough: Sufficiency, Justice, and Health*. New York: Oxford University Press.

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ABSTRACT: This review uses the excellent recent anthology, *What Is Enough: Sufficiency, Justice, and Health*, edited by Carina Fourie and Annette Rid, as a springboard for a discussion of a little-noticed problem for sufficientarian principles governing the distribution of health or health care. All sufficientarian principles must be assigned a scope: a set of individuals among who are to be brought up to the level of sufficiency. When it comes to health and health care, sufficientarians will, rightly, want to reject broad scopes, as they will entail that we are accountable for securing health care for, e.g., wild animals. Unfortunately, any narrow scope will seem morally arbitrary, as it will imply that among all the individuals who could benefit from health care we are obligated to provide it only to some of them. But I suggest here that such arbitrariness is no problem for narrow-scope sufficientarianism in health or health care as long as the principle is cast as a non-fundamental principle of public policy, as opposed to a fundamental moral principle.

KEY WORDS: sufficientarianism, health, health care, distributive justice, animals

In her enormously helpful first contribution to *What Is Enough: Sufficiency, Justice, and Health*, Carina Fourie makes a distinction between instrumental and non-instrumental defenses of sufficientarianism (2017, 16). One offers an instrumental defense of a sufficientarian distribution of some good if one advocates it on the basis that that distribution is required by some non-sufficientarian moral principle. All other defenses of sufficientarian distributions are non-instrumental.¹

In this article I use this distinction as a jumping-off point for exploring the prospects for substantiating sufficientarianism as the, or at least a, valid principle

¹ This isn't quite how Fourie makes out the distinction—her distinction is in kinds of principle whereas mine is in kinds of defense of principle—but it is certainly in the spirit of Fourie's distinction.

governing the distribution of health or health care, in light of the recent entries to that debate collected in the excellent *What Is Enough*. My conclusion will be twofold: 1) the prospects for a successful non-instrumental defense of sufficientarianism in health or health care (SHHC) are dim. 2) SHHC supporters can turn this fact to their advantage.

I begin by pointing out that no distributive principle is complete until its scope has been specified; where the ‘scope’ of a distributive principle is the set of individuals among whom the distribution shall (ideally) hold. This is something none of the chapters in *What Is Enough* addresses, so I’ll strike out on my own for now before coming back to *What Is Enough*.

The first thing to note is that there is a conceptual limit to the scope of a principle of SHHC: the individuals that appear in the scope must be such that it makes conceptual sense to speak of their health (or lack thereof) or of them receiving health care. This limit still leaves us with a potentially very wide scope; plants would qualify.²

Clearly, though, no one is going to offer a non-instrumental argument for a principle of sufficiency in health or health care if its scope is specified so as to include plants, as this would be to argue that it matters morally in itself whether we act so as to guarantee that plants have sufficient health or health care. Granted, some philosophers believe that plants matter morally, but none have argued that there are anything but the most modest moral constraints on our treatment of them. And this version of SHHC would indeed impose non-modest constraints on our treatment of

² We do, after all, speak of plants as being diseased.

plants—it would deem it wrong or at least wrong making for us to fail to guarantee them a certain level of health or health care.³

Narrowing the scope somewhat we arrive a version of SHHC with a scope that includes all and only animals. Again, however, while there are philosophers who believe that non-human animals matter morally, there are none who accept a moral constraint on our treatment of them that is as strict as the version of SHHC under consideration here. Animal-friendly versions of consequentialism, such as Singer’s utilitarianism, impose no constraints at all on our treatment of non-human animals, since consequentialism requires the rejection of constraints *per se*. Meanwhile, the most animal-friendly versions of non-consequentialism, Tom Regan’s (1983) and Gary Francione’s (2008) theories of animal rights, are used by their authors solely to establish *negative* constraints on our treatment of animals, whereas SHHC with the scope we’re currently considering would impose a positive constraint.

