

Denying Services to Prevent Regret

Mollie Gerver

Governmental and non-governmental organizations often provide services intended to give recipients options they otherwise would not have. A hospital may provide patients the option of receiving a treatment; a football club may provide athletes the option of joining a team; a humanitarian organization may provide refugees the option of repatriating home. Sometimes, the majority of individuals who accept a service later regret their decision. A hospital may find that most patients regret accepting a given treatment because of its side effects. An American football club may learn that most athletes regret joining due to head injuries. An organization may learn that most refugees regret repatriating because of violence in their home states. In these cases and many more, it may be possible to predict that future recipients of a service will feel similar regret. It is unclear if this regret is a reason to discontinue the service.

For an actual example of such regret, consider a case from 2012, when a young South Sudanese refugee named Mol was detained by Israeli immigration authorities. Hoping to be free from detention, he asked an NGO for help repatriating to South Sudan. The NGO agreed to help, first warning him that the vast majority of past refugees regretted returning, feeling that detention in Israel was preferable to life in South Sudan. He listened to their warning, but still wished to return, feeling the risks preferable to a life without freedom. The NGO paid for his flight and, shortly after landing in Juba, he was displaced to an IDP camp without reliable doctors, hygienic latrines, or food security. Today he prefers the detention he faced in Israel to the insecurity he faces in South Sudan.

Should the NGO have helped Mol repatriate, knowing his regret was likely? More generally, is future regret a reason to deny a service?

When I write 'reason' I refer to a fact that gives Agent A a normative pro tanto reason to deny a service to Agent B. When I write 'service' I refer mainly to an irreversible service provided by A to B involving resources, actions, or opportunities, and when I write 'Agent A' I refer to an agent striving to ensure individuals have a broader range of options. Some options needn't improve welfare. When NGOs help refugees repatriate, they often provide all refugees the option of repatriating, rather than selecting those who would most benefit from returning to their countries of origin.

If governments and NGOs are providing services to enhance options, we might suppose they should provide these services regardless of future regret. If they warn recipients of the risks of accepting their services – including the risks of future regret – then recipients are giving their informed consent, and their consent ought to be respected.

In this article I reject this claim: There is a good reason to deny a service to prevent regret even if the purpose of providing a service is to enhance a recipient's range of options.

In defending this claim, I have a certain type of regret in mind. Regret, as I define it, is the feeling that one no longer endorses one's earlier choice because one feels the outcome of this choice is less preferable than what would have occurred had one chosen otherwise. We can predict such regret as likely when the vast majority of past recipients of a service regret their choice, and there is reason to believe this regret will likely arise in the future.

In the following Section 1 I defend the importance of regret by appealing to the importance of preference-fulfillment: we have reason to help individuals fulfill their preferences and, if an individual will be unable to fulfill their preferences later as a result of a service now, we have reason to deny the service now. I respond to the objection that, when denying someone a service they will likely regret, this is justified for reasons other than regret: Mol would likely be displaced had he returned, and this was reason enough to deny him repatriation. I demonstrate that we often have reason to deny a service to prevent regret itself, even when the regret is a response to reductions in welfare, freedom, or security.

In Section 2 I argue that, though there is one reason to deny a service to prevent regret, this reason is not always weighty. Its weightiness depends on whether certain properties are present. One important property is the extent that the regret is all-things-considered. Such regret arises when an individual feels that the best life she can live from a service is worse than the worst life she could have lived had she rejected the service. Another relevant property is the extent that an individual is accepting an epistemically transformative service, where she cannot understand the nature of service until it has already been accepted.

Before I begin, some clarifications are in order. When discussing services that individuals will likely regret, I limit my analysis to cases where individuals experience no coercion from the service provider, and are informed about the risks from the service provider. I put aside cases of forced interventions to prevent future regret, or regret arising from misinformation. Recipients, in all of my examples, are warned of the risks, including the risks of regretting their choices.

Why would an individual make a choice they know they will likely regret? One reason is that the potential pay-offs are substantial, as with the lottery. Another reason is that recipients cannot quite imagine what it would feel like experiencing this regret, and so take the plunge, later wishing they had not. Individuals may also accept services that take an extended amount of time such that, for every day that

lapses, accepting the service is rational and regret unlikely. I might accept a box of chocolates everyday, because one box on one day will have minimal harm, and give me joy as I bite into each praline, until I later suffer from health complications, regretting my accumulative decisions.¹

Finally, a person may accept a service they know they will regret if, at the time they make a decision, they have certain preferences that give them reason to accept the service, even though they know their preferences will later change. I might accept tequila at 8:00pm, knowing I will regret it tomorrow, because as 8:00pm I prefer drinking tequila and regretting it tomorrow to not drinking tequila and feeling no regret tomorrow. Tomorrow, of course, I will feel differently. It is perhaps unclear if my accepting the tequila is rational, or whether feeling regret tomorrow is rational.² Regardless, we do make such decisions and feel such regret. It is unclear when others should deny us services to prevent this regret from transpiring.

As noted above, my focus is primarily on voluntary services. Though I focus on voluntary services, I assume that a recipient can give their voluntary consent even if coerced by a third party into their decision, so long as they are not coerced by the agent providing them the service. Mol was coerced by the Israeli government into repatriating, as the government would detain him if he stayed, but I assume his consent to repatriate was valid for the NGO, because the NGO was doing no coercing itself and he preferred repatriating to remaining.³ He nonetheless also made a decision he would likely regret and it is not clear what the moral status of this regret was.

Some might suppose that, because Mol was choosing between two objectionable options, he did not truly regret his choice. He only regretted the state of affairs in Israel where he was forced to choose between detention and unsafe repatriation.

While it is true he regretted the state of affairs in Israel where he had only two choices, he also regretted the one choice he did make.⁴ More generally, one can regret

a state of affairs and the choice made within this state of affairs. A patient diagnosed with cancer can later regret having had to choose between death and life-extending treatment, while still regretting accepting the life-extending treatment because of its painful side effects. This regret for a single choice is important: In many tragic or unjust scenarios, third parties must decide whether to offer an additional objectionable choice, likely to be regretted, or do nothing at all, constraining choices now.

1. Regret as a reason to deny a service

I propose the following claim: *If a service-provider can predict that an individual will regret accepting a service, and feel no or less regret if they reject the service, preventing regret is one reason to deny the service.*

My claim can be derived from two broad values. First, there is a general value, all else being equal, in helping individuals live lives they prefer living. If an individual will later regret their decision to accept a service, and this regret will extend into the remainder of their lives, then we can help them live the life they prefer by denying the service. It is true that future preferences are difficult to establish. But when predictions of future regret are strong, this future regret can provide one reason to deny the service, at times taking priority over current preferences.

