



Should we Hold the Obese Responsible?

Some Key Issues

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Published in:
Cambridge Quarterly of Healthcare Ethics

DOI:
[10.1017/S0963180114000115](https://doi.org/10.1017/S0963180114000115)

Publication date:
2014

Document version
Early version, also known as pre-print

Citation for published version (APA):
Nielsen, M. E. J., & Andersen, M. M. (2014). Should we Hold the Obese Responsible? Some Key Issues. *Cambridge Quarterly of Healthcare Ethics*, 23(4), 443-451. <https://doi.org/10.1017/S0963180114000115>

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6 *Some Key Issues*

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11 **Abstract:** It is a common belief that obesity is wholly or partially a question of personal
12 choice and personal responsibility. It is also widely assumed that when individuals are
13 responsible for some unfortunate state of affairs, society bears no burden to compensate
14 them. This article focuses on two conceptualizations of responsibility: backward-looking
15 and forward-looking conceptualizations. When ascertaining responsibility in a backward-
16 looking sense, one has to determine how that state of affairs came into being or where the
17 agent stood in relation to it. In contrast, a forward-looking conceptualization of responsibility
18 puts aside questions of the past and holds a person responsible by reference to some desirable
19 future state of affairs and will typically mean that that he or she is subjected to criticism,
20 censure, or other negative appraisals or that he or she is held *cost*-responsible in some
21 form, for example, in terms of demanded compensation, loss of privileges, or similar. One
22 example of this view is the debate as to whether the obese should be denied, wholly or
23 partially, free and equal access to healthcare, *not* because they are somehow personally
24 responsible in the backward-looking sense but simply because holding the obese responsible
25 will have positive consequences. Taking these two conceptions of responsibility into account,
26 the authors turn their analysis toward examining the relevant moral considerations to
be taken into account when public policies regarding obesity rely on such a conception
of responsibility.

27 **Keywords:** obesity; personal responsibility; health care allocation; social inequality in health;
28 distributive justice; luck egalitarianism

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32 Many believe that most individuals are wholly or partially *personally responsible*
33 for being overweight or obese:¹ obesity is wholly or partially a question of *choice*.
34 Many also believe that when an individual is responsible for some unfortunate
35 state of affairs, then society does not owe that individual compensation. This view
36 is central to the theory of luck egalitarianism,² and many laypersons seem to
37 agree.³

38 Responsibility can be understood in many quite different senses. We shall focus
39 on two central types of conception. A *backward-looking* conception of responsibility
40 concerns, ultimately, control over (or some other form of relation to) choices and
41 causes of some state of affairs, for which one can then be said to be responsible, or
42 some other connection between prior and later states of affairs. When ascertaining
43 whether or not an individual is responsible for some state of affairs, one has
44 to look backward to how that state of affairs came to be or which relation the
45 agent stood in vis-à-vis that state of affairs. The other rendering of responsibility
46 is *forward looking*. This is the form of responsibility involved in, for example,
47 deterrence. One might ignore questions of the past completely when arguing that
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50 We would very much like to thank Nils Holtug of the Philosophy Department of the University of
Copenhagen for helpful comments to this article.

1 a person should be incarcerated—what justifies holding someone responsible is
2 the expected outcome that it will deter other potential criminals, and so on.

3 Imagine that personal responsibility in the backward-looking sense is impossible,
4 or at least so extremely unlikely to hold true that it is not intellectually honest
5 to defend. Where would that leave “responsibility” in the moral landscape for
6 decisionmakers, politicians, practitioners, and so on? Would the obese have no
7 responsibility for the (eventual) ensuing consequences of their obesity? Dismissing
8 the backward-looking notion of responsibility clearly implies that we should
9 not—indeed, cannot—justify differential treatment (in a broad sense) of different
10 citizens in virtue of their different levels of responsibility for prior choices or
11 previous states of affairs. However, forward-looking responsibility—*holding*
12 persons responsible, as it were—might still be justified, for example, on the grounds
13 of efficiency or, ultimately, promotion of welfare. What are the relevant moral consid-
14 erations to be taken into account when public policies regarding obesity rely on such
15 a conception of responsibility? This is the question we want to pursue in this article.

16 In order to justify posing the question in this way, however, we need first to
17 make a case for denying the cogency of backward-looking responsibility. This
18 necessarily takes us into thorny patches of metaphysical discussion, such as the
19 debate over free will, compatibilism, and agent causality. While running the risk
20 of oversimplification, we attempt to make that journey as comfortable as possible.

21 We then turn to the practical implications of setting backward-looking respon-
22 sibility aside for the question of obesity. We here focus on the following questions:
23 Is it really efficient, in terms of welfare, to hold the obese responsible? If there are
24 ways in which it is efficient, so understood, which other moral concerns are
25 relevant? How would such a policy fit with due considerations about equal respect
26 for differing conceptions of the good in liberal societies?

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The Impossibility of Backward-Looking Responsibility

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The Naturalistic Approach to Responsibility

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(1) It is undeniable that one is the way one is, initially, as a result of heredity
and early experience, and it is undeniable that these are things for which
one cannot be held to be in any way responsible (morally or otherwise).

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1 (2) One cannot in any later stage of life hope to accede to true moral
2 responsibility for the way one is by trying to change the way one already
3 is as a result of heredity and previous experience.

4 (3) For both the particular way in which one is moved to try to change
5 oneself, and the degree of one's success in one's attempt at change, will
6 be determined by how one already is as a result of heredity and previous
7 experience.

8 (4) And any further changes that one can bring about only after one has
9 brought about certain initial changes will in turn be determined, via the
10 initial changes, by heredity and previous experience.⁴

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12 Now, if we ask *why* Sam eats the third piece of cake, it seems that whatever cause
13 we will find to explain it will itself be an effect of another cause, which also will be
14 an effect of a cause, and so forth. We will soon realize that when Sam is eating the
15 third piece of cake, it is the result of a chain of causes and effects involving not just
16 Sam's earlier experiences but also in fact events and states before Sam was born,
17 such as genes and epigenetic influences. Sam eats the third piece of cake simply
18 due to reasons that are ultimately beyond Sam's control, and, similarly, if Sam
19 *changes* eating behavior and somehow manage to eat less cake, it would also be
20 due to reasons that are ultimately beyond Sam's control. How could Sam ever be
21 responsible for that?

22 The naturalistic approach to responsibility can be expressed in two formal
23 requirements: A person P is responsible for an act (or omission) X only if

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25 1) P had the ability to do otherwise, that is, not to perform X (the ability-to-do-
26 otherwise requirement).⁵

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28 If every event in the world is determined by prior causes, then Sam can never do
29 otherwise. However, we do not know if every event in the world is determined by
30 prior causes. There may simply be random factors. If this is so, then Sam may have
31 had the ability to do otherwise. But we are not looking for the ability to do otherwise
32 due to random factors—we want *Sam*, not some random factors, to be the very
33 cause of the action. We are looking for Sam's *self-determination*, and we therefore
34 need a second requirement:

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36 2) P is responsible for the causes of X (regression requirement).⁶

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38 Combining the ability-to-do-otherwise requirement with the regression require-
39 ment, we cannot ascribe responsibility to Sam in cases in which Sam *could* have
40 done otherwise, but only due to random factors. If Sam's choices and actions are
41 determined *or* random, then Sam cannot be responsible. This seems indeed intuiti-
42 vely plausible, and if this is so, then responsibility begins to look impossible.
43 However, there is one alternative remaining that may make responsibility possible
44 given our two requirements. This is the possibility of *agent causality*.

45 Agent causality is the view that agents are able to start new causal chains that are
46 neither predetermined nor completely random. However, agent causality is highly
47 contestable, and no one seems to have given any fully satisfactory explanation of
48 how it is supposed to work.⁷ It is of course difficult, if not impossible, to demon-
49 strate the falsity of agent causality, but following a method of inference to the best

1 explanation, agent causality is probably ruled out. If Sam eats five cakes as an
2 agent-causal performance, it follows that there is no further causal explanation as
3 to *why* Sam did so other than Sam doing so: Sam did it, and that is the *cause*. But
4 this seems to be a complete denial of the very strong and widespread intuition that
5 events, including human acts, happen for causal reasons. If Sam eats five cakes,
6 it seems to be a rather unsatisfying explanation just to say that Sam ate the cakes
7 because Sam did so. Few would probably agree that Sam's decision to eat five
8 cakes has no further causal explanations, such as psychological conditions and
9 social circumstances. Thus, agent causality is probably false, and if so, then, on a
10 naturalistic account, responsibility is impossible.

11 12 *Compatibilist Accounts of Responsibility* 13

14 The fact that Sam is eating the cakes is probably determined by heredity and earlier
15 experiences. Unless agent causality is possible, Sam is therefore never able to do
16 otherwise in such a way that satisfies the regression requirement. But one may
17 challenge the very claim that the *ability to do otherwise* is what responsibility requires.
18 One influential compatibilistic account focuses on our "true identity": if there is a
19 correspondence between our first-order preferences and who we really want to be
20 (our second-order volitions), then we are responsible. So, if Sam in fact wants to over-
21 eat, then Sam is responsible.⁸ Another compatibilistic approach to responsibility
22 focuses on whether an agent is appropriately *responsive to reasons*. In Fischer and
23 Ravizza's influential account, it takes two things for an agent to be responsible. An
24 agent must know the particular facts surrounding his action and must act with the
25 right forms of beliefs and intentions in order to be responsible.⁹ Moreover, an agent
26 must act from a mechanism that is the agent's *own* reasons-responsive mechanism.¹⁰
27 An agent is reason responsive if the mechanism on which he or she acts would, in
28 some possible world in which there is reason to do otherwise, lead him or her to act
29 on that reason and hence do otherwise.¹¹ So, if Sam, in another possible world, would
30 be responsive to relevant reasons not to overeat, then Sam is responsible.

31 These compatibilist accounts can be said to be *ahistoric* views of personal respon-
32 sibility. Roughly, for the former account, what matters is the match or mismatch
33 between an agent's deeply held preferences (identity) and first-order desires, and
34 not the way in which this identity and these desires arose in the first place. For the
35 latter, what matters is whether or not an agent would have responded differently
36 to a counterfactual set of relevant reasons, and the *history* of the reasons-responsive
37 mechanism is only captured by the requirement of the reasons-responsive mecha-
38 nism to be the agents' own. This ahistoric tactic is probably necessary to avoid
39 being entangled in a regress that will inevitably point back to some set of causal
40 factors for which no individual can be responsible.

41 However, this tactic is also a weak spot in both theories, for it seems weird to
42 ignore the past in an assessment of whether or not a given individual is responsible
43 for his or her preferences, identity, or reason responsiveness. When we deliberate
44 about whether or not Sam is responsible for his or her obesity or for its eventual
45 medical consequences, we will, on these accounts, be lead to assess whether Sam
46 identified (repeatedly) with eating the cakes (Was it a part of Sam's true identity?)
47 or whether Sam was appropriately sensitive to reasons, and so on. But if it is a
48 legitimate part of our assessment of Sam's (eventual) responsibility to look at such
49 prior states of affairs, it seems legitimate as well to look at the conditions under

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1 which Sam's identity was formed, or the circumstances relevant for Sam's being
2 appropriately sensitive to reasons. Because one could hardly, if ever, be said to be
3 responsible for *those* conditions and circumstances, it seems wrong to claim that
4 Sam is responsible, all things considered.¹²

5 Moreover, most people are inclined to accept at least some set of excusing or
6 mitigating circumstances when it comes to responsibility. For instance, many
7 would probably accept that if a person is genetically predisposed to become obese
8 (e.g., the thrifty-gene hypothesis), then that would lessen responsibility. The same
9 goes, *mutatis mutandis*, for social conditioning, epigenetic influences, and so on.¹³
10 However, the compatibilist theories just mentioned cannot cater to such intuitions:
11 what matters for them is only identity or reason responsiveness. If one does want
12 to stick to the intuition that genes (and so on) can affect and lessen responsibility,
13 then it seems that one has to go to the naturalistic account—which, inevitably,
14 leads to the conclusion that responsibility is impossible.

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The Forward-Looking Conceptualization of Responsibility: Implications and Moral Considerations

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20 Everything in the previous discussion concerns the backward-looking conceptualiza-
21 tion of responsibility. We now turn to the forward-looking view. Such a rendering is
22 defended by, among others, J. J. C. Smart.¹⁴ In a nutshell, a forward-looking con-
23 ceptualization of responsibility justifies *holding* persons responsible by reference
24 to some desirable future state of affairs: "Whatever responsibility is, considered as
25 a metaphysical state, unless we can tie it to some recognizable social desideratum,
26 it will have no rational claim on our esteem."¹⁵ Holding persons responsible will
27 typically mean either that they are subjected to criticism, censure, or other nega-
28 tive appraisals or that they are held *cost*-responsible in some form, for example, in
29 terms of demanded compensation, loss of privileges, or similar. A key example here
30 is whether the obese should be denied, wholly or partially, free and equal access to
31 healthcare, *not* because they are somehow personally responsible in the backward-
32 looking sense but simply because holding the obese responsible will have positive
33 consequences (fewer obese people, lower healthcare costs, and so on). The following
34 question then arises: should we hold the obese responsible (in the forward-looking
35 sense) because it would have some desirable consequences?

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or acceptability of forward-looking responsibility.

1 A very influential theory of justice in the contemporary political philosophical
2 debate—luck egalitarianism—holds, roughly, that inequalities are unjust except
3 when they “track choice”—implying that it is only if we are indeed responsible for
4 an outcome that we can be held cost-responsible, *ceteris paribus*,¹⁶ and quite a few
5 laypersons seem to agree.¹⁷ Following this theory, if the obese are *not* (backward-
6 looking) responsible, then eventual inequalities stemming from their obesity are
7 indeed unjust—at least *ceteris paribus*. This latter clause is important, because,
8 as we have mentioned, there might be other reasons that could justify holding
9 the obese responsible in a forward-looking manner.¹⁸ Holding the obese cost-
10 responsible may be done, for example, by imposing consumer taxes on fatty food,
11 or, taking a perhaps less sympathetic approach, by demanding that the obese pay
12 for healthcare services related to obesity.

13 This raises a string of further questions. The first one we want to address is the
14 following: is it efficient to hold individuals cost-responsible for the consequences
15 of obesity? We are philosophers, and as such we are ill equipped to answer such
16 empirical questions. However, we can qualify the question. The question ought,
17 first of all, to be the following: does holding individuals responsible for the conse-
18 quences of their obesity promote or protect welfare? Obesity is not intrinsically
19 bad, nor is being lean necessarily good. Moreover, health is not a moral currency,
20 and therefore policies should never be assessed in terms of their impact on health
21 alone. Keeping this in mind, the design of policies and interventions relying
22 on forward-looking responsibility are likely to be much more sensitive (and
23 reasonably so) to all the welfare-affecting issues such policies will inevitably have:
24 criticism and blame will likely lower the mental well-being of the obese, lead to
25 increased stigmatization and stress, lower the status of the obese, and so forth.
26 Imposing *ex ante* costs in the forms of, for example, fat taxes will lower the welfare
27 of those who cannot or will not change their patterns of consumption. And
28 of course, imposing costs on the obese for obesity-related diseases will likely
29 dramatically lower opportunities and welfare for many obese. These and other
30 relevant moral considerations are less likely to be obscured if one focuses on the
31 real issue—welfare—rather than health, BMI, or similar. Moreover, it should
32 always be the case that a given intervention is the most efficient way of raising or
33 protecting welfare *as compared with other courses of action*. In sum, there are reasons
34 to be skeptical about whether holding the obese responsible will in fact (best) pro-
35 mote welfare, all things considered.

36 An alternative way of arguing for the responsabilization of the obese takes its
37 cue not from the purported goal of protecting the health and well-being of the
38 obese but rather from protecting the interests of the healthy: it can be argued that
39 the obese (statistically) impose (unfair) burdens on the healthy.¹⁹ It might then be
40 argued that holding the obese responsible (given that it is effective) is justified at
41 least partly because it serves the interests of the non-obese. Again, assessing
42 whether and when this is the case is an empirical question and depends on how
43 the relevant institutions are set up. However, some research points in the direction
44 that, at least in more egalitarian societies with free and equal access to healthcare
45 as the ideal, the obese are not in fact an all-things-considered economic burden,²⁰
46 even before increased costs to public pensions (on the premise that preventing
47 obesity will lead to increased longevity) are taken into consideration.

48 However, suppose that some way of holding the obese responsible is in fact best
49 in terms of an all-things-considered aggregation of welfare. Utilitarians need not

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1 take other factors into consideration, but for those with other moral inclinations, it
2 is necessary to pose the question, “At what price to other values, such as personal
3 autonomy, equal respect, and so on, can society pursue policies that hold the obese
4 cost-responsible?”²¹ Fleck here mentions three overall issues: trust in the doctor
5 patient-relationship, privacy rights, and personal autonomy. The first two issues
6 concern the fact that if doctors must act as gatekeepers or judges vis-à-vis the
7 health behavior of citizens, then the bonds of trust between doctors and patients
8 are undermined, and the doctor betrays some fundamental, role-related duties
9 (which will more than likely have bad social consequences, apart from breaching
10 those duties), including the duty to respect the privacy rights of the patients.

11 The third issue—the more general question of personal autonomy—relates to the
12 perhaps most acute and controversial question in public health ethics, namely,
13 the controversy over the role and status of personal liberty in the liberal tradition
14 weighed against collective, aggregate interests, for example, of a more communi-
15 tarian bent.²² “The establishment of public health ethics as a discipline in its own
16 right seems innately related to questioning the suitability of a liberal framework.”²³
17 In essence, the question concerns whether or not, or to which degree, it is justifi-
18 able to infringe or violate individual rights of liberty in order to pursue collective
19 goals such as promoting aggregate welfare. In terms more familiar to political
20 philosophers, the question concerns the issue of due respect for individuals’
21 conception of the good: some might set for their own lives the goal of living the
22 longest and healthiest life possible, but such an ideal will remain controversial and
23 cannot command the allegiance of all reasonable citizens. This is, of course, a huge
24 and hugely complicated issue. What remains uncontroversial, at least relatively
25 speaking, is the fact that liberal values speak against heavy-handed responsibili-
26 zation of the obese and other potential victims of so-called lifestyle diseases. This
27 is because pursuing public health by political means runs the risk of violating the
28 liberal requirement of neutrality between competing yet reasonable conceptions
29 of the good.²⁴ Imposing personal costs on citizens having an “indulgent” or
30 “risky” lifestyle is easily translated into forms of moralizing that are incompatible
31 with liberal values. Naturally, there are health-related cases of imposing costs on
32 citizens that only few liberals would deem morally problematic. Outlawing the
33 use of highly dangerous chemicals in food production is justifiable, because no
34 reasonable conception of the good is compromised by that. Conversely, criminal-
35 ization of the selling of fatty foods *will* unduly restrict some reasonable citizens’
36 pursuit of their conception of the good. This of course leaves plenty of room for
37 controversy, including family disputes within the liberal camp over cases that
38 fall between these extremes. Nevertheless, on any plausibly liberal account, the
39 suggestion to penalize some citizens’ conception of the good (or evaluation of the
40 value of health and longevity, if you want), *even if* this produces some socially
41 desirable results, must be scrutinized closely and weighed against the values of
42 public reason given the fact of pluralism, and these values should not be taken
43 lightly. Moreover, we claim that all people, not just liberals, have good reasons to
44 adopt this attitude toward forward-looking responsabilization of the obese. Given
45 pluralism, the liberal vision of the legitimate use of the coercive powers of the state
46 is the most cogent and persuasive on the market, and it is especially relevant when
47 it comes to deeply controversial questions concerning the value of health.²⁵ It is
48 sometimes taken for granted that health claims are somehow less controversial
49 than other lifestyle-related ones.²⁶ In Rawlsian terms, health could be viewed as

1 something akin to a *primary good*, that is, something that all would want more
2 rather than less of, irrespectively of their more particular comprehensive concep-
3 tion of the good. But although it is probably true that all reasonable citizens would
4 prefer good health over bad, it is not true that all emphasize it equally. In particular,
5 which kind of burdens and restrictions and policies and mandates that are accept-
6 able in the pursuit of health will remain deeply controversial among reasonable
7 citizens. In that light, responsabilization of the obese is bound to remain an at least
8 *prima facie* dubious practice as seen from the light of public reason. In Gaus's
9 terms, holding the obese responsible will likely be an authoritarian (tyrannical)
10 rather than an authoritative (justified in the light of public reason) political act.

11 Here, a liberal rejoinder is possible. Most liberals, including liberal egalitarians,
12 deny that a liberal political order is meant to produce equally good outcomes for
13 all people, irrespectively of their conception of the good. The individual with cheap
14 tastes—say, jogging and spring water—will *ceteris paribus* face an easier challenge
15 when it comes to preference satisfaction than the one with expensive tastes—say,
16 for burgundy wine and opulent meals. Because this does not jeopardize neutrality
17 on the standard Rawlsian interpretation of liberal egalitarianism, why should it
18 jeopardize neutrality if we (within reason) make it harder for citizens with a taste
19 for fatty foods to get their preferences satisfied, for example, by *ex ante* taxation of
20 high-fat or high-calorie foods? Our answer is this: if the background for such a
21 policy of *ex ante* taxation were that (1) the obese *are* an all-things-considered burden
22 on other taxpayers, (2) the obese and the non-obese (actually or counterfactually)
23 have equal starting points (i.e., there is no socioeconomic difference between the
24 groups in favor of the non-obese), and (3) the policy is, or is reasonably expected
25 to be, effective in terms of reducing bad consequences of obesity and/or promoting
26 welfare, then holding the obese responsible on a forward-looking conception
27 of responsibility is not necessarily in conflict with neutrality or liberal egalitarian
28 values more generally. However, we find it unlikely that all of the three conditions
29 hold true, or approximately true, in any society—or that they will ever hold true
30 in any future one. Hence, we probably should not hold the obese responsible, on
31 either a backward- or a forward-looking conception of responsibility.

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AUTHOR QUERIES

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