What should be apparent so far is that those who want to argue for SHHC should hope that they can find a principled way of defending a narrow scope for their principle, where by ‘narrow’ I simply mean narrower than the two scopes already discussed. Can they? As mentioned already, none of the entries to *What is Health* tackle the scope question, but we can nevertheless ask whether an answer is implicit anywhere in those chapters.

In his entry Robert Huseby discusses the problem of expensive tastes (2017, 72-3). Assume for now that the currency of sufficientarianism is objective

³ Here I have in mind only deontic versions of SHHC—i.e. versions that say something about what is wrong, impermissible, contrary to duty or obligation, etc. This is to be contrasted with axiological sufficientarianism, which Iwao Hirose (2017) explores in his contribution to *What Is Enough*. My view about axiological SHHC, briefly, is (1) that there are scope-related problems for non-instrumental defenses of it, but (2) that the axiological sufficientarian’s best strategy for coping with the scope challenge is quite different from the deontic sufficientarian’s best coping strategy. Because of this, what I say here about deontic sufficientarianism is not intended to apply *mutatis mutandis* to axiological sufficientarianism.

well-being. That being the case, the problem of expensive tastes is that some individuals require many more resources to be brought up to a certain level of objective well-being than do others. If it's true, as I think it is, that plants and animals are congenitally incapable of anything close to the level of objective well-being of which the average human is capable, this would seem to make it the case that to be a plant or an animal is to have expensive tastes *ipso facto*. Perhaps we could then exclude plants and animals from the scope of sufficientarianism on grounds of having expensive tastes. (Huseby himself holds that those with expensive tastes should be dealt with separately from those who do not.)

Suppose instead that we claim, with Huseby, that the proper currency of sufficientarianism is subjective contentment, which is a certain satisfaction with one's life. Since plants and animals aren't self-aware in the way that would be necessary to have contentment, Huseby's sufficientarianism excludes them (and some severely cognitively disabled humans) from its scope right from the start.

Problem solved? Hardly. Maybe it's true that animals should be excluded from the scope of sufficientarianism, but surely it's not because of the problem of expensive tastes nor because they cannot experience contentment. The fact that animals cannot experience contentment seems like a reason to reconsider contentment as the currency of sufficientarianism, and the fact that animals are congenitally incapable of reaching levels of objective well-being that typical humans can reach seems like a reason to insist on multiple thresholds, one for each kind of being; neither fact seems like a justification for excluding plants and animals from the scope of sufficientarianism. Note, further, that the idea of making thresholds relative to capacity for well being, taken to its limit, would require a unique threshold for each individual in the scope. This would constitute an abandonment of, as opposed to an

amendment to, sufficientarianism. The idea behind sufficientarianism is that in spite of our differences we should all be brought up to some unique level.

What a sufficientarian may well want, at this point, is a way of defending a less extreme version of the multiple thresholds view. One possibility is a version of sufficientarianism on which a different threshold is set *for each species*. And one way of defending this view might involve rejecting my just-stated claim that plants and animals are congenitally incapable of anything close to the level of objective well-being of which the average human is capable. One might propose, instead, that each species has its own way of flourishing and that therefore inter-species comparisons in well-being are incoherent. Martha Nussbaum may well be an advocate of this view, as she holds that there is a distinctly human way of flourishing (2006, 179-95) but maintains that animals flourish too (2006, 346-9).

Conveniently enough for us, Nussbaum is, as various contributors to *What Is Enough* point out, a sufficientarian. Indeed, Ram-Tiktin (2017) and Mitchell et al. (2017), in their respective sympathetic discussions of sufficientarianism in health and health care, each draw on Nussbaum's capabilities approach.

