

# Leaving the Present Behind

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**Abstract:** Philosophers have recently argued that using our resources to tend towards those living in the very far future will bring about the most goodness or impartial, agent-neutral value. In this paper I sketch a very simple argument to the effect that even if these philosophers are correct, we still have at least a *pro tanto* moral reason to prioritise the claims of those contemporaneous with us. This moral reason, I suggest, is one of *fairness*. By turning our attention to future people, we risk leaving the present behind

## 1. Introduction

This paper begins with a simple observation: there is a pervasive asymmetry between the claims to our assistance generated by those currently in existence and those in the far future. To observe this asymmetry, consider what will happen to those presently in existence if we fail to help them. Well, they are simply out of luck. Such is the way with causation – people in the future certainly cannot step in to aid our needy, nor can those in the past. We are their only potential source of aid. If we fail to help them, then they will not be helped. As such, when we divert our attention away from them – and, for example, towards the future instead – we risk leaving them behind.

In many cases, this is not the case when it comes to those living in the far future. If we fail to help, there are successive generations, including their own, which might be able to meet their needs. Of course, our failing to help them makes it less likely that they will gain the necessary assistance – it might even make them much less likely to. But it does not – in many decision contexts – lower their chances to nought. Let us call this observation the *dependence asymmetry*.

I believe the dependence asymmetry is morally significant. In this paper, I present one way of thinking about the moral importance of this asymmetry, namely as a concern about fairness. In §2 of the paper, I translate the dependence asymmetry into a concern about a specific conception of fairness, namely *equal distribution of prospects*. In §§3-4 of the paper, I connect the dependence asymmetry to current debates about longtermism, and in §5, I highlight how such concerns about fairness might practically shape prioritisation decisions for longtermists.

## 2. Giving people a fair chance

To begin our discussion, let us introduce a thought experiment to capture the dependence asymmetry:

**Medical Allergy.** Adam, Beth, and Chris have contracted a fatal disease. Without treatment, all will die. You have two doses of Medicine Alpha, which can cure the disease. Adam's condition is more severe: saving him requires both doses. Your friend, who often passes this way at this time of the day, usually carries two doses of a different cure, Medicine Beta. You're unsure if she will arrive before the three die, but you estimate a 0.4 chance she will. Unfortunately, Adam is allergic to Medicine Beta, though Beth and Chris are not. You must choose: (a) give Adam both doses of Medicine Alpha, hoping that your doses arrive to save Beth and Chris; (b) give Beth and Chris a dose each of Medicine Alpha, allowing Adam to die; (c) give the medicine to no one.

At least with respect to the dependence asymmetry, Adam is our analogue for those alive now; only we can help him. Beth and Chris – like those in the future – are able, but not certain, to be helped by others. What ought we do in this situation? Well, notice that (b), giving Medicine Alpha to Beth and Chris, brings about the most agent-neutral value, in expectation. Nonetheless, it seems to me that we ought to choose (a); we ought to give the medicine to Adam. I suspect others will share this intuition. However, I won't press the point of intuition. Rather, I wish to highlight how this asymmetry might be morally significant in ways many are already familiar with.

I have no doubt that there are several ways to analyse the asymmetry I have in mind. One might, for example, deny that treating Beth and Chris brings about the most agent-neutral value; if the marginal moral value of prospects diminishes steeply enough, it might work out best to treat Adam.<sup>1</sup> Alternatively one might think that there is something morally important about *certainty* in particular; that we have moral reasons to avoid making it such that someone will certainly die. Or, if one is inclined against aggregation, as a contractualist is, we might highlight that the asymmetry means that Adam has the greatest claim to our assistance, and thus we owe it to him to give him the medicine.

But, in this paper, I wish to focus on what I find to be a compelling concern about cases like Medical Allergy – namely, one of fairness. It strikes me as *unfair* to Adam to give Medicine Alpha to Beth and Chris. Doing so means that Adam is

<sup>1</sup> H. Orri Stefánsson (2024) provides a compelling argument for the claim that chances have diminishing marginal moral value.

the only one with *no chance* of survival, and yet we could distribute things such that everyone has *some chance* of survival.

