

# Chains of Care and the Expanding Circle of Prudential Concern

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**Abstract:** We happen to live in a world in which people stand in long chains of care: some people care about other people, who care about still other people, and so on. We explore an argument according to which chains of care expand the circle of prudential concern for carers. The argument's upshot is that many individuals have a circle of prudential concern that encompasses the welfare of many people, including distant strangers. This result has a range of surprising implications about the scope of prudential concern and our ability to know and control the determinants of our welfare. Natural extensions of the argument suggest that our welfare is—to a surprising *degree*—dependent on the welfare of distant strangers. We consider several proposals for escaping this outcome. It turns out that they are either costly or that they do not provide an escape. We thus provisionally accept that, courtesy of care chains, our significant prudential interests include the welfare of individuals we do not care about or even know.

**Keywords:** care; well-being; prudential rationality; moral circle expansion; love; friendship

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<sup>1</sup> Author order is arbitrary.

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### 1. Introduction

Carol *cares* about people. That's not to say that she regards people as valuable means to her ends or as proper objects of moral concern—though she does regard people as instrumentally valuable and morally significant in these ways. Instead, she cares about people by taking whatever is non-instrumentally good (bad) for them as non-instrumentally good (bad) for her. In other words, unlike the egoist, Carol's circle of (intrinsic) prudential concern encompasses the welfare of others. For example, because she cares about her children, their blessings and misfortunes are hers as well. As Carol likes to put it: if I care about someone, then their welfare is part of mine.

Carol's care is in short supply. The supply is constrained by her finite time and energy and her commitment to investing in relationships with her carees. She is also wary of extending the reach of her care too far beyond the scope of her influence and knowledge, as she would prefer to retain a measure of control over her own welfare. As a result, Carol only cares about her close family and friends.

One day Carol's children inform her that they have close friends, friends that they care about. Carol finds these reports credible. Moreover, she assumes that what is good for her children's close friends is good for her children. More generally, she assumes:

**Transmission:** If  $X$  cares about  $Y$ , then  $Y$ 's welfare is part of  $X$ 's.<sup>2</sup>

Carol understands welfare parthood in a metaphysically-lightweight manner: when she says that  $Y$ 's welfare is part of  $X$ 's she means that  $Y$ 's welfare contributes to at least some degree to  $X$ 's and that the sign of the contribution corresponds to the sign of  $Y$ 's welfare.<sup>3</sup>

Upon noticing the care chain proceeding from her to her children's close friends, Carol infers that her children's close friends' welfare is part of her own. Carol's operative principle here is:

**Transitivity:** If  $X$ 's welfare is part of  $Y$ 's welfare, and  $Y$ 's welfare is part of  $Z$ 's welfare, then  $X$ 's welfare is part of  $Z$ 's welfare.

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<sup>2</sup> We will consider stronger versions of Transmission in §5.

<sup>3</sup> Cf. Nozick (1990: 69).

Carol then notices that this reasoning applies to every person that she is connected to via a chain of care radiating from her. For short: every person she stands in the *ancestral of care* to. The reasoning applies not only to her children's close friends, but also to *their* close friends, and so on. So, Carol infers:

**C1.** If I stand in the ancestral of care to someone, then their welfare is part of mine. (from Transmission and Transitivity)

In other words, just as caring about people expands Carol's circle of prudential concern beyond herself, chains of care expand Carol's circle of prudential concern beyond the people she cares about.<sup>4</sup>

Carol begins to worry. How many people are proper objects of her prudential concern? To get to the bottom of this, she hires a team of investigators. A preliminary investigation yields harrowing news: almost everyone she cares about themselves care about other people. And almost all of those people care about still other people. And so on down the line. Thus, she accepts:

**Ancestral Promiscuity:** I bear the ancestral of care to many people.<sup>5</sup>

These people include complete strangers from across the globe, perhaps along with people that are no longer alive and people who have not yet been born. Putting C1 and Ancestral Promiscuity together, she is driven to an unsettling conclusion:

**C2:** My welfare includes the welfare of many other people.<sup>6</sup>

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<sup>4</sup> See Ridge (2003: 55).

<sup>5</sup> This echoes the 'six degrees of separation' hypothesis that every pair of persons is related by six or fewer chains of social connections—see Watts (2004); cf. Karinthy (1929). By way of comparison with Ancestral Promiscuity, that hypothesis is stronger in some respects (it concerns all people and imposes a numerical requirement on chain length) and weaker in another (it requires some or other social connection, not specifically the ancestral of care).

<sup>6</sup> In her more cautious moments, Carol heads off technical complications raised by self-intersecting chains of welfare transmission. To illustrate, suppose: Carol's friend is happy, Carol cares about her friend, Carol thereby benefits from her friend's happiness, and Carol's friend cares about Carol. In this case, does Carol's friend benefit from Carol's benefiting from the friend's happiness? While Carol is unsure how to answer this question, she also recognizes that the argument can be recast so that it is insensitive to how such issues resolve. She secures such insensitivity as follows. Call the portion of a person's welfare that is not dependent on any self-intersecting chain of welfare transmission their *base* welfare. Then:

**Transmission'**. If  $X$  cares about  $Y$ , then  $Y$ 's base welfare is part of  $X$ 's base welfare.

**Transitivity'**. If  $X$ 's base welfare is part of  $Y$ 's base welfare, and  $Y$ 's base welfare is part of  $Z$ 's base welfare, then  $X$ 's welfare is part of  $Z$ 's base welfare—provided that there is a welfare transmission chain from  $X$  to  $Z$  that is not self-intersecting.

Carol finds this conclusion unsettling. For one, Carol ordinarily assumes that the scope of her prudential concern begins and ends with the small number of individuals she cares about.<sup>7</sup> Yet if her reasoning is sound, this assumption vastly underestimates the scope of her prudential concern. In addition, the reasoning suggests that Carol is not well-positioned to evaluate her own welfare or even to name a small fraction of the individuals on whose welfare her own constitutively depends. Indeed, Carol is irremediably in the dark about these facts. (Confidentiality agreements preclude the investigators from disclosing further information to Carol.) Relatedly, contrary to what Carol ordinarily assumes, C2 suggests that Carol's circle of prudential concern vastly outstrips her domain of (significant) causal influence. After all, her resources are limited, and she already has her hands full promoting her own interests and those of her nearest and dearest.<sup>8</sup>

Carol also finds C2 morally unsettling. Ordinarily, she takes herself to have special moral obligations to individuals that lie within her circle of prudential concern. For instance, she recognizes a moral duty to help her friends and children when they are in need.<sup>9</sup> But if her circle of prudential concern is much larger than she originally thought, perhaps morality imposes more and farther reaching special obligations on her than she had previously supposed.<sup>10</sup> And while her limited causal and epistemic powers will limit the spread of her special moral obligations, there are limits to these limits: for any random individual, she now regards it as somewhat likely that a chain of care connects her to them. And she knows that she could—at least in expectation—help meet the needs of many more individuals that she is so related to. For

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**C1'**. If I stand in the ancestral of care to someone via a care chain that is not self-intersecting, then their base welfare is part of my base welfare. (Transmission', Transitivity')

**Ancestral Promiscuity'**. I bear the ancestral of care to many different people via chains of care that are not self-intersecting.

**C2'**. My base welfare—and hence total welfare—includes the base welfare of many other people—people who are therefore proper objects of my prudential concern. (C1', Ancestral Promiscuity')

We will follow Carol in mostly bracketing technical scruples raised by self-intersecting chains of welfare transmission and in suppressing the qualifications that handle them.

<sup>7</sup> Cf. Nagel (1991: 14).

<sup>8</sup> At least *modulo* her newly discovered ability to influence the welfare of the many other people with whom she is connected via her own welfare and lengthy chains of care radiating from *them*—another unsettling result.

<sup>9</sup> See, e.g. Parfit (2011: 140-41). For overviews of the literatures on special obligations and morality and partiality, see Jeske (2021) and Lange (2022).

<sup>10</sup> Cf. Singer (1981) and Lecky (1869).

instance, she could donate to cost-effective charities rather than continuing her habit of indulging the wants of those she cares about.<sup>11</sup>

## 2. Clarifications and Motivations

Like Carol, we ordinarily take the scope of our prudential concern to extend no farther than our circles of close friends and family. The application of Carol's argument to us thus suggests that we too underestimate the reach of our prudential interests. Can we escape this conclusion? Before exploring potential escapes from Carol's argument, we will first clarify her argument and note some motivations for its premises.

Whether Carol's argument applies to us turns on whether Ancestral Promiscuity is true of us. Admittedly, Ancestral Promiscuity is an empirical claim that may be false of most people at times prior to the advent of large and highly connected societies.<sup>12</sup> And it may well be false of members of present-day uncontacted peoples. Still, Ancestral Promiscuity is evidently true of most contemporary humans, at least given that our ordinary beliefs about the distribution of care in families and friendships are not systematically mistaken. Transitivity is also unobjectionable: it merely asserts the transitivity of the relevant parthood relation.

The final premise is Transmission. Transmission is itself a weak claim. It merely asserts that if  $Y$ 's welfare is part of  $X$ 's, then  $Y$ 's welfare contributes to at least some degree to  $X$ 's and that the sign of the contribution corresponds to the sign of  $Y$ 's welfare. Notice that this allows for  $Y$ 's welfare to be arbitrarily large while contributing an arbitrarily small amount to  $X$ 's welfare. In addition, the premise says nothing about *net* contributions. To illustrate, suppose that Carol cares about Darryl and about Ed, but Darryl has disdain for Ed. In this case, a benefit to Ed may be net neutral for Carol, per it benefiting her via a direct care chain while also indirectly making her worse off via a care-disdain chain. In that case, although Ed's welfare makes no net contribution to Carol's welfare, Ed's welfare nonetheless contributes to Carol's via a care chain. Hence, on the intended understanding, Transmission is satisfied.

Transmission enjoys several motivations. One comes from pre-theoretical judgments about cases. In many cases it is intuitive that people benefit from good things happening to their

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<sup>11</sup> Cf. Singer (1997).

<sup>12</sup> But Carol's argument might apply to these individuals if we consider care chains proceeding from such people into the past to later people in highly connected societies (cf. Ridge (2003: 55)). While the application of Carol's argument to care chains that only hold across times might have important practical consequences concerning future generations, such intertemporal applications of Carol's argument would distract from the issues we most wish to discuss. So, we will focus on synchronic applications of Carol's argument.

carees and are harmed by harms to them. We aptly console people who have lost a friend for their loss, and not merely for their sadness. In other cases, our welfare attributions track welfare transmission rather than the carer's attendant emotion. For example, a parent might feel sad that her only child is leaving home to start their life as a happy, healthy adult. Still, we naturally think that the child's independence and flourishing is good for the parent, simply because it is good for the child and the parent cares about the child. Conversely, even if we know that a parent is delighted to have a child move in with her again after an unexpected setback, we cannot help but feel that something unfortunate has happened for both parent and child.

Another motivation for Transmission can be found in accounts of love. Love is naturally understood as involving care. And in offering accounts of love, many theorists have accorded a role to one person adopting another's interests as their own. Some examples:<sup>13</sup>

perhaps the most important thing people associate with the ideal of romantic love, is this desire to unite with another person in profound... ways. While there are a number of aspects to this desire, no doubt the most important one is that it includes wanting to identify with another, to take another's needs and interests to be your own and to wish that she will do the same. (Delaney, 1996: 340)

...a lover identifies himself with what he loves. In virtue of this identification, protecting the interests of his beloved is necessarily among the lover's own interests. The interests of his beloved are not actually other than his at all. They are his interests too. [...] The fact that he cares about his beloved as he does means that his life is enhanced when its interests prevail and that he is harmed when those interests are defeated. [...] It is hardly surprising, then, that for the lover selflessness and self-interest coincide. (Frankfurt, 2004: 61-62—see also *ibid*: 42)

What is common to all love is this: Your own well-being is tied up with that of someone (or something) you love... When something bad happens to one you love... something bad also happens *to you*... This extension of your own well-being (or ill-being) is what marks all the different kinds of love... The desire to form a *we*... is intrinsic to the nature of love... People who form a *we* pool... their well-being (Nozick, 1989: Ch. 8; emphasis his)

Love in all its forms involves a desire for another's good. But I too am implicated in that good; I identify myself with it... the friendship of esteem becomes love just so soon as ... as all distinction between my interests and your interests is overcome... he who loves aims at the other's good, in just the way that he aims at his own good. (Scruton, 1986: 230, 239)

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<sup>13</sup> For other conceptions of love that fit with the operative notion of care, see Fisher (1990), Helm (2010), and Taylor (1976). See Jaworska & Wonderly (2020) for a critical overview of the literature on the relationship between love and care. Something like our notion of care is also common in analyses of friendship—see Helm (2021).

Such views of love accord with Transmission: if they are on the right track, then love induces welfare transmission and can be understood as a form of care.

Yet another motivation for Transmission can be found in a theoretical package that combines a major theory of welfare with a leading theory of care. On *the desire satisfaction theory of welfare*, a person's welfare consists in the satisfaction of their non-instrumental desires.<sup>14</sup> On *the desire-based theory of care*, care involves a desire for the caree's welfare for her own sake.<sup>15</sup> If both theories are true, then caring for someone involves a non-instrumental desire for the caree's welfare and the satisfaction of that desire contributes to the carer's welfare, i.e. the caree's welfare is constitutively tied to the carer's just as Transmission claims.

In accordance with Transmission, Transitivity, and C1, this theoretical package also underwrites welfare transmission over chains of care.<sup>16</sup> Together, the desire-based theory of care and the desire satisfaction theory of welfare first enable desire satisfaction conditions to cascade down chains of care: by the desire-based theory of care, the satisfaction of carer's desires is sensitive to the welfare of the caree; by the desire-satisfaction theory of welfare, that caree's welfare is sensitive to the satisfaction of their desires, including their non-instrumental desires for the welfare of others; and so on. Further, by another application of these theories, promoting welfare of any caree will propagate desire satisfaction in the other direction along these channels, and the promotion of carers' welfare will follow in its wake.<sup>17</sup>

Although the described desire-theoretic package provides a particularly simple and elegant model of how welfare could transmit over care chains, it is by no means the only package that underwrites Transmission in Carol's argument. The above desire-theoretic rendition of Carol's argument relied only on desire satisfaction qualifying as *a* welfare good, not the desire satisfaction theory's stronger commitment to desire satisfaction being the only welfare good.

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<sup>14</sup> See, e.g., Heathwood (2015). For an overview of theories of welfare, see Lin (2022).

<sup>15</sup> See Frankfurt (1998, Ch. 14). The same holds on desire-based theories of love, given that love is a form of care—see Frankfurt (2004) and Han (2021).

<sup>16</sup> In addition to the motivation it inherits from Transitivity and Transmission, C1 (If I stand in the ancestral of care to someone, then their welfare is part of mine) can also be motivated as follows. C1 articulates a plausible link between the patterns of concern that we bear to our future selves and how their welfare affects our own: each of us is related to our future selves via chains of care, and each of us regards our future selves' welfare as within the scope of our prudential concern, i.e. as a factor that affects our welfare. Indeed, C1 captures these patterns and beliefs even in those of us who think that there is no further fact of personal identity beyond such psychological relations in virtue of which our future selves' welfare could matter for our present selves—cf. Parfit (1984: §95).

<sup>17</sup> Notice that desire satisfaction theorists could in principle eschew the ideology of care and recast Carol's argument in terms of desires that are characteristic of those had by parents for their children and by close friends for one another. Indeed, we take it as a condition of adequacy on desire satisfaction theories that they take such desires to underwrite welfare transmission.

Consequently, the above reasoning can go through just as well on objective and subjective list theories that deem desire satisfaction one welfare good among others.<sup>18</sup> In short, in addition to respecting our intuitions about cases, Transmission coheres with a wide range of theoretical packages. A wide range, but not all: we turn now to the main view of welfare that conflicts with Transmission.

### **3. An Experiential Escape Eschewed**

Carol's reasoning is unsettling not only because of the sheer number of people it places within the scope of her prudential concern but also because of who those people are: they are people far removed from Carol's awareness. Carol's mental life seems utterly insensitive to the benefits and burdens that fall upon many of these individuals. This leads to a natural thought: perhaps welfare transmission over chains of care is blocked by an *experience restriction*. For example, Carol ordinarily takes her welfare to be unaffected when, unbeknownst to her, her children's friends have nightmares. In contrast, if she witnesses one of her children's friends suffer an injury at a sporting event, this will make her sad and detract from her welfare.

This response to Carol's argument lands directly along one of the major fault lines among theories of welfare. The so-called "experience requirement" on theories of welfare holds that differences in welfare require differences in experience.<sup>19</sup> By the lights of this requirement and contrary to Transmission, Carol's welfare is unaffected by her children's welfare in the many cases in which their welfare makes no difference to her experience. Her welfare therefore does not include her children's welfare as parts in the operative sense. For the same reason, their welfare does not include their friends' welfare as parts. Given the experience requirement, care chains thus fail to dramatically expand her circle of prudential concern after all.<sup>20</sup>

While this objection to Carol's argument is alluring, powerful arguments have been leveled against the experience requirement. For example, consider a rendition of the Experience

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<sup>18</sup> For objective and subjective list theories, see Fletcher (2016) and Lin (2016). Such reasoning may also go through on objective list theories that construe caree welfare as a good for the carer in virtue of a non-attitudinal relation such as friendship, on hybrid theories that deem the *combination* of desire satisfaction and some objective condition to be a welfare good (Woodard, 2016), and on theories that tie wellbeing to a pro-attitude such as valuing that is richer and more robust than that of merely desiring (Tiberius, 2018).

<sup>19</sup> For *pro* and *contra*, see Bramble (2016), Kagan (1994), and Lin (2021).

<sup>20</sup> An analogous suggestion appeals to the 'resonance constraint'—roughly, that for something to be good for a subject it must engage them (Railton, 1986)—rather than the experience requirement. To avoid repetition and complications concerning how the resonance constraint should be understood, we will just focus on the experience requirement.



Machine:<sup>21</sup> imagine two people with identical, generally happy, experiences. One person has these experiences as a result of ordinary interactions with the external world. The other person has these experiences while being unknowingly plugged into an “experience machine”—a virtual reality device that projects perfectly realistic-seeming experiences directly into a subject’s brain. By the lights of these experiences, the subject seems to have fulfilling friendships, to know much about the world, and to accomplish great moral, artistic, and scientific feats. In reality, they have no friends, suffer a grand delusion about their place in the world, and accomplish little or nothing. Intuitively, even if the person in the experience machine derives some welfare from their experiences, they are in some respects both worse off than the other person and worse off than they would be if their experiences of friendship and accomplishment were veridical. This intuition casts doubt on the experience requirement by suggesting that some factors make a difference to welfare without making a difference to experience.

In response to the Experience Machine and its brethren, theories of welfare have been developed that eschew the experience requirement. These include the desire satisfaction and list theories mentioned in §2. These theories can easily accommodate our intuitions about the Experience Machine by allowing factors such as desire satisfaction and the well-being of one’s friends to make a difference to one’s welfare independently of any impact they have on experience. But, for the same reasons, these theories provide a staging ground for Carol’s argument.

Thus, we come to a qualification: because Carol’s argument eschews the experience requirement, her reasoning carries with it a substantial assumption about welfare.<sup>22</sup> This puts Carol in good company with various desire-satisfaction theorists and list theorists who have argued against that requirement. At the same time, Carol’s argument (and the development of it

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<sup>21</sup> See Nozick (1974: 43) and Crisp (2006: 111-17).

<sup>22</sup> Could Carol run her argument while accommodating the experience requirement? That depends on how exactly the experience requirement is to be precisified and applied to care chains. For example, whenever Carol watches the news, she learns of certain strangers—ones she is connected to via care chains—that they have been harmed or benefited. She often learns of these victims and beneficiaries while remaining ignorant about whether she is connected to them via care chains. In these cases, other individuals’ welfare impacts Carol’s experience. She is related to these individuals via chains of care. Yet their welfare does not (we may suppose) impact her experience via experiences of carees along the relevant care chain. Nor does her being related to these individuals by chains of care itself impact her experience, though she recognizes that such chains are likely present in any given case, per her being so connected via care chains to a sizeable portion of strangers. Thus, whether Carol’s welfare is impacted by the lights of the experience requirement turns out to depend delicately on what sort of impact is required and how such impact is distributed. While Carol hopes to resolve this issue on another occasion, in the meantime she remains reticent about whether her argument can be run while granting the experience requirement.

that follows) has something to offer even for proponents of the experience requirement: they can claim Carol's argument and its counterintuitive implications as a novel source of support for their view, per the promise it holds as an escape from her argument.

Admittedly, there remains room for more-sophisticated responses to Carol's argument that try to explain the counterintuitiveness of her conclusions in another way. In order to explore some such responses in what follows, we will hereafter set aside the experience requirement.

#### **4. Carol's Argument and the Problem of Irrelevant Desires**

It is also open to critics of theories on which desire satisfaction is a welfare good to use the desire-theoretic rendition of Carol's argument and its counterintuitive implications as an objection to such theories. Indeed, it would be natural for such critics to construe Carol's argument as a formidable variant of a major challenge to the desire satisfaction theory of welfare, namely the problem of irrelevant desires.<sup>23</sup> This point merits elaboration, as it serves to locate Carol's argument within some of the surrounding philosophical terrain.

The problem of irrelevant desires is that there are cases in which the satisfaction of certain desires seems intuitively irrelevant to the desirer's welfare. For example, a case from Derek Parfit: during a brief chat with a stranger who has a fatal disease, Parfit comes to strongly desire that the stranger be cured. After significant time has passed, the stranger is cured, though Parfit does not know this. Intuitively, the satisfaction of this desire is irrelevant to Parfit's welfare. After all, the stranger's cure is both physically remote and causally disconnected from Parfit's life. Likewise, Carol's argument allows desire satisfaction to counterintuitively render an individual's welfare unexpectedly sensitive to the welfare of strangers. Despite this commonality, Carol's argument goes beyond the problem of irrelevant desires.

To illustrate, consider the solution to the problem of irrelevant desires on which satisfying intuitively irrelevant desires *does* contribute to welfare; appearances to the contrary are to be explained away by claiming that the satisfaction of intuitively irrelevant desires affects welfare to such a small degree as to be beyond the ken of our trustworthy intuitions about what is relevant to welfare.<sup>24</sup> This solution enjoys some appeal: for most of us, a desire for the welfare of a stranger will be weak, peripheral, and fleeting.<sup>25</sup> Plausibly, these are kinds of desires whose satisfaction would make only small contributions to welfare. Notice, however, that these are not

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<sup>23</sup> See Parfit (1984: 494).

<sup>24</sup> See Lukas (2009) for an extended defense of a solution along these lines.

<sup>25</sup> And stipulating otherwise in Parfit's case detracts from the intuitive irrelevance of his desire to his welfare.

the kinds of desires at issue in Carol's argument: desires for the welfare of our carees are, after all, characteristically strong, central, and enduring. They are thus the kind of desires that intuitively make substantial contributions to carers' welfare if any kind of desire does. For this reason, a move corresponding to the foregoing solution to the problem of irrelevant desires is a non-starter in response to Carol's argument: we cannot explain away the intuitive insensitivity of Carol's welfare to a stranger's welfare by claiming that we mistake insensitivity for a weak form of sensitivity underwritten by weak (etc.) desires, as the desires at issue in Carol's argument are not weak.<sup>26</sup>

### **5. The Deflationary Diagnosis and the Dynamics of Welfare Transmission**

If Carol cannot escape her argument, perhaps she can learn to live with it? With this prospect in mind, it occurs to her that Transmission says nothing about *how much* welfare is transmitted from carees to carers. Her initial reasoning is thus potentially susceptible to *the deflationary diagnosis*: Granted, as her argument shows, the scope of her prudential concern encompasses many more people than she ordinarily supposes. However, this result is less significant than it first seems. For, the deflationary diagnosis maintains, care chains that drive the expansion of her circle of prudential concern leave the bulk of her prudential interests concentrated more or less where she takes them to be and incorporate the interests of distant strangers only to a negligible extent.<sup>27</sup> As a result, the consequences of her expanded circle of prudential concern that Carol anxiously anticipated do not follow: her argument leads neither to significant loss of control of the determinants of her welfare nor to a new suite of far-reaching special obligations.

It isn't obvious whether the deflationary diagnosis is correct. It can be challenged with reflection on cases that support Transmission. For example, when we reflect on Carol and her children, it is not just plausible that it would be bad for Carol if her children's lives went poorly; it is also plausible that she would be *substantially* harmed by her children having bad lives. (Consider the truisms that death is a great harm and that one of the worst things that can happen to a parent is the death of their child.) This in turn suggests that—in opposition to the deflationary diagnosis—Carol's argument might be developed with a transmission premise that yields non-negligible welfare transmission over care chains of considerable length.

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<sup>26</sup> But in §5 we will consider responses to her argument that grant the welfare-relevance of individual links in care chains while questioning the welfare-relevance of lengthy care chains.

<sup>27</sup> Cf. Lukas (2009) and Ridge (2003: 55). In this context an individual is a distant stranger to a carer if the shortest care chain going from the carer to that individual is long (e.g., say, four or more links).

To make further progress on this matter, we need to investigate quantitative hypotheses about the dynamics of welfare transmission over care chains. Although identifying the need for such an investigation is one aim of this paper, carrying out a comprehensive investigation of this sort is a task we leave for future work. Here, we will set ourselves the more modest task of starting this investigation. We will do this by examining several motivated, candidate forms of welfare transmission over care chains that are stronger than Transmission. After exploring these proposals, our provisional conclusion will be that the deflationary diagnosis is unpromising and that care chains expand the scope of our significant prudential interests to encompass the welfare of individuals beyond our cares.

To start, let's consider a very strong form of transmission as a stalking horse. On this view, the caree's interests do not simply contribute to the carer's; instead, carees' welfare transmits to their carers without loss. At least if we set aside Carol's argument for the moment, this suggestion has some appeal. It takes seriously the idea that people care about others in a way that puts others' interests on a par with their own, and it is not alone in doing so. Something like this idea is recommended by many religious traditions. And it is not uncommon for parents to say that their children's welfare matters as much to them as their own. Nor is it uncommon for parents to make sacrifices for their children that make these reports difficult to doubt.

We can incorporate this strong care-welfare link into a transmission premise as follows:

**Full Transmission:** if  $X$  cares about  $Y$ , then  $Y$ 's welfare is part of  $X$ 's in that increasing  $Y$ 's welfare by  $n$  thereby increases  $X$ 's welfare by  $n$ .

Given Ancestral Promiscuity and Transitivity, Full Transmission implies that when Carol benefits a stranger to whom she is related by a care chain of a given length, she benefits herself by that amount as well. Full Transmission thus offers a straightforward and non-deflationary way to develop Carol's argument.

However, the resulting argument is vulnerable to the following objection. Full Transmission is plausible only when applied to carers who care to an especially high degree. To see this, consider a spectrum going from mere acquaintances to the closest of friends: somewhere along the spectrum there will be pairs of friends who care about each other, albeit in a way that

does not satisfy Full Transmission. Therefore, the objection claims, Full Transmission is false and so cannot underwrite a sound version of Carol's argument.

In addition to rendering Full Transmission implausible, this objection also suggests an approach to weakening it in order to arrive at a more plausible transmission premise: build it into the transmission premise that degrees of care modulate how much welfare is transmitted. On this approach, welfare will not transmit at full strength in every case. This approach coheres with the observation that we care about people to different degrees and that, plausibly, the more one cares about someone, the more one's welfare is affected by theirs. For example, suppose Carol cares about her spouse far more than she cares about her old high school friend that she only sees once a year. In that case, Carol's welfare would plausibly be more sensitive to her spouse's welfare than to her old friend's. Further, given that care comes in degrees and that welfare transmits over chains of care, it is natural to suppose that the quantity of welfare transmitted at a given link is proportional to the degree of care that the carer has for the caree at that link.<sup>28</sup> In other words:

**Degreed Transmission:** If  $X$  cares about  $Y$  to degree  $n$ , then anything that contributes  $w$  to  $Y$ 's welfare contributes  $n*w$  to  $X$ 's welfare.

Given this principle, it would be better for Carol that a benefit go to her spouse rather than to her old high school friend, and it would be better in proportion to how much more she cares about her spouse. When plugged into Carol's argument, Degreed Transmission implies that welfare eventually dissipates to negligible amounts when transmitted over sufficiently long and sufficiently weak care chains. Whether Degreed Transmission leads to the deflationary diagnosis then turns on two factors.

The first is the distribution of maximal care chains, i.e. care chains constituted entirely by carers caring to degree 1 about their carees.<sup>29</sup> To see this, note that Degreed Transmission reduces to Full Transmission in the special case of maximal care chains, since in these chains there is no "drop-off" in the transmission of welfare at each link in the chain. Therefore, under Degreed Transmission, if a maximal care chain proceeds from Carol to a distant stranger, then when Carol benefits the stranger by a given amount, she will thereby benefit by that amount as

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<sup>28</sup> This proposal echoes a common commitment of desire satisfaction theories of welfare, namely that the degree to which a desire contributes to welfare is proportional to the strength of that desire (Lin, 2020: fn28).

<sup>29</sup> We assume that humans cannot care about individuals to such a degree that a change in the caree's welfare thereby affects the carer's welfare more than the caree's. If this assumption is false, it would pose a further obstacle to defending the deflationary diagnosis.

well. The cases alluded above that motivate Full Transmission also suggest that there may well be lengthy maximal care chains. If so, then Degreed Transmission expands the circle of significant prudential concern for carers from which such chains radiate to encompass the welfare of distant strangers.

Whether people generally stand in chains of maximal care to enough people to underwrite Carol's argument is a contingent fact about our social world. However, running some conservative numbers in a toy case can help us see that this is not implausible. Consider a population of 1001 other people. Suppose that each member of the population maximally cares about exactly one other person selected at random from the population. In this case, for a given person, the probability that a chain of maximal care will radiate from them to at least one other person is 1, to at least two other people is  $1 \times .999$ , to at least three other people is  $1 \times .999 \times .998$ , and so on. The probability that this person stands in a chain of maximal care proceeding from her to at least ten other people is  $1 \times .999 \times .998 \times .997 \times .996 \times .995 \times .994 \times .993 \times .992 \times .991 = \sim .96$ . The expected number of people to whom she will bear the ancestral of the maximal care relation is:

$$\sum_{1}^{1000} ((1000-(n-1))/(1000)) = 500.5.$$

This is, of course, just a toy example. It does not capture many features of the real world, such as correlations between who people care about. Still, it is sufficient to show that under fairly conservative assumptions, chains of maximal care can generate Carol's predicament on their own by pushing much of her significant prudential interest outside her circle of close friends and family.<sup>30</sup>

Second, even if no one maximally cares about anyone, Degreed Transmission may nonetheless run contrary to the spirit of the deflationary diagnosis by operating on non-maximal care chains in a way that leads to revisionary consequences concerning the distribution of individuals' significant prudential interests. For example, Degreed Transmission may lead carers to derive large amounts of welfare from strangers and comparatively small amounts from their careers. To illustrate, consider another toy example. To make the math easy for illustration, suppose you merely care to degree .5 about two other individuals, who in turn care to degree .5

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<sup>30</sup> A corollary of this line of argument is that if we interpret Full Transmission in terms of maximal care, then it is not implausible that it is true and that it pushes much of Carol's significant prudential interests outside her circle of close friends and family.

about two further individuals, and so on for a total care chain of  $t$  links—assuming equal welfare across individuals. Then, on this solution, the welfare contribution you receive from the set of individuals who are  $l$  links away from you is the same, no matter what  $l$  is.<sup>31</sup> This means that the proportion of welfare transmitted to you by those you directly care about (those one link away) relative to the total welfare transmitted to you over chains of care will be  $1/t$ . If  $t$  is large, your careers' welfare will make up only a small fraction of the welfare you receive via chains of care. Of course, the numbers in this example were specifically chosen so that as distance from you increases, the number of additional individuals grows to an extent that is exactly offset by the extent to which contributions to your welfare are diminished, resulting in equal contributions from the sets of individuals at different chain lengths. But the problem is compounded further if the number of careers per carer is larger or if the operative degree of care is higher—either way, as distance increases, so too will the amount of welfare contributed by sets of individuals.<sup>32</sup>

Upon recognizing that Degreed Transmission does not deflate the import of Carol's reasoning, proponents of the deflationary diagnosis could try a more direct tact. The deflationary diagnosis relies on welfare transmitting only to a negligible extent over care chains that are sufficiently *long*. Perhaps, then, care chain “length” *on its own*—and so without the help of degrees of care—dilutes welfare transmission. Thus, while Carol's child's welfare might impact Carol at nearly full-force, Carol's welfare may be negligibly influenced by the welfare of individuals that must transmit over, say, five or more links before reaching her. On this proposal, C2 is much less revisionary than it initially seems, as the following version of it holds:

**C2\***. Although my welfare includes the welfare of many other people, it does not include non-negligible quantities of welfare from many other people, per a dilution function  $D()$  of the form:

when I stand in the ancestral of care to someone, their welfare thereby contributes  $D(\text{chain length between me and them, their welfare})$  to my welfare.

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<sup>31</sup> For if  $k$  is the base welfare of each person in the chain, then  $(0.5^l) * (k)2^l = 1^l k = k$  is the amount of welfare contributed by the set of individuals  $l$  links away from you, no matter what  $l$  is.

<sup>32</sup> There is another way to counter Carol's argument by appealing to Degreed Transmission: one could maintain that carers tend to care about careers to such a small degree that Degreed Transmission generates only negligible amounts of welfare transmission to carers from individuals aside from their careers. We might call this the *cynical diagnosis*, as it evidently presupposes that individuals care much less about others than we ordinarily suppose. This proposal escapes a revisionary expansion of our significant prudential interests by embracing a revisionary hypothesis about the distribution of care; it is therefore incompatible with the deflationary diagnosis. Since we are not tempted by the cynical diagnosis, we will leave its exploration to cynics.

While this proposal can no doubt be developed in a way that delivers the deflationary diagnosis, such development would incur costs that we should not be eager to pay.

For one, it is unclear why this abstract “length” quantity has any bearing on welfare transmission. Admittedly, we would ordinarily balk at the idea that distant strangers’ welfare impacts our own. But we ordinarily think of ‘distant strangers’ in terms of spatial distance, and these judgments are special cases of our ordinarily supposing that our welfare is in general unimpacted by strangers’ welfare. It’s also true that the “farther” someone is from Carol down a care chain, the less likely that person’s welfare is to impact her experience. But this observation just serves to motivate the already bracketed solution of imposing an experience restriction on welfare transmission—it offers no support for taking care chain length to on its own dilute welfare transmission, which is what the current proposal requires. Further, even granting welfare transmission dilutes with care chain length, there will need to be a specific dilution function. Does welfare dilute with transmission according to an inverse square function? Or perhaps an inverse cube function? Aside from extremal proposals on which distance dilutes absolutely or not at all, any particular dilution function would seem objectionably arbitrary. What’s more, not just any dilution function will do: too much dilution risks shrinking circles of prudential concern toward an unpalatable egoist position. Too little dilution invites another manifestation of Carol’s challenge. Of course, one could simply postulate that welfare transmission obeys some dilution function that avoids these twin pitfalls. But that would be to succumb to wishful thinking—at least in the absence of independent normative justification for a dilution function and demonstration that it tames Carol’s argument under plausible empirical hypotheses about the distribution of care chains.<sup>33</sup>

One last suggestion merits mention.<sup>34</sup> Perhaps care is restricted to certain aspects of the carees’ welfare.<sup>35</sup> To take an extreme example, a brother might care about a sister, despite the sister being a ruthless assassin who takes sadistic pleasure in her work. Suppose that the sister’s welfare is improved via the satisfaction of her perverse desires. Then, plausibly, the brother

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<sup>33</sup> There is also room in logical space for a certain stance-dependent view on which our judgments about the distribution of welfare over chains of care themselves settle how welfare transmits over such chains, thereby explaining the convergence between our judgments and the facts. Since we do not know of any stance-dependent view in the literature that predicts this result, we will simply flag this as an option for those with stance-dependent metaethical sympathies to explore.

<sup>34</sup> Cf. Lewis (2007: 240).

<sup>35</sup> More precisely, certain aspects of her base welfare—that is, recall from fn6, her welfare that is not dependent on any self-intersecting chains of welfare transmission.



could care only about the other aspects of her welfare, ones that are not morally abhorrent. The suggestion on offer contends that this restriction limits welfare transmission over care chains, enough so to keep Carol's prudential interests primarily concentrated more or less where she takes them to be.

The suggested restriction does not vindicate the deflationary diagnosis. For example, even if every person only cared about aspects of a caree's welfare that are in morally good standing, we would still expect long care chains with high welfare throughput. Admittedly, some possible restrictions on which aspects of a caree's welfare may be cared for (or conduce to welfare transmission) would answer the challenge. Perhaps the simplest such proposal would restrict people to caring about other people in respect of their *non-derived* welfare (the portion of their welfare that is not derived from caring about other people). While this would clearly solve the puzzle, it is also clearly false and normatively misguided: we often and appropriately take our prudential concern for our close friends to extend via chains of care to their loved ones. Thus, in order to use this strategy, one must find a restriction on the scope of caring that answers the challenge while enjoying independent plausibility. We are not aware of any such restriction. More generally, we are not aware of any plausible transmission principle that secures the deflationary diagnosis.

To sum up, Full Transmission allows welfare to transmit over care chains without loss. As a result, Full Transmission drastically expands the scope of Carol's significant prudential interests. However, Full Transmission is implausibly insensitive to gradations of care. To secure such sensitivity, we turned to Degreed Transmission. Under conservative assumptions, it too led to revisionary consequences by extending the scope of Carol's significant prudential interests to include the welfare of individuals that she does not care about. We then considered several other ways of avoiding these consequences by limiting welfare transmission over care chains. One held that welfare dilutes with mere chain length. On reflection, this proposal turned out to be unmotivated and unpromising. We also considered whether transmission might be restricted to certain aspects of caree's welfare. We found a plausible restriction (to non-abhorrent aspects) that failed to yield the deflationary diagnosis and a restriction (to non-derived aspects) that yielded the deflationary diagnosis but which was not plausible. Absent the identification of a plausible, deflationary transmission premise, we are therefore led to reject the deflationary diagnosis and to

accept that Degreed Transmission holds (perhaps under restrictions) in a sufficient range of cases to expand Carol's welfare to significantly encompass the welfare of distant strangers.

## 6. Conclusion

When applied to each of us, Carol's argument implies that we emanate a circle of prudential concern, a circle that extends beyond our close friends and family to encompass many people we do not care about or even know. This raised an urgent question of whether our own welfare includes those people's welfare to a *non-negligible* extent. To begin addressing this question, we considered several suggestions concerning how welfare transmits over care chains. Although some of these suggestions allowed welfare to dilute as it is transmitted over care chains, none of them yielded the deflationary diagnosis. On the contrary, when plugged into Carol's argument, plausible dilution-inducing transmission premises expand our significant prudential interests well beyond individuals that we care about. It is open to those who find themselves unable to accept this conclusion to escape Carol's argument by embracing the experience requirement or to develop a defense of the deflationary diagnosis. The latter option would require developing an account of welfare transmission over care chains that allows enough transmission between carees and carers to be plausible while blocking enough welfare transmission over extended care chains to qualify as deflationary. Those of us who instead take Carol's reasoning to expand the scope of our significant prudential interests face the similar task of determining more precisely the contours of expanding circles of prudential concern.<sup>36</sup> In addition, we face the task of coming to theoretical and practical grips with how prudential circle expansion shapes our ability to know and control the determinants of our welfare as well as what special obligations morality imposes on us. In the meantime, we are left with the following moral. Most of us acknowledge the error of the egoist who fails to see that her prudential interests include the welfare of people for whom she cares. Yet we are liable to recapitulate this mistake at one remove when we fail to recognize that our welfare encompasses the welfare of distant strangers.<sup>37</sup>

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<sup>36</sup> For this purpose, there is a wide range of formal tools developed in other domains to explore. These include epidemiology, graph theory, network theory, and percolation theory. Some of these have been applied to the related small world phenomenon of real-world networks being large, decentralized, highly clustered, and connected via surprisingly short paths—for relevant discussion and references, see, e.g. Watts (2004). Of particular interest here may be the Solomonoff-Rapoport random net model, directed versions of the Erdős-Rényi random graph model, directed versions of the Watts–Strogatz random graph model, and the SIR epidemiological model (Solomonoff & Rapoport, 1951; Erdős & Rényi, 1960; Watts & Strogatz, 1998; Song & Wang, 2014; Martcheva, 2015).

<sup>37</sup> Cf. Parfit (1984: §74).

## References

- Bramble, B. (2016). A new defense of hedonism about well-being. *Ergo*, (3)85–112.
- Crisp, R. (2006). *Reasons and the Good*. OUP.
- Delaney, N. (1996). Romantic Love and Loving Commitment: Articulating a Modern Ideal. *American Philosophical Quarterly* 33(4):339-356.
- Ebels-Duggan, K. (2008). Against Beneficence: A Normative Account of Love. *Ethics* (119)142–70
- Erdős, P., & Rényi, A. (1960). On the evolution of random graphs. *Publ. Math. Inst. Hung. Acad. Sci*, 5(1)17-60.
- Fletcher, G. (2016). Objective list theories. In *The Routledge Handbook of Philosophy of Well-Being*. Routledge.
- Frankfurt, H. (1998). *Necessity, Volition, and Love*. Cambridge.
- Frankfurt, H. (2004). *The Reasons of Love*. Princeton, NJ: Princeton University Press.
- Fisher, M. (1990) *Personal Love*, London: Duckworth.
- Han, Y. (2021). Do We Love For Reasons? *Philosophy and Phenomenological Research* 102(1):106-126.
- Heathwood, C. (2015). Desire-fulfillment theory. In *The Routledge handbook of philosophy of well-being* (pp. 135-147). Routledge.
- Helm, B. (2010). *Love, Friendship, and the Self: Intimacy, Identification, and the Social Nature of Persons*. OUP.
- Helm, B., (2021) "Friendship", *The Stanford Encyclopedia of Philosophy*. E.N. Zalta (ed.), URL: <https://plato.stanford.edu/archives/fall2021/entries/friendship/>.
- Jaworska, A. & Wonderly, M. (2020). Love and Caring. In C. Grau & A. Smuts (eds.), *The Oxford Handbook of the Philosophy of Love*. OUP.
- Jeske, D., (2021) "Special Obligations", *The Stanford Encyclopedia of Philosophy*., E.N. Zalta (ed.), URL: <https://plato.stanford.edu/archives/win2021/entries/special-obligations/>.
- Kagan, S. (1994). Me and my life. *Proceedings of the Aristotelian Society*, (94)309–324
- Karinty, F. (1929). Chain-links. Everything is different, 21-26.
- Kolodny, N. (2003). 'Love as Valuing a Relationship', in *Philosophical Review* (112)135-89.
- Lange, B. (2022). The Ethics of Partiality. *Philosophy Compass* 1(8):1-15.
- Lecky, W. (1869). *History of European Morals From Augustus to Charlemagne*. Arno Press.
- Lewis, D. (2007). Divine Evil. In L. Anthony (ed.), *Philosophers Without Gods: Meditations on Atheism and the Secular Life*. OUP.
- Lin, E. (2016). The Subjective List Theory of Well-Being. *Australasian Journal of Philosophy*, 94(1)99–114.
- Lin, E. (2021) "The experience requirement on well-being." *Philosophical Studies* 178.3:867-886.
- Lin, E. (2022) "Well-being, part 2: Theories of well-being." *Philosophy Compass* 17.2:e12813.
- Lukas, Mark (2009). Desire Satisfactionism and The Problem of Irrelevant Desires. *Journal of Ethics & Social Philosophy*, 4(2)1– 24.
- Martcheva, M. (2015). An introduction to mathematical epidemiology (Vol. 61, pp. 9-31). New York: Springer.
- Nagel, T. (1995). *Equality and Partiality*. OUP.
- Nozick, R. (1974). *Anarchy, State, and Utopia*. New York: Basic Books.
- Nozick, R. (1990). *Examined Life: Philosophical Meditations*. Simon & Schuster.
- Parfit, D. (1984). *Reasons and Persons*. OUP.
- Parfit, D. (2011). *On What Matters* (Vol. 1). OUP.
- Railton, P. (1986) 'Facts and Values', *Philosophical Topics*, 14:5-31.
- Ridge, M. (2003). Giving the dead their due. *Ethics*, 114(1), 38-59.
- Scruton, R. (1986) *Sexual Desire: A Moral Philosophy of the Erotic*. New York: Free Press.
- Singer, P. (1981). *The Expanding Circle: Ethics and Sociobiology*. OUP.
- Singer, P. (1997). The Drowning Child and the Expanding Circle. *New Internationalist*.
- Solomon, R.C. (1994). *About Love: Reinventing Romance for Our Times*. Hackett Publishing Co.
- Solomonoff, R., & Rapoport, A. (1951). Connectivity of random nets. *The bulletin of mathematical biophysics*, 13, 107-117.
- Song, H. F., & Wang, X. J. (2014). Simple, distance-dependent formulation of the Watts-Strogatz model for directed and undirected small-world networks. *Physical Review E*, 90(6), 062801.
- Taylor, G., 1976, "Love", *Proceedings of the Aristotelian Society*, 76:147–64.
- Tiberius, V. (2018). *Well-being as value fulfillment: How we can help each other to live well*. Oxford University Press.
- Velleman, J.D. (1999). Love as a moral emotion. *Ethics*, 109(2)338-374.
- Watts, D.J. (2004). *Six degrees: The science of a connected age*. WW Norton & Company.

Watts, D.J., & Strogatz, S. H. (1998). Collective dynamics of 'small-world' networks. *Nature*, 393(6684), 440-442.

Woodard, C. (2016). Hybrid Theories. In G. Fletcher (ed.), *The Routledge Handbook of Philosophy of Well-Being*. Routledge.