I admit that *if Nussbaum were right* that there is a way of flourishing unique to each species and that each individual is capable of flourishing only in its species-typical way, then sufficientarians would have a principled way of answering the scope question—specifically, that they would have a principled way of arguing for multiple species-specific scopes and a different sufficiency threshold for each such scope. But we cannot accept this view while also accepting that flourishing is the proper currency of sufficientarian morality. Nussbaum's view about flourishing has the implication, which she admits, that some humans, including some sentient humans, cannot flourish (2006, 187; 2011, 31). It is clear, however, that any

individual that is sentient has a well-being, in which case Nussbaum must admit that some individuals with a well-being cannot flourish. That being the case, one would think that moral questions would apply to all individuals with a well-being as opposed to just those individuals that can flourish. So it's not that a principle of sufficiency-of-flourishing, with a different scope for each species, couldn't be valid; rather, it's that it would fail to answer some important questions, such as what we owe to the sentient humans who cannot flourish. Granted, some sufficientarians, including Fleck (2017) in his contribution to *What Is Enough*, are at pains to emphasize that sufficientarianism could be just one element of a pluralistic moral view, in which case it would be unreasonable to demand that it answer all the important questions. But it is hard to believe that the question of what we owe to some individuals vis à vis their well-being should be addressed separately from the question of what we owe to other individuals vis à vis their well-being on the grounds that the members of one set are capable of achieving species-specific flourishing while the members of the other set are not.

We have been asking whether any of the chapters in *What Is Enough* provide the basis for a principled argument for ascribing a narrow scope to SHHC. Now consider the following two passages from the book:

In all modern societies, people disagree about how to distribute the benefits and burdens that arise from their mutual cooperation [...]. Theories of distributive justice seek to elucidate such disagreements by establishing principles pointing out the *just* manner of distributing these benefits and burdens. One such family of theories claims that justice involves ensuring that everyone has *enough*—so-called theories of sufficiency...

(Axelsen and Nielson 2017, 101, emphasis in the original)

Justice is a political concept that describes the moral conduct of the basic institutions of a state....A just pattern of distribution of health care services is sufficiency... (Ram-Tiktin 2017, 145-6)

Both of these passages convey the idea that sufficientarianism is supposed to be a principle of (distributive) justice, specifically, and that '(distributive) justice' denotes a certain subject matter, namely questions of political morality or—what I take it is supposed to be the same thing—moral questions arising from our cooperative activities.

If *that* is what sufficientarianism is supposed to be, then the prospects for giving a principled defense of a narrow scope for one's sufficientarian principle are suddenly brighter. Suppose it could be established that only humans take part in cooperative activities with humans. Or suppose it could be established that only domesticated animals and humans take part in cooperative activities with humans, as Sue Donaldson and Will Kymlicka (2011) argue in their book *Zoopolis*. Establishing either of these claims would mean establishing—to put it inexcusably crudely—that only humans, or only humans and domesticated animals, matter politically. The plausibility of that claim—and the corresponding implausibility of the claim that only humans, or only humans and domesticated animals, matter morally—explains why defending SHHC as a political principle as opposed to as a moral principle raises the odds of being able to offer a sound defense of attaching a narrow scope to that principle.

Having established that only humans, or only humans and domesticated animals, take part in cooperative activities with humans, the next step would be to establish, further, that only those individuals are in the *demos*—i.e. the set of individuals whose interests and preferences ought to determine the contours of the

basic social and political institutions that humans have set up. From this it would seem to follow easily that our health care institutions should be designed to serve the interests and preferences of only humans or only humans and domesticated animals. Therefore, if it could be established that SHHC is the morally privileged understanding of how to respect individuals' interests and preferences in the arena of health and health care, it could then be established that that principle has a narrow scope—a scope including only humans or only humans and domesticated animals.

Now the crucial point: This kind of defense of SHHC would count as an instrumental defense. One would be arguing, with respect to the given sufficientarian principle of health or health care, that upholding it is indirectly required by the principle requiring that society's basic institutions be structured to serve the interests and preferences of the members of the *demos*.