There is a second value that underpins my general claim, related to control. In general, if a person lacks control over their past decisions, it is better that they are satisfied with their past decisions. Imagine that on October 1st I accept surgery for the afternoon of October 10th, and on the morning of the 10th I suffer from locked-in syndrome, unable to communicate whether I still wish to receive the surgery. If I still wish to receive the surgery, and do receive the surgery, it seems that no harm is done: I gave my consent on October 1st, and still prefer to have the surgery. In contrast, if I wake up on the 10th and am locked-in, and change my mind about the surgery, it seems that a significant harm occurs as the surgeon inserts the scalpel into

my body. Lacking control when my preferences have changed is more disturbing than lacking control when my preferences have not.

When an individual makes an irreversible decision, they are not locked-in, but they do they lack control over this earlier decision, given that they cannot change the past. All else being equal, it is better if this person has not changed their mind about their past decision, given that they cannot control this past decision. If we know ahead of time that a person will likely change their mind about their past decision, and so regret their decision, we have one reason to deny them a service which makes this decision possible.

The above value I describe, related to control, may be derived from a broader value of autonomy. Autonomy is a contentious term, and some senses of the term are unrelated to regret, as when we claim someone's choice is autonomous if it results from preferences she endorses at the time the choice is made.⁵ But there is another sense of autonomy, focusing not on individual choices but on one's life as a whole. One's life is autonomous if one feels a sense of ownership over this life. A person can feel ownership when their past choices fulfil preferences or commitments they hold today.⁶ For this reason a patient can feel autonomous if she consents to surgery, is disappointed by the results, but still prefers these results to the alternative. In contrast, if her preferences change, she is not only disappointed or saddened by the life she must endure, but alienated from it, because she no longer identifies with the choice leading to this life.⁷ If we feel such alienation is morally undesirable, then we have reason to prevent it from arising.

If we have reason to deny services that lead to likely regret, we have a good reason to predict if regret is likely. One mechanism for predicting is to compare those who accept an intervention and those who do not. If the vast majority who accept an intervention regret their choice, but those who reject the intervention do not, and future potential recipients hold similar characteristics to past recipients, this is evidence that regret will be widespread amongst future recipients.

Of course, this alone will not demonstrate that there is a causal relationship between the service and the regret. It may be that those accepting the service are more prone to feelings of regret for reasons unrelated to the service. It would therefore help to supplement this evidence with Random Control Trials (RCTs). Today, limited RCTs have tested the extent that patients are likely to feel regret after the first year of a medical intervention,⁸ and more long-term RCTs might be administered. If the vast majority of patients who are randomly given treatment regret their decision to accept treatment, but those randomly denied treatment do not wish they had received this treatment, then this is strong evidence that the treatment contributes to regret, creating one reason to deny the treatment to future patients. Similarly, RCTs can also determine whether the majority in certain sub-groups regret their decision to accept a service, even if the majority of all recipients do not. We might learn, for example, that the majority of individuals who are younger than twenty-five and suffering from migraines regret a given medical intervention, even if the majority of all recipients do not. Under some conditions, we may be able to use this data to predict that future recipients who are under twenty-five and suffering from migraines are likely to feel similar regret.

The above claim is relatively modest. It does not establish when regret is a very weighty reason to deny a service, a question I shall address in the next section. The claim is merely that future regret is one reason to deny a service, to be weighed against countervailing considerations. This modest claim has nonetheless faced a number of objections.

1.1 Other Reasons Objection

I first call the *Other Reasons Objection*. In cases where a person feels regret, we might suppose they are feeling regret about some change in their life, whether it be a reduction in welfare, freedom, or happiness. It is these facts that give reasons to deny the service, with regret creating no additional reason.

There are three versions of this objection. The first draws upon the principle of autonomy. In general, one condition for autonomy is that one has sufficient welfare and an adequate range of options.⁹ It is wrong, therefore, to provide services that significantly reduce welfare or the number of options.¹⁰ In cases where we intuitively feel that regret is a reason to deny a service, our intuitions are responding to the reduction in welfare or options, and not to the regret felt.

In some cases, this reasoning may hold. But in cases where a person's welfare or range of options will be constrained regardless of whether they accept a service, regret may remain a deciding factor. Mol was choosing between detention in Israel, where he could not travel more than a mile, or returning to South Sudan, where he could travel but would be risking his life. In such a case, his future regret tips the balance against helping with his return, creating a reason that would otherwise not exist.

Some may insist that, in the case of Mol, staying in Israel really would protect his options and welfare compared to repatriating, and so this was reason enough to deny his return, regardless of regret. Even if one accepts this conclusion for Mol, there are tens of thousands of other refugees who live in insecurity and poverty in countries of asylum, forced to remain in refugee camps, and who choose to repatriate to countries of origin with roughly the same levels of insecurity and poverty.¹¹ For these refugees, given the similar conditions in both host and home country, we cannot claim that reductions in welfare and options explain why return is wrong. If we feel return assistance is wrong when regret is likely in such cases, it seems the regret itself explains this intuition.

There is a second variety of the *Other Reasons Objection*. Some might claim that, though there is reason to deny a service when regret is likely, the regret is not an independent reason to deny a service. When individuals feel regret, they regret something that has happened, such as losing their freedom, or security, or subjective happiness.¹² Regret is just the additional psychological response to such outcomes,

rather than an independent consideration. To establish if regret is an independent consideration, some might claim, we must consider cases where there is regret without any of the painful outcomes that tend to be associated with regret. In other words, a truly interesting thesis on regret would pull apart regret from other considerations, and this is only possible when considering cases where a person feels regret despite their life going better, such as a refugee who regrets repatriating despite their security and income improving, or an athlete who regrets joining a team despite facing no permanent injury and having improved health. If we imagine such cases, we would unlikely be convinced that regret is a reason to deny a service, given that the lives of the relevant agents have improved.

I do not believe, however, that we can only establish if regret creates a reason to deny a service by isolating it from other properties, such as welfare harms. This is because, more generally, I do not believe we can only establish if a property creates a reason for action by isolating it from other properties. A property can constitute a reason in itself even if only arising when interacting with other properties. For example, if Katy needs a pen, this is a reason to lend her my pen, even if this reason is contingent on other properties, such my pen working, her wanting to borrow my pen, and her lacking another pen.¹³ Regret is similarly an independent reason to deny a service, even if contingent on the presence of other properties, such as welfare reductions.

If this is true, then to prove regret is a reason separate from these welfare reductions, I needn't isolate regret from these welfare reductions; it is enough to isolate these welfare reductions from regret. This is possible by comparing pairs of cases where welfare is identical for two individuals, and regret is present for one individual and not the other. If we compare two athletes, two refugees, and two patients, and the first of each pair will experience both regret and a welfare reduction after a service, and the second will experience no regret but the same welfare reduction after the service, it seems we have reason to deny the service to the first and not the second. If one refugee returning to South Sudan will experience insecurity, lack of water, and regret, while another refugee is returning to this same insecurity and lack of water

but will feel no regret, then it seems the NGO has more reason to deny repatriation to the first refugee than the second. Regret is a distinct reason to deny a service, even if it is contingent on the existence of other properties.