One way of thinking about this concern for fairness is in terms of the unfair distribution of goods. Before we begin, it is important to note that my discussion centres around concerns about *fairness of outcomes*. Nonetheless, I believe that the argument I present throughout this paper apply to concerns about *procedural fairness*, *mutatis mutandis*.<sup>2</sup> Placing such complications to the side, here are three plausible principles which might govern the fair distribution of goods:

**Ex-Post Equality:** *Ceteris paribus*, one ought to distribute goods in a manner that ensures maximal equality between the beneficiaries' resultant well-being.

**Ex-Ante Equality:** *Ceteris paribus*, one ought to distribute goods in a manner that ensures maximal equality between the beneficiaries' prospects.

**Efficiency:** *Ceteris paribus*, one ought to distribute goods in a manner which generates the most aggregate expected well-being.<sup>3</sup>

Efficiency is a familiar principle, often associated with utilitarianism about distributive fairness. *Ex-ante* equality and *ex-post* equality may look less familiar to the reader. They are two distinct interpretations of the egalitarian requirement to distribute goods in a manner which generates maximal equality, differing in how they view claims under risk. On the *ex-post* interpretation, what we are distributing is predictable group-level outcomes – for example, the outcome of surviving or dying. The *ex-post* principle, therefore, says that we should try to make the outcome as equal as possible. Alternatively, on the *ex-ante* perspective, we are attending to the distribution of individual prospects or expected utility – we should try to ensure equal prospects between would-be beneficiaries.<sup>4</sup>

Let us provisionally adopt a pluralist view, under which goods ought to be distributed with reference to all three of these principles. On this view, equality in prospects and in outcomes, as well as maximising aggregate wellbeing, each

<sup>2</sup> I have in mind proponents of lotteries in procedural fairness (Peter Diamond, 1967; John Broome, 1991). Whilst the argument I propose can also be made in terms of (weighted) lotteries to distribute goods, it is *prima facie* different to the argument I am making. The argument I present treats prospects as a form of a good to distribute, whilst proponents of lotteries in procedural fairness do not necessarily see prospects as a good, but rather as a means of more fairly distributing some other good.

<sup>3</sup> The formulation of these principles is borrowed from Curran and John (2022). For discussion of *ex-post* and *ex-ante* equality, see Diamond (1967), Broome (1991), Temkin, (2001), Hyams (2017). Frances Kamm also has an influential discussion of the fair distribution of chances (1993, ch. 6-7).

<sup>4</sup> For more details on the nature of the *ex-ante* and *ex-post* distinction, see Steuwer (2021), Curran (2025), R ger (2025).

provide normative reasons to favour a course of action. Perhaps this is because each of these things contributed towards the good. An alternative picture is that whilst the good might consist in maximising aggregate welfare, concerns about *ex-post* and *ex-ante* equality provide a form of deontic constraint on the good.<sup>5</sup> I will assume this view moving forward, but not much hangs upon it.

In Medical Allergy, the option which generates the most *ex-post* equality is (c) – giving the medicine to no one.<sup>6</sup> However, (c) is the worst option; it brings about a state-of-affairs far worse than either (a) or (b); (c) guarantees that exactly three people will die, whilst (b) guarantees that exactly one person will die, and (a) is a lottery with the potential outcomes of no one or exactly two people dying.<sup>7</sup> In this case, the loss of aggregate wellbeing outweighs the benefits to *ex-post* equality, rendering (c) impermissible.

What's left to point out is that (a) is more *ex-ante* equal than (b). The set of prospects brought about by choosing (a) is {certain survival, 0.4 chance of survival, 0.4 chance of survival} whilst under (b) it is {certain death, certain survival, certain survival}. We are now able to tell a plausible story about why one should choose (a) in Medical Allergy. Whilst it might be true that (b), giving Medicine Alpha to Beth and Chris, would bring about the most aggregate expected wellbeing, the improvements to *ex-ante* equality brought about by, (a), giving the medicine to Adam, outweighs the costs to goodness, rendering (a) obligatory. If, however, the cost to aggregate expected wellbeing was higher – if, for example, the number of people in the larger group was increased – then the reasons pertaining to *ex-ante* equality might be outweighed.

These lessons are generalisable when thinking about trade-offs between the short-term and the long-term. Given the dependence asymmetry, a choice to help those in the future over those alive now will, *ceteris paribus*, give rise to inequalities in the distribution of prospects. This *ex-ante* inequality provides us with a *pro tanto* reason to favour those in the short-term. My aim in this paper is not to give a complete account of the moral significance of the dependence asymmetry –

<sup>5</sup> For discussion of the value of equality, see Derek Parfit (1997), Joseph Raz (2009), Temkin (2000), and Jeremy Moss (2015).

<sup>6</sup> Choosing (a) could possibly lead an outcome that was just as equal – that is, if the friend turned up, and everyone survived. However, (c) guarantees an equal outcome whilst (a) makes it more likely than not that there will be an unequal outcome, so (c) is still preferred by *ex-post* equality. Nonetheless, I point this out to highlight that the case is not wholly equalised, as (a) is also preferable to (b) in terms of *ex-post* equality. This, however, is not relevant to the question of the dependence asymmetry between the short-term and long-term. In Medical Allergy, the short-term analogue might result in a totally equal distribution of outcomes because it is possible in this case that *everyone* could be saved. However, this is implausible in the real world, even of short-term interventions.

<sup>7</sup> It is interesting to note that option (a) is a spread lottery of lower expected value than (b) which is a sure thing. Typically, debates around appropriate risk attitudes when imposing risks on others seem to suggest that risk-aversion, and opposed to seeking, is required (Buchak, 2017).

indeed, to do so would plausibly require thinking about a range of moral phenomena. Nevertheless, I believe the picture I have sketched captures something compelling about Medical Allergy. At least part of my intuition that it would be wrong to give Medicine Alpha to Beth and Chris is that we owe it to Adam to give him at least a *fair shot* of survival.

To pull the strings of my argument together, I have highlighted a key asymmetry between those presently in existence and those in the far-future. Whilst future people may be helped by future generations, including their own, we alone stand to help those amongst us. This asymmetry means that failing to save those who cannot be helped by anyone else gives rise, *ceteris paribus*, to *ex-ante* inequality. Just as in Medical Allergy, we have reasons of *ex-ante* equality to prioritise those in the short term.

#### **4. Longtermism and our obligations to future people**

In recent years, debates about our obligations to future people have been shaped by the growing *longtermist movement*. Longtermists are keen to draw our attention towards the moral obligations we might have to future people. Just as we have widened our moral gaze to include other nationalities, genders, and indeed, species, many philosophers are keen to point out the moral irrelevance of temporal location. It seems to many that simply because someone is temporally distant to us does not mean that their interests or wellbeing matter less, morally speaking. Accepting such a claim might provide us with compelling reason to begin seriously attending to the claims of future people, just as we do to those around us.

So far, so good. But such observations might also have a significant impact on our behaviours; if we treat the claims of future people just as we treat the claims of those around us, plausibly the manner in which we distribute our finite resources will change too. For some of what we currently share amongst presently existing people – whether that be time, money, or labour – should now go to the future. Indeed, according to longtermism it might very well seem that a great deal of what we currently give to those around us ought to be redistributed to those in the far future.

Longtermists highlight at least one compelling reason to divert resources into improving the wellbeing of future people, namely that doing so will bring about the most agent-neutral value, or goodness, in expectation – where value is understood as impartial, aggregate wellbeing.<sup>8</sup> Indeed, longtermists claim that long-

<sup>8</sup> This claim is often referred to as axiological longtermism, for supporting arguments, see Nick Beckstead (2013) and Hilary Greaves and Will MacAskill (2025).

term interventions might bring about many orders of magnitude more expected value than the best available short-term interventions. The argument for this claim rests on the fantastically large number of people that might come into existence in the future: if we can improve their prospects by even the tiniest amount, then we will generate a massive amount of expected value.

In this section, I want to consider what the dependence asymmetry, and the *ex-ante* inequalities it produces, might have to say about longtermism. To begin, we will need a better case than Medical Allergy, for Medical Allergy is unlike the decision to redirect resources from the short-term into the future in at least two important ways: first, the stakes are larger with long-term interventions; and, second, the interventions are riskier. When it comes to influencing the far-future, we lack any real confidence about the outcomes of our actions. Most often, we cannot, with any real certainty, bestow a benefit on any individual. Rather, long-term interventions bestow a large amount of good on aggregate by ever so slightly improving the chances of a very large group of people – the group of people to come in the future. A closer analogy to the trade-offs involved in long-term and short-term interventions, then, looks like the following:

**Funding Gamble.** There are one hundred million people at a one in ten million risk of developing a fatal disease. We can treat the group with an inexpensive pill which will reduce their risk of the disease to nought, in expectation saving ten lives. Unfortunately, Fred has also contracted the fatal disease. However, we can certainly cure him through an expensive treatment. Due to our finite resources, we can only (a) treat the entire group, or (b) treat Fred, not both. Luckily, we have been informed that other funding bodies are looking into funding the preventative intervention, whilst no one else is able to fund Fred's treatment. Whilst we don't know the precise likelihood of the preventative intervention receiving funding, we know there is a non-negligible chance that they will receive funding.<sup>9</sup>

Funding Gamble mirrors the way that, at least some, available short-term interventions compete against long-term interventions.<sup>10</sup> The treatment option (b),

<sup>9</sup> This case is adapted from two other cases I have discussed at length (2025a, p.1142; 2025b, 128).

<sup>10</sup> One way that Funding Gamble is simplified is that the short-term analogue – Fred – is one person who will certainly die without the intervention and certainly survive with the intervention. Most short-term interventions, however, will act on groups of people and improve their prospects from non-zero to not certain. This disanalogy is not an issue for the argument I make in this paper, but it will be an issue for other plausible moral stories one might wish to tell about Medical Allergy, including, for example, one that latches onto the moral significance of certain death.

the short-term analogue, bestows a benefit by substantially improving the prospects of a small group of people. The preventative intervention (a), the long-term analogue, however, generates significantly more goodness, in expectation, by only slightly improving the prospects of an extremely large number of people. Likewise, the long-term need can be met by other means.

Again, in this case, you might think that we ought to treat Fred, despite the cost to expected goodness of doing so (though you might not share this intuition – more on this in §5). This would suggest that the *pro-tanto* reasons outlined in the previous section do not disappear in a case more akin to the trade-off between those in the short-term and those in the future.

Indeed, rather than washing out inequality, considerations of inequality are *compounded* by the chancy nature of long-term interventions. It should be clear that in any decision context suitably analogous to Funding Gamble, the short-term analogue generates less inequality. This is a result of two features of Funding Gamble. The first is the subject of this paper, the fact that the prospects of those in the large group are not wholly dependent on our decision. The second is that that antecedent level of risk which is being addressed through the preventative option is very low. Combined, this means that a choice to engage in the treatment option generates only extremely slightly unequal prospects; Fred will certainly survive, whilst the one hundred million will each face the already minuscule risk of one in ten million risk of death, which is further discounted by the probability that they receive alternative help. Compared, to the starkly unequal prospects generated through the preventative intervention, *ex-ante* equality clearly favours our short-term analogue. It seems that when we consider an option to improve the prospects of those alive now against an option to improve the prospects of those in the far future, concern for *ex-ante* equality gives us at least a *pro tanto* reason to choose the former.

#### 4. Objections

In this section, I am going to address three criticisms that I foresee being levied against the argument I have presented. The first is the *hinge of history problem*, the second is the relevant *goods problem*, and the third is the *antecedent risk problem*.

In my presentation of my argument, I have made – very explicitly – the assumption that long-term needs, unlike short-term needs, might still have a chance of being satisfied, even if we fail to do so.<sup>11</sup> There are, of course, some

<sup>11</sup> To be explicit, I mean this claim probabilistically. I believe we should – given the evidence available to us – believe that at least some long-term cause areas *might* be tended to by future generations. There is an alternative way of reading this claim, in which the ‘might’ might be swapped

long-term cause areas or concerns for which this isn't true – more on this in §5. But generally speaking, we can, at least, assume a generalised difference between short-term and long-term intervention on this ground, given simple observations regarding the a-symmetry of causation.

This assumption, however, might be rejected by those who believe in the *hinge of history hypothesis*, the claim that we are currently living in a period in which is particular impactful on the course of humanity's future.<sup>12</sup> Those convinced of the hypothesis might claim that there are threats to the future that only we – at this point in history – are able to control. The advent of artificial intelligence, for example, poses risks to the future which perhaps only we can reduce through our handling of the manner in which AI is first developed.

I have two responses to this. First, the jury is very much out on the hinge of history hypothesis, which has proved a controversial claim. Second, even if the hinge of history hypothesis is correct, its most plausible version does not claim that the entire future of humanity is wholly determined by us, such that they are doomed if we do not act now. It merely claims that we will have a much larger impact on humanity's future than people at other points of time. As such, the hinge of history hypothesis is still very