I contend that this is the only kind of defense of SHHC that has any prospect of success. Briefly, my argument runs like this: Versions of SHHC with a broad scope (i.e. ones that include at least all animals) are so counterintuitive as to not merit our attention. Meanwhile, versions of SHHC with a narrow scope face an arbitrariness worry: What justifies the narrow scope? The only viable way of rendering a narrow scope non-arbitrary is by making one's preferred version of SHHC a political principle and arguing that it follows from the principle requiring that society's basic institutions be structured to serve the interests and preferences of the members of the *demos*.

The fact that the only viable defenses of SHHC are instrumental is quite good news for sufficientarians in one way. (I'm not arguing that it's good news overall.) It relieves sufficientarians of the burden of identifying a version of

sufficientarianism in health/health care that isn't drastically counterintuitive. This is a big deal, as one comes away from *What Is Enough* with an acute appreciation for just how deep the counterintuitive implications problem is for sufficientarianism per se. The book's contributors, most of whom are sympathetic to sufficientarianism, are admirably forthright about these problems, especially the authors of the chapters in Part II of the book.⁴ For instance, sufficientarianism allegedly implies that...

- ...“[f]or any population with negative well-being (e.g., tormented lives), there is a population with positive well-being that is worse, other things being equal” (Hirose 2017, 66), and...
- ...the benefits realized for large numbers of people by the presence of a good road network are outweighed, morally speaking, by the risks of severe injury and death to those who would construct the road (Huseby 2017, 77), and...
- ...we should sometimes prioritize benefits to those who are just below the sufficiency threshold over benefits to those who fall farther below that threshold (Shields 2017, 93).

The usual way of fixing a principle that has drastically counterintuitive implications is to insert qualifications, exceptions, sub-clauses, etc. This, of course, undermines one's claim to have identified a genuine moral principle—i.e. something that is morally important in and of itself. But once sufficientarians in health/health care give up on the goal of offering a non-instrumental defense of that principle, they suddenly have two compelling ways of answering detractors who point up the counterintuitive implications of their principle.

⁴ Although Part II is helpful in this regard, it is, nevertheless, overall the weakest Part of the book. The chapters in this Part are, generally speaking, too quick with their arguments.

First strategy: gerrymander away! Essentially SHHC supporters can and should reconceive themselves as doing public policy work—i.e. crafting a version of sufficientarianism in health/health care that is workable, sensible, and worthy of being approved of through the democratic process. (Though see Menzel's (2017) and Fleck's (2017) contributions to *What is Health*, each of which is skeptical as to whether SHHC is determinate enough to guide real-world health policy decisions.)

Second strategy: companions-in-guilt. SHHC supporters can argue that it's no strike against their principle if it delivers counterintuitive case-specific implications; specifically, they can insist that it is an inevitable feature of large, bureaucratic democracies that they adopt principles that give odd results in certain cases. Consider, for instance, the minimum drinking age. At what age a person should be permitted to consume alcohol depends on that particular person's qualities, especially the pace at which he/she matures. However, in large societies we have little choice but to just pick one age for everyone. That one age, whatever it is, will deliver counterintuitive results in many cases. With respect to some people it will deem them eligible to drink when really the person ought not to be eligible, while in other cases it will deem someone ineligible to drink when that person should in fact be eligible. These counterintuitive results do not, however, on anyone's understanding of public policy, constitute an argument against the minimum drinking age in question. The only way to argue against a particular minimum drinking age is to show that there's some other minimum drinking age that gets fewer, or fewer egregious, counterintuitive results. Likewise, I am suggesting that if we frame SHHC as a principle of public policy then that automatically renders less forceful all objections to it based on its counterintuitive implications.

In putting together *What Is Enough*, the editors Carina Fourie and Annette Rid have done a magnificent service to scholarship in both sufficientarianism, the ethics of health and health care distribution, and of course the overlap of those two disciplines. Given the immediate appeal of sufficientarian approaches to the distribution of health and health care, a book-length treatment of the subject was entirely called for. In *What Is Enough*, Fourie and Rid have amassed novel contributions by nearly all the big names, making the book essential reading for those interested the topic.

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