There is a final version of the *Other Reasons Objection*, derived from an argument by Krister Bykvist. We are often faced with choices, Bykvist notes, that we know we will regret, but which we also know will make us happier. Imagine I have a choice to either stay single or get married. If I stay single, I will be happy, but will regret my choice, feeling marriage was preferable. If I marry, I will be miserable, but not regret my choice, still feeling marriage was preferable. It seems that the future regret I will feel as a single person is not a good reason to marry, because I will be more miserable as a married person. Instead, Bykvist argues, we ought to consider how strongly we will later want our future state of affairs, and not whether we will prefer this state affairs to the life we could have lived. If I will be happier as a single person I have reason to stay single, even if I will prefer being married and so regret not having married.¹⁴ If Bykvist is correct, then we can similarly claim that, when providing a service to others, their future attitudes about their circumstances are what matter, rather than future attitudes about the life they could have lived had they chosen differently.

Bykvist's example is helpful for demonstrating that future regret is often a very poor consideration for how we ought to act now. Nonetheless, it does not demonstrate that future regret is never a reason at all. It merely demonstrates that, when we will be miserable with a choice, this future misery creates a countervailing reason to avoid this choice. It remains the case that, when we are faced with two choices with equal predicted misery, then future regret is a consideration for how we ought to proceed. Similarly, when we can predict that another will feel regret when accepting a service, but equally miserable either way, this likely regret is a reason for us to deny the service.

1.2 Future Preferences Objection

There is a second objection, which I call the *Future Preferences Objection*. It comes in two forms. The first begins with the premise that we have little reason to make choices based on our own future preferences. This is because our future preferences are not our current preferences, and so what we have reason to want later is not what we have reason to want now. This argument is often made by appealing to an example from Parfit, involving a fourteen-year-old girl who decides to conceive, even though she is extremely ill-prepared to do so. She knows that, once her child is born, she will love her child, and feel it is preferable the child was born. The child, of course, will feel this as well.¹⁵ Neither will regret the decision, but she should still not conceive at such a young age. This is because, though she will later have reasons to affirm her past decisions, these reasons arise from an attachment to her child, and she did not have this attachment prior to conceiving.¹⁶ If future preferences for past actions are poor reasons for these actions at the current time, we should not deny services to others based solely on predicting their future preferences.

One potential response to this objection is to reject the claim that the fourteen-year-old has no reason to conceive. She does, given her future affirmation about giving birth, but has stronger additional reasons to not conceive: It is better to create a world with children raised by mature parents, able to provide sufficient resources and care.¹⁷ But even if one believes that the fourteen-year-old has no reason at all to conceive, despite her future preferences, it can still be the case that future regret gives her an additional reason to not conceive. This is because, even if one's future affirmation for past actions is irrelevant for how one acts at the current time, future regret may remain relevant for how one ought not act at the current time. Imagine an adult who, unlike the fourteen-year-old girl, knows she will regret having the child because she will secretly not love her child, and miss her old life of reckless adventure.¹⁸ Even if this adult will be an excellent parent, and the child will never learn of this regret, it seems the likely regret is a strong additional reason for her not to conceive.¹⁹

There is a second version of the *Future Preferences Objection*. We might suppose that there is value in having control over one's life. One is in control even if one's preferences change, and even if this change leads to subsequent regret.²⁰ If an eighteen-year-old makes a choice that impacts her life at thirty, such as getting a tattoo, she can still have control, so long as her preferences and choices at eighteen are made with full capacity and information.

Even if there is value in having control at one point in time, control at one point can limit control at another. When this occurs, then it is important to ensure that, during the period of limited control, regret is minimized. Imagine an eighteen-year-old consents to a full-body tattoo she cannot easily remove. She has control when accepting the tattoo, but her control is limited as a result, given that she cannot change her earlier choice. In such a scenario, it seems her likely regret is one relevant consideration for whether the tattoo parlour ought to provide her the tattoo. This reason may not always be very weighty – an issue I shall address in Section 2 – but it is a reason nonetheless.

1.3 Implications Objection

There is a third objection to my claim, the *Implications Objection*. If it were true that we ought to ever deny services to prevent regret, because this fulfils individuals' future preferences, this implies we ought to sometimes force individuals to accept services to prevent regret, because this fulfils individuals' future preferences. But this seems unacceptably paternalistic.²¹ It would seem wrong to force a patient to accept surgery even if they will later prefer having had surgery.

There are two responses to this objection.

The first begins with a premise: Committing an act that constrains another's options requires a weightier justification than omitting an act that constrains another's options. Tying a person to a chair requires a weightier justification than failing to help a person stand up from a chair. If one accepts this distinction between omissions

and commissions, then it follows that forcing a person to accept a service requires a weightier justification than denying a person a service. If this is true, then the justification for denying a service may be insufficient for forcing someone to accept a service. If this is true, then claiming we should deny a service to prevent regret needn't imply we should force someone to accept a service to prevent regret.

Some might reject the above explanation, arguing that there is no morally relevant distinction between committing an act and omitting an act.²² Some may also feel that, if an agent has a history of providing a service, and suddenly withdraws the service, then this withdrawal is more similar to committing an act, comparable to tying a person to a chair. If one holds either of these views, there is a second response to the Implications Objection.

In general, there is a distinction between our reasons for providing services and our reasons for not providing services. If a surgeon is providing surgery, or an NGO is providing repatriation, their central reasons for providing the surgery or repatriation are that the recipients wish to accept these services. In contrast, surgeons and NGOs have many reasons for not providing surgery or repatriation; namely, they could engage in other activities instead, such as reading a book, dancing a jig, or helping other vulnerable populations in need. As such, their reasons for denying a service needn't be as substantial; they have plenty of other reasons already. As such, preventing regret may be a decisive reason to deny a service when combined with these other reasons. These other reasons are not present when forcing someone to accept the service. It is therefore wrong to force someone to accept a service merely to prevent regret.²³ Therefore, claiming that we have reason to deny a service to prevent regret needn't imply that we should force someone to accept a service to prevent regret.

There is a second version of the Implications Objection. If the reason future regret matters is that a person's future preferences matter, this implies that we have less reason to deny a service to someone who will develop adaptive preferences. If the

NGO learned that past refugees persuaded themselves that life was fine to avoid the frustration of regret, the NGO would have one less reason to deny repatriation. Similarly, if there were a magical pill that a recipient could swallow to rid herself of the regret, then we would have one less reason to deny a service.

This is not entirely an odd conclusion. We often think it preferable to help an individual take a high-risk choice if their preferences are fairly stable, such that they will not change their mind at a later point in time. This is true even if their preferences are stable because they adapt their preferences to their surroundings, or use various tools – such as exercise or meditation – which encourage them to maintain their preferences across time. If we know that an individual lacks the psychological disposition to keep their preferences stable, or lacks the tools to do so, it is not odd to claim there is one more reason to deny them a service they will likely regret. Indeed, this is the approach that many organisations already take. In 2004 shortly before joining the military a recruitment officer asked me a series of questions intended to gauge whether my current preferences to enlist would likely remain stable across time. In testing my dispositions, the officer accounted not only for my natural dispositions, but whether I was likely to take actions – such as exercise and meditation – that would ensure my preferences did not dramatically change. Of course, the reason the recruitment officer wished to ensure I would not regret my choice was because she wanted to ensure I would be a reliable soldier, rather than because she cared about preventing regret for my own sake. But it is not implausible to imagine a similar system intended to predict regret for the individual's own sake.

Importantly, one may accept this reasoning without holding that adaptive preferences or magic pills make a harmful service right. If an individual is living a safe life, we should often deny a service that will endanger their life even if the person will learn to prefer this dangerous life because she has no other choice. I am merely claiming that, if regret is likely, this future regret is an additional reason to deny a service, a reason that does not arise if an individual learns to adapt their preferences.

2. Regret as a weighty reason

Though regret is one reason to deny a service, it is not necessarily a very weighty reason, to be adopted into the policies of organisations and states. The extent that regret is a weighty reason will depend on the extent that certain properties are present.

2.1 Time

The first property is related to time. The longer an individual will likely feel regret, the greater reason there is to deny the service to prevent this regret. For example, certain medical interventions have led to relatively long-term regret, with patients still wishing they had never accepted an intervention a year later, and the regret increasing over the course of the year.²⁴ Further follow-up studies may find that these patients continue to feel regret for years to come. Certain repatriation programs have led to similar long-term regret, such as when the majority of refugees repatriating to Baghdad from neighbouring countries regretted their decision years later.²⁵

The most extreme case will involve individuals feeling regret for their rest of their lives. While this may seem rare, it is not so rare if we acknowledge that, even if an individual will likely feel regret, they needn't necessarily feel distress. A person may feel that the life they could have lived would be preferable to the life they live now, but also feel quite happy in general, learning to cope with meditation, music, and spending time with friends. Just as a person who has experienced an involuntary medical intervention needn't feel distress the rest of their lives, even if they prefer to have not had the intervention, a person who feels regret needn't necessarily feel distress the rest of their lives, even if they prefer to have chosen differently.

2.2 The regret is all-things-considered

The second relevant property is that the regret is 'all-things-considered.' For an agent to know she feels all-things-considered regret, she would need to consider all life

events that resulted from her decision and compare these to all events that would have happened, had she decided differently. She would then need to conclude that the life she would live was preferable to the life she was living.²⁶ Imagine, for example, that a woman stated that she regretted having an abortion. For a woman to truly know she felt such regret, she would need to consider all life events that resulted from the abortion, such as the job she obtained and the relationships she built, and compare these to every event that would have happened had she decided differently, such as the job she would not obtain and the relationships she would not build. If a woman chooses to have an abortion, she usually cannot know if the life she is living now would be very similar or different to the life she would live had she decided differently. Without knowing how life would be different, she would struggle to know if she regretted her choice. If a woman rarely knows if she regrets her past choice, then it is usually wrong for others to deny her a choice based on future regret.

Though it is difficult to know if one feels all-things-considered regret, it is still possible to be fairly certain that one feels all-things-considered regret. In rare cases, a person is fairly certain that nearly all possible lives they could have lived, had they chosen differently, would have been preferable to the most preferable life they can live now as a result of the choice they made. For Mol and others repatriating to South Sudan, there is some evidence this was the case. Of those I interviewed, nearly all considered the very worst life they could have in Israel, including in detention, and felt this would have been better than the best life they could now obtain in South Sudan.²⁷ They felt that the food and medical care they would have obtained in Israel were more valuable than the freedom they gained from returning.

Now, in reality, recipients of services will never feel that the best life they can live is certainly worse than the worst life they would have lived without the service. There is always a possibility that tragedy will strike after rejecting a service. In Mol's case, there was always a possibility that in Israel he would have been deported, killed, or died of natural causes, and so the worst possible life in not repatriating would not

have been better than the best life from repatriating. There is also the possibility that Mol, now that he has repatriated, will later find refuge in another country. He will no longer feel the best life he can live is worse than the worst life he could have lived in Israel. Moreover, even if he does not find refuge, he may adapt his preferences to his environment, and prefer the life he has to the life he could have had in Israel.

To account for this possibility, we can view this property as scalar: the greater recipients will feel that the best life with the service is worse than the worst life without the service, the greater reason to deny the service. Imagine that we can predict that Mol will feel, after returning, that the best life after repatriation must involve resettlement to a safer country, and all other outcomes are worse than the worst life in Israel. If he will also feel there is only a 1% chance of obtaining resettlement, there would be a weightier reason to deny repatriation than if he will feel there is a 2% chance he will obtain resettlement.²⁸ Conversely, imagine that after returning Mol will feel, looking back at his life in Israel, that there was a 1% chance of either dying in the near future or being deported had he remained in Israel,²⁹ and dying or deportation in Israel are worse than the best possible outcome in South Sudan. If this feeling could be predicted ahead of time, there would be a weightier reason to deny repatriation than if he will later perceive a 2% chance of dying or being deported had he remained in Israel.

Note that the relevant property above is not the actual probabilities of certain outcomes occurring, but the probabilities recipients will perceive after accepting the service. We might imagine Mol thinking, after returning, that he has a 2% chance of being resettled when he has in fact a 10% chance of being resettled. His level of regret is based on a false belief of the odds of his life becoming better. We ought to care about such regret arising from false beliefs. This is because we ought to care about preferences based on false beliefs, assuming the service provider has disclosed all known risks. Imagine a doctor warns a patient that the risks of paralysis from surgery are 20%, but the patient does not trust doctors and so suspects there is a 60% chance of paralysis from the surgery. If the patient prefers no surgery as a result, the

doctor ought to respect her preferences, especially if she would consistently hold these preferences after the surgery is complete. If preventing regret matters because respecting preferences matters, then preventing regret matters even when it is the result of inaccurate beliefs.

2.3 Greater all-things-considered regret at accepting the service

In some cases individuals will likely feel all-things-considered regret if they accept a service, but would have felt the same regret had they rejected the service. When individuals will feel the same regret regardless of whether they accept a service, there would be no regret-related reason to deny the service. Though denying the service would prevent regret – if individuals are denied a service, they cannot regret a choice because they have no choice – they will still feel that the best life they can live now is worse than the worst life they would have lived, had they access to the service. They will remain in a state where they lack control and their preferences are not met, failing to promote the value of preference-fulfilment described in the previous section. Regret is therefore a weightier reason to deny a service when the all-things-considered regret in accepting the service is greater than the all-things-considered regret in rejecting the service.

2.4 Epistemic transformation

Even if the above three properties are present, there is still a reason we might suppose individuals should be provided the service: they have given their informed consent. If individuals give their informed consent to accept the service, the service gives them control over their lives, and there is value in giving individuals such control. Of course, this value needn't be absolute, because if they are provided the service their control will be reduced later on, when they are forced to live with the consequences of their decision. But we might nonetheless put some value on control at the time of the service, given that their later reduction in control was the result of the their own earlier choice.

If we value individuals having control over their lives, and individuals have control when giving informed consent to a service, there is a fourth relevant property: regret is a weightier reason to deny a service the less individuals can give informed consent. A recipient is less able to give informed consent if she is not warned about risks. Even if she is warned of risks, she may be unable to understand their nature. Such is the case with services that are 'epistemically transformative.'³⁰

According to L.A. Paul, an epistemically transformative experience arises if one gains knowledge that would be impossible to gain without the experience. All experiences are epistemically transformative to an extent. The apple I ate this morning tasted slightly different than other apples I have eaten, and so I could not have known ahead of time the taste of the apple. Some choices are slightly more transformative, such as eating a durian fruit for the first time. Some choices are so transformative that a dominant element of one's life will change, and this change is both impossible to understand prior to the choice, and crucial to understand to establish one's preferences.³¹ A woman who has seen only black and white, and is deciding whether to experience the colour red, is faced with such a choice,³² as is a teenager deciding whether to enlist, a deaf individual deciding whether to gain hearing, and a potential parent deciding whether to have children. In such cases, the teenager, deaf individual, and potential parent cannot establish whether they prefer enlisting, hearing, and having children unless they understand what it is like to enlist, hear, and have children, but they cannot understand what these experiences are like until they experience them first-hand. They are therefore faced with an insurmountable information-constraint.³³ Though they cannot make an entirely informed choice, they can consider how much they value new experiences and discoveries for their own sake, as distinct from the subjective goodness or badness of the outcomes. Because each person values new experiences to a different degree, only each person can decide what she ought to do.³⁴

Based on the above analysis, governments and organisations should generally not deny services based on their epistemically transformative character. While recipients

of the services are unable to entirely comprehend the decisions they are about to make, they are able to decide whether they are willing to accept a decision whose meaning they cannot comprehend.

Nonetheless, a special reason to deny such services arises if regret is likely.

If individuals will likely regret a choice, they will later fail to live the life they want to live, and will be unable to change their earlier decisions. Given this likely outcome, we have reasons to ensure recipients are especially well-informed about the choices they are about to make. Being especially well-informed is impossible for services that are especially epistemically transformative, as they will change a dominant element of one's life in a manner impossible to comprehend ahead of time. This creates one reason to deny the service likely to be regretted, a reason that would not exist with epistemically transformative services unlikely to be regretted, or with services likely to be regretted that were not epistemically transformative.³⁵

Mol's choice to repatriate was epistemically transformative. Though he was informed about malnutrition in South Sudan prior to this return, and informed of widespread racism against Nuer citizens in Juba, he struggled to comprehend the meaning of such malnutrition and racism until actually experiencing these phenomena. This is because he had last lived in South Sudan as very young boy, and had access to food and security as a young boy, having moved to Khartoum before violence reached his village. Similar regret was common amongst others repatriating. They were told about the facts of life in South Sudan – such as the lack of clean water and widespread persecution – but struggled to understand the meaning of living without water and with persecution, having lived outside South Sudan their entire lives. When individuals take a plunge into a life that includes elements impossible to understand, and understanding these elements is crucial for establishing one's preferences, they struggle to give truly informed consent. Because truly informed consent is necessary for choices involving all-things-considered regret, there is a weightier reason to deny epistemically transformative services likely to be regretted.

Not all cases of refugee repatriation are epistemically transformative. When refugees are returning to a country they have lived in recently, or for an extensive period of time, they may be returning to conditions which they have experienced in the past, and so the experience will not be transformative. But such cases are increasingly rare. Refugees returning from Kenya to Somalia, from Uganda to Rwanda, and from Iran to Afghanistan are often returning to countries they have never lived in at all, at least not as adults.³⁶ Given that a truly informed return is impossible to obtain, the high degree of regret may be a decisive reason to deny repatriation.

This is consistent with the claim that a high degree of regret could also be a decisive reason to deny a service that is not epistemically transformative. Even when recipients are able to understand what it is they are accepting, and so able to control their lives, providing the service will also undermine control in the future, given that individuals will be forced to live with their decision. When the future undermining of control entails a detrimental blow to preference-fulfilment, this itself may justify denying the service. My point is simply that, when a service is epistemically transformative, we cannot even claim the service provides an individual a high degree of control at the time she accepts the service, given that she cannot give her informed consent if the service is epistemically transformative. In cases where the other three properties are not quite so pronounced – such as a refugee who will feel regret for a decade but not her whole life – the epistemically transformative nature of the service may be the tipping point in justifying its denial.

2.5 Transformative rejections

Some recipients will regret an epistemically transformative service but would have felt the same regret from an equally transformative rejection. Refugees who reject repatriation may find themselves in detention for the first time, an experience whose meaning they cannot comprehend beforehand, and they may feel similar all-things-considered regret as if they accepted repatriation.

To account for the potential ways that rejecting a service can be transformative, we ought to add a fifth relevant property: those who reject the service will either unlikely feel all-things-considered regret or, if they do, they will unlikely feel their decision was epistemically transformative. Were we to learn that both accepting and rejecting the service were similarly regretful and transformative, we could not claim that regret justified denying the service; denying the service would not prevent individuals from being in a position where they cannot understand a decision they will later regret.

In contrast, when individuals accepting and rejecting the service feel similar all-things-considered regret, but only one group is accepting an option that is epistemically transformative, there would be greater reason to deny the option that is transformative. This might occur if refugees are choosing between detention they have already experienced for some time, and a life in a country of origin they have never experienced before. If regret is likely for both choices, but only the second choice is transformative, only the second choice is not fully informed. There would be a weightier reason to deny repatriation than in a scenario where both choices were equally transformative, or in a scenario where only remaining was transformative. The latter might occur if refugees have lived in their country of origin recently, but will experience detention for the first time if they remain. In such a scenario, only remaining is transformative, and so only remaining is not fully informed. There would be a less weighty reason to deny repatriation to prevent regret.

2.6 Causal explanation

The final property relates to causal explanation. The more the service explains the regret, the weightier the reason to deny the service to prevent regret. In cases where the recipient will likely feel regret because of the service alone, and this regret is not dependent on additional choices made prior to or after the service, there is a weightier reason to deny the service.

There is some evidence that Mol's all-things-considered regret was largely explained by the repatriation he accepted. Before he returned to South Sudan, while still living in Israel, he could not apply for refugee status, and so was forced to work on the black market, and then forced to face detention. He had only two choices: live a life in detention, or repatriate. When he returned, his only source of funds was the money he returned with, his only option of employment was to open a food stall in a market, and the only place he could live was Juba, as he would have struggled to find sufficient customers in secondary towns. He was then forced to flee to an IDP camp. In a life of few choices, repatriation was the only choice that resulted in the outcome of all-things-considered regret. And it is this choice alone that was made possible by the NGO. As such, he received help to make a choice that was largely responsible for the all-things-considered regret he felt.

This is not always the case with repatriation. Unlike Mol, some refugees can apply for refugee status, but choose not to. Had they applied, and gained refugee status, they would have gained residency and possibly citizenship. Had they gained citizenship, they could have left and re-entered the safe host country fairly easily. Had they repatriated after this, their repatriation would be reversible, and less likely to be regretted. If in reality they chose to not apply for refugee status and also chose to repatriate, their all-things-considered regret would be from a series of choices, and not just repatriation. Helping with repatriation in such cases is less problematic. Repatriation would be only one of many choices that, in combination, led to the regret felt.

Some might suppose that this property is rarely ever found. This is because it is rare that someone feels regret from a single choice alone, or even from a small number of choices. Mol almost certainly made many choices after he repatriated that he regretted, and so the regret he experienced would be the result of both repatriation and these subsequent choices. For example, if he repatriated, regretted his decision, and then opened a small stall in a market which he regretted as well, he would feel regret the result of both repatriation and this subsequent decision. Indeed, there will

likely be many decisions he makes leading to the feeling that his life could be better had he decided differently, and so no one decision will lead to the regret he feels.

Though Mol will likely make other decisions that lead to regret, it is unlikely he will make other decisions that lead to regret that is all-things-considered and the result of an epistemically transformative experience. This regret is rare, and so if one feels such regret from a service, there will likely be an extended period of time where only the service explains this regret. Even if Mol regretted opening a stall in the market, he did not feel all-things-considered regret from this decision, where the worst life without the stall would have been better than the best life with the stall. If only the choice to repatriate entailed such strong regret, and no other choice explains this strong sense of regret, then repatriation explains this strong regret.

We might imagine this sixth property present outside the sphere of repatriation. Imagine a segment of the population, despite leading the healthiest of lives, is diagnosed with cancer, and undergo treatment to extend their lives by two years, leading to painful side effects and all-things-considered regret. Imagine they feel regret from the particular choice to accept the treatment, never having made another choice that contributed to the regret felt. In such cases, the doctor providing the treatment would be contributing a great deal to the regret felt, as the regret would arise from the treatment alone, and no other prior or subsequent choices. The hospital would have a weighty reason to discontinue the treatment, assuming the other five properties were met.

Similarly, imagine students regret their choice to enrol in a costly degree program, later feeling that their lives would be all-things-considered preferable had they never enrolled, and no other choice explains this all-things-considered regret they feel. If this regret was epistemically transformative, and they wished the degree had never been an option at all, then this would give the university an especially weighty reason to discontinue the degree program, or limit it to students less likely to feel regret. Finally, imagine athletes are warned about the risks of concussions in joining

an American football team, join regardless, and regret their decision throughout their lives, feeling constant stress about the possibility they suffered permanent brain injuries which will become apparent as they age.³⁷ If these athletes feel regret from the particular choice to join the team, and no other prior and subsequent choices, then the sports team would have a weighty reason to discontinue their athletic program, assuming the other five properties were present.

It is worth noting that, even in cases where regret is an especially weighty reason to deny a service, because all of the above six properties are present, there may still be competing considerations. When these competing considerations are sufficiently weighty, regret may not be a decisive reason to deny the service.

Such may be the case, for example, in policies surrounding contraceptive sterilisation. Today, many states deny sterilisation to individuals younger than twenty-five,³⁸ as those younger than twenty-five are statistically more likely to regret their decision.³⁹ With further research and more fine-grained data, we might be able to predict which individuals are accepting an epistemically transformative choice, which individuals will likely feel all-things-considered regret, and which individuals are likely to feel regret from sterilisation alone. In such cases, though there is a weighty reason to deny sterilisation, this reason may not be decisive due to competing considerations. One competing consideration is related to reproduction: the right to control one's reproductive organs to not have children may be especially weighty, such that preventing regret may be insufficient to override this right.⁴⁰

In contrast, it seems unlikely that the interests in refugees returning to unsafe countries are weighty enough considerations to trump the importance of preventing regret, at least when the six properties I described are present. Similarly, athletes' interests in joining a team do not necessarily trump the value of preventing regret, and it is not clear that patients' interests in extending their lives by two years trump the value of preventing regret. Whether they do will ultimately require a broader discussion, but such a discussion is necessary, precisely because regret matters.

2.7 Welfare reductions

Until now, I have limited my discussion to individuals who will feel regret in addition to experiencing reductions in welfare and freedom. When Mol repatriated he was forced into an enclosed camp without reliable food and security, and regretted his decision for these reasons. I believe that regret also matters when welfare or freedom will be improved. Imagine a refugee who repatriates from a detention center to Gambella in Ethiopia, never having tasted Ethiopian food or Ethiopian espresso, never having lived in a hot tropical climate, never having slept under a mosquito net, and never having worked as an interpreter, his profession upon arrival. His life is improved according to certain objective criteria – he has more food and mobility – yet he regrets his choice nonetheless, a choice leading to a life he could not fully understand prior to repatriating. If an NGO could predict that he would likely feel this way prior to returning, I believe the NGO would have a reason to deny him repatriation. This is because, if regret is likely, we ought to demand a higher level of informed consent, impossible to obtain with epistemically transformative services.

Some may reject this last claim, and argue that regret is only a weighty reason to deny a service if welfare or freedom will be reduced. Moreover, even if regret matters when welfare and freedom are improved, it might matter more when either are reduced: we might feel more concerned if a refugee feels regret because she is displaced and malnourished than if a refugee feels regret but is neither displaced nor malnourished. If this is true, then we can add a seventh relevant property: the more welfare and freedom will be reduced, the more likely regret is a reason to deny a service. It remains the case that regret is a reason distinct from these outcomes. If we compared two refugees, two athletes, and two patients, and the first was likely to feel regret because her welfare was reduced, and the second was unlikely to feel regret despite her welfare being reduced, there would be an additional reason to deny repatriation to the first and not the second.

3. Conclusion

When an individual consents to a service, we might provide it, believing it is her choice to make. But choices at one time can conflict with preferences at another. We have a weighty reason to deny a service when most recipients will likely feel all-things-considered regret for an extended period of time, and this outcome is the result of a single epistemically transformative choice they wish they had never made.

Perhaps the properties I described are rarely present, and so regret is rarely a very weighty reason to deny a service. Rarely does any given choice we make explain the regret we feel. It is more likely part of a web of complex decision making, with the particular choice to accept a service only one property in the ultimate feeling that we wish we had chosen otherwise. And rarely can we be confident, after a choice, that our lives would be better had we chosen differently. Exploring rare cases of all-things-considered regret is helpful precisely because they are exceptional, emphasizing why regret, as a general rule, is not a particularly good consideration for the choices we make, nor a good consideration when fulfilling the choices of others.

Though regret is not usually a very important consideration, there remain cases where it is, requiring us to re-evaluate when services are provided. Athletes engaging in high-risk sports may feel all-things-considered regret about joining a team, and dominant aspects of their lives may have been impossible to comprehend prior to their choice. Patients undergoing certain treatments may feel similarly, even if the treatments help them in other ways. Refugees may later wish they had rejected repatriation, even if this meant living in detention. If regret is a relevant consideration for how we treat others, then athletes, patients, and refugees should be asked if they wish they had never been given a service at all. Most forms of regret will not be all-things-considered, and most will be from a series of choices. But some forms of regret may be similar to what Mol felt. We should care about such

experiences, accounting for the preferences people have later when assisting them now.

Mollie Gerver, Department of Government, University of Essex

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¹ Warren Quinn's example of the self-torturer also fits a case of similarly rational regret. See Warren Quinn, 'The puzzle of the self-torturer', in *Morality and Action* (Cambridge: Cambridge University Press, 1993), p. 198.

² For a related discussion on the rationality of similar decisions, see Michael Bratman, 'Toxin, temptation, and stability of intention', in Jules L. Coleman (ed.) *Rational Commitment and Social Justice: Essays for Gregory Kavka* (Cambridge: Cambridge University Press, 1998), pp. 59-83.

³ For a defense of this claim, see Mollie Gerver, 'Refugee repatriation and the problem of consent', *British Journal of Political Science*, (forthcoming).

⁴ Personal Interview, Juba, 4 January 2013. The majority of sixty refugees I interviewed who returned from Israel to South Sudan during or after 2012 felt similar regret. Similarly, in 2010, the United Nations High Commissioner for Refugees (UNHCR) learned that thousands of Iraqi refugees it assisted to repatriate regretted their decisions to return, wishing they had remained in surrounding countries. See Mollie Gerver, *The Ethics and Practice of Refugee Repatriation* (Edinburgh: Edinburgh University Press, forthcoming), ch. 1 and 4; UNHCR Briefing Note, 'Iraqi Refugees Regret Returning to Iraq, Amid Insecurity', 19/10/10, last accessed on 29 June 2018 at: <https://reliefweb.int/report/iraq/unhcr-poll-iraqi-refugees-regret-returning-iraq-amid-insecurity>;

⁵ Paul Benson, 'Free-agency and self-worth', *Journal of Philosophy*, 91, 12 (1994): 650-668; Nathalie Stoljar, 'Autonomy and the feminist intuition' in Catrioni Mackenzie and Natalie Stoljar (eds.) *Relational Autonomy: Feminist Perspectives on Autonomy, Agency, and the Social Self* 2000 (Oxford: Oxford University Press, 2000), pp. 94-111.

⁶ For the view that one's life is autonomous as a whole if one acts according to one's personal commitments, see Joel Anderson, 'Autonomy and the authority of personal commitments: From internal coherence to social normativity', *Philosophical Explorations*, 6, 2 (2003): 90-108; Harry Frankfurt, 'The importance of what we care about', *Synthese*, 53, 2 (1982): 257-272. For the view that autonomy can be enhanced when one's future preferences are fulfilled, see John

K. Davis, 'Precedent autonomy and subsequent consent', *Ethical Theory and Moral Practice*, 7, 3 (2004): 267-291.

⁷ Thanks to a reviewer for assistance in expressing this idea.

⁸ Maria Margarita Becerra Perez, Matthew Menear, Jamie C. Brehaut and France Legare, 'Extent and predictors of decision regret about health care decisions: A systematic review', *Medical Decision Making*, 36, 6 (2016): 777-790.

⁹ Joseph Raz, *The Morality of Freedom* (Oxford: Oxford University Press, 1988), p. 373.

¹⁰ Raz op. cit. p. 408.

¹¹ Jeff Crisp, 'The politics of repatriation: Ethiopian refugees in Djibouti, 1977-1983', *Review of African Political Economy*, 33, 30 (1984): 73-82; US Department of State IDIQ Task Force Order No. SAWMMA13F2592, 'Field evaluation of local integration of former refugees of Tanzania', last accessed on 29 June 2018 at <https://www.state.gov/documents/organization/235056.pdf>

¹² Kate Greasley, 'Abortion and regret', *Journal of Medical Ethics*, 38, 12 (2012): 705-711, at pp. 210-211.

¹³ For more examples demonstrating this point, see Shelly Kagan, 'The additive fallacy', *Ethics*, 99, 1 (1988): 5-31 at p. 18.

¹⁴ Krister Bykvist, 'Prudence for changing selves', *Utilitas*, 18, 3 (2006): 264- 283.

¹⁵ Derek Parfit, *Reasons and Persons* (Oxford: Oxford University Press 1984), pp. 357-61.

¹⁶ Greasley 2012 op. cit., pp. 705-711; Elizabeth Harman, "'I'll be glad I did it" reasoning and the significance of future desires', *Philosophical Perspectives*, 23 (2009): 177-199; R. Jay Wallace, 'Justification, regret, and moral complaint: looking forward and looking backward on (and in) human life', in U. Heuer and G. Lang (eds.), *Luck, Value and Commitment: Themes from the ethics of Bernard Williams* (Oxford: Oxford University Press 2012), pp. 163-194.

¹⁷ More specifically, she has decisive moral reasons to not conceive. It may also be that, in retrospect, she will have agent-neutral reasons to not affirm her decision to conceive, even if she has agent-relative reasons to affirm her decision to conceive. For the first view, see R. Jay Wallace, *The View from Here: On Affirmation, Attachment, and the Limits of Regret* (Oxford: Oxford University Press 2013), pp. 104-106. For the second view, see Karen Jones, 'Regret and affirmation', *Journal of Applied Philosophy*, 34, 3 (2017): 414-419 at pp. 417-418.

¹⁸ Indeed, even if the parent knows she will love her child, she may still suspect that she will regret her choice. At least according to one philosophical view, a loving parent can prefer the life she would have lived, where no child exists but other more desirable outcomes emerged, over the life she lives now, where the child exists but the other desirable outcomes did not emerge. This philosophical view is consistent with the testimonies of parents who insist that they love their child, but still regret their decision to have a child. See Jones op. cit. at p. 418; Stefanie Marsh, "'Its breaking the taboo": the parents who regret having children', *The Guardian* 11 February 2017, last accessed on 22 March 2018 at <https://www.theguardian.com/lifeandstyle/2017/feb/11/breaking-taboo-parents-who-regret-having-children>.

¹⁹ This is consistent with Harman's account, as Harman merely states that there are cases where an agent ought to perform an action that she will later regret. Even if such cases exist, there are also cases where an agent ought not perform an action because of her later regret. See Harman op. cit. at p. 193.

²⁰ This argument often appeals to the principle of autonomy: an autonomous life requires one to have control over one's decision-making. See Richard Arneson, 'Autonomy and preference formation', in Jules L. Coleman and Allen Buchanan (eds.) *In Harms Way: Essays in Honour of Joel Feinberg* (New York: Cambridge University Press, 1994), pp. 42-75; Paddy McQueen, 'The role of regret in medical decision-making', *Ethical Theory and Moral Practice*, 20, 5 (2017): 1051-1065 at pp. 1057-1058; Raz op. cit. at p. 371.

²¹ Thanks to Jack Woods for raising this objection.

²² For example, see Jonathan Bennett, *The Act Itself* (Oxford: Oxford University Press, 1998), at ch. 6-8.

²³ This is consistent with the claim that preventing regret may be one pro tanto reason to force someone to accept a service. This reason is simply insufficient on its own to justify doing so.

²⁴ Further clinical trials are required to establish just how long this regret lasts, but we should not assume that regret will not last based solely on the possibility of individuals adapting their preferences. See Perez et al op. cit.

²⁵ UN New Centre, 'Iraqi refugees regret returning home, UN agency finds', last accessed on 8 December 2017 at <http://www.un.org/apps/news/story.asp?NewsID=36493#.Wiq6FrSFjow>

²⁶ Greasley op. cit. at p. 708 and 710; Wallace 2013 op. cit. at p. 87-90.

²⁷ When I write 'better' I mean preferable. When I write 'best possible life' I mean 'most preferable possible life.' I shall use the words 'better' and 'best' in these senses for the remainder of the article.

²⁸ Indeed, the odds of him resettling to a truly safe country are likely less than 1%, given his very limited resources to travel, the lack of food security in neighboring countries, the low rates of resettlement, and his inability to resettle directly from South Sudan. See Annelisa Lindsay, 'Surge and selection: power in the refugee resettlement regime', *Forced Migration Review*, 54 (2017): 11-13; UNHCR, 'Figures at a glance', 2016, last accessed on 9 December 2017 at <http://www.unhcr.org/en-us/figures-at-a-glance.html>

²⁹ The chances of Mol dying within Israel were extremely low, given the medical care and food security he would obtain, and his odds of deportation were extremely low, given that the courts in Israel have consistently blocked government attempts to deport refugees to South Sudan. At most, the government is able to detain asylum seekers indefinitely. See Ilan Lior, 'Israel seeking to get around court ruling and go on coercing refugees into deportation', *Haaretz*, 31 August 2017, last accessed on 9 December 2017 at <https://www.haaretz.com/israel-news/.premium-1.809855>

³⁰ L.A. Paul, 'Transformative choice' in *Transformative Experience* (Oxford: Oxford University Press, 2014), pp 1-51.

³¹ Paul 2014 op. cit. at pp. 1-51.

³² Frank Jackson, 'Epiphenomenal qualia', *Philosophical Quarterly*, 32, 127 (1982): 127-36.

³³ Paul op. cit. at p. 115.

³⁴ Paul op. cit. at p. 115-123.

³⁵ No such reason to deny the service would arise with epistemically transformative services unlikely to be regretted because, if there is no regret, there is less of a need for a high level of informed consent. The epistemically transformative nature of the service is less problematic. It is worth noting that this is consistent with Joseph Millum and Danielle Bromwich's recent claim that consent is *valid* even if the consentor does not understand the nature of the offer she is accepting. By 'valid consent' they mean the consentor no longer has a claim against the agent who is obtaining consent. For example, if a patient consents to a morally transformative treatment she will likely regret, she does not have a claim against the doctor. I am proposing something related but distinct: an individual cannot give their *informed* consent for an offer that is both epistemically transformative and likely to be regretted. *Informed* consent, as I understand it, is given when an agent's consent for a service gives the agent obtaining consent a good reason for providing the service and where, in the absence of informed consent, the agent obtaining consent lacks this good reason. Even if an agent lacks a good reason to provide the service, the recipient of the service does not necessarily have a claim against her. See Joseph Millum and Danielle Bromwich, 'Understanding, communication, and consent,' *Ergo*, 5, 2 (2018): 45-68 at pp. 55-56.

³⁶ Awa M. Abdi, 'In limbo: dependency, insecurity and identity amongst Somali refugees in

Dadaab Camps', *Refuge*, 22, 2 (2005): 6-14; Agence France-Presse, 'Somali refugees regret returning home from Kenya', 27 June 2017, last accessed on 28 July 2017 from <http://m.news24.com/news24/Africa/News/somali-refugees-regret-returning-home-from-kenya-20170627>; Ahimbisibwe Frank, "'Voluntary" repatriation of Rwandan refugees in Uganda: between law and practice – views from below', *Journal of Identity and Migration Studies*, 11, 2 (2017): 98-120; Lindsey N. Kingson, 'bringing Rwandan refugees "home": The cessation clause, statelessness, and forced repatriation', *International Journal of Refugee Law*, 29, 3 (2017): 417-437; Sarah Pou Rohani and Sima Pour Rohani, 'Afghan immigrants in Iran and citizenship', *Journal of Public Administration and Governance*, 4, 4 (2014): 18-28; Anisseh Van England-Nouri, 'Repatriation of Afghan and Iraqi refugees from Iran', *International Journal on Multicultural Societies*, 10, 2 (2008): 144-169.

³⁷ A number of football players have expressed regret at having become a football player because of the effects of concussions, or the worry that they will experience the effects of concussions later in life. Though these players were also misinformed about the risks, and so are outside of the scope of this article, some have banned their children from playing as well, perhaps on grounds that their children will regret their decision even if they are fully informed. We might imagine a university taking a similar stance of discontinuing its football program to prevent regret. See Emmett Knowlton, 'Former NFL player regrets playing football, says he's losing his memory and can't go down the stairs', *Business Insider*, 19 January 2016, last accessed on 9 May 2018 from <http://uk.businessinsider.com/former-nfl-player-antwaan-randle-el-regrets-playing-football-2016-1?r=US&IR=T>; Scott Rafferty, 'Bo Jackson's big regret: 'I would have taken a different path'', *Rolling Stone*, 30 September 2016, last accessed on 9 May 2018 from <https://www.rollingstone.com/sports/bo-jackson-regrets-playing-football-w442925>; Katy Waldman, 'College football *should* be banned', *Slate*, 9 May 2012, last accessed on 9 May 2018 from http://www.slate.com/articles/sports/intelligence_squared/2012/05/ban_college_football_how_buzz_bissinger_and_malcolm_gladwell_won_the_slate_intelligence_squared_debate_on_may_8_.html

³⁸ Engender Health, Chapter 4 in *Contraceptive Sterilization: Global Issues and Trends*, 2002, Accessed on 4 December 2017 at https://www.engenderhealth.org/files/pubs/family-planning/factbook_chapter_4.pdf

³⁹ Kathryn M. Curtis, Anshu P. Mohllajee, Herbert B. Peterson, 'Regret following female sterilization at a young age: a systematic review', *Contraception*, 73, 2 (2006): 205-210; S.D. Hillis, P.A. Marchbanks, L.R. Tylor, H.B. Peterson, 'Poststerilization regret: findings from the United States collaborative review of sterilization', *Obstetrics and Gynecology*, 93, 6 (1999): 889-95; Denise J. Jamieson, Steven C. Kaufman, Caroline Costello, Susan D. Hillis, Polly A Marchbanks, Herbert B Peterson, the US Collaborative Review of Sterilization Working Group, 'Comparison of women's regret after vasectomy versus tubal sterilization', *Obstetrics and Gynecology*, 99, 6 (2002): 1073-1079.

⁴⁰ More specifically, the right to control your organs to not have children may be weightier than the right to control your organs to have children, which is why denying sterilization is wrong, even if a person will later wish they could have children. However, it might also be the case that individuals can sufficiently control their reproduction if given other forms of reversible contraceptives, rather than sterilisation. If we learned to create a form of reversible contraception that was as effective, safe and convenient to use as sterilisation, then there may be a weightier reason to deny sterilisation to prevent regret.