

## Saving lives in the time of Covid-19

The French Prime Minister, Edouard Philippe, recently announced that the lockdown in his country had saved an estimated 62,000 lives in a month. In celebrating this achievement, what assumptions are we making about who has been saved and for how long? If it turned out that the 62,000 were otherwise happy and healthy children, free now to see out their full term of existence, should we see that as *counting for more* than if it turned out the 62,000 were already terminally ill and that 2020 would still prove to be their last year on earth?

Consider the different ways we talk about life at its beginning and at its end. We think of the death of a child as something especially terrible. We speak of children dying when they had their whole lives in front of them, of being taken before their time, of having had everything to live for. We see fate as having stolen from them something that is rightfully theirs – a rich and full life that could otherwise have been. To save a child's life is to do more than buy them a bit more time on earth. It is to buy them a lot more time – their *quota* of time – and the very best quality time at that.

In other cases, we do not think of death as time stolen: our sense is less one of loss than of acceptance or relief. We take comfort in knowing the final days of our elderly uncle were without pain or obvious unhappiness. To die peacefully, surrounded by those we love and with a sense of the world caring about us as we depart, is a blessing, including for those who mourn us. Come a certain point in our existence, we start to worry as much about the *manner* of death (be it our own or that of our loved ones) as about its timing. To have lived life to the full and to go out loved, with your head held high, brings (so we like to think) consolation to extinction.

Taken together, these intuitions appear to give us an order of priority when it comes to saving others. We should give weight to the quantity and quality of life at stake. And we should give weight to granting a peaceful send-off to those we are either unable or unwilling to save.

We may, however, recoil at the whole idea of an order of priority. It does not matter who the 62,000 in France were – old or young, ill or healthy. Life is life: more of it is always preferable to less. How long people live for after we have saved them is in the hands of fate. It is not for us to play God and to pick and choose between who we make an effort to save and who we do not: that would be like leaving people to die in one burning building while you went to another burning building around the corner. Imagine how those you had left behind would feel. Imagine living with that on your conscience.

These are powerful sentiments. The idea of leaving someone to die offends something very deep in us. But to say *if we can save life, we should* raises the question of what it means to say we can do something. Perhaps the authorities in France can save even more lives by imposing a much more severe lockdown or by throwing the country's entire gross domestic

product at the problem. Doing a lot is not the same as doing enough. And doing enough is not the same as doing as much as we can possibly do.

In the end, governments make decisions about life and death in much the same way they make other morally important decisions. They weigh costs and benefits. Maxing out the national credit card on saving life not only restricts our room to pursue other collective goals in the here and now. It also shapes the quantity and quality of life that future generations will be able to enjoy. How many grandparents would trade the benefit of six more months of life *for them* for the cost of their granddaughter missing out in the future on an early diagnosis of breast cancer or on the chance to go to university? Aggregate the answer to this question across millions of lives and you arrive at something that resembles government reasoning and policy.

Judged from the impersonal perspective policy makers inhabit, bracing questions must always be asked. What has been lost to France in the effort to save the 62,000 and will history judge that loss to have been worth it? Were those in fact the *right* 62,000 lives to have been concerned about at all? The belief there is a price on human life, reprehensible as it may seem, would not come as news to policymakers in HM Treasury, charged with directing our national capacities to competing collective goals. Putting a price on human life is how the NHS budget is set each year. The Treasury does not say to the NHS *money is no object, save all the lives you can*.

Does the fact we can save life mean that we ought to? Among politicians, the debate about how far we should be willing to go to save life, how calculations of quantity and quality of life should play into the decisions we make, and how we should understand notions of cost and benefit is still in its infancy. Among ethicists and lawyers, that debate has a long pedigree. Bringing these two worlds together cannot happen soon enough.

In all of this, the distinction between the manner and timing of death remains important. A society that left people to die in hospital corridors, neglected and in pain, would find it hard to look itself in the mirror. Abandoning people to their suffering is an act of grave inhumanity. In comparing death tolls between countries, we must make sure that concerns about the humanity with which the ill and dying were treated are given their due weight.

Before the pandemic, few would have argued that *saving life* should be the ultimate goal of public policy. As we recover our collective bearings, it will slip down the charts in favour of more familiar policy aims relating to economic performance, education attainment, and housing. We may yet look back at these months as a time when, briefly, life itself seemed all that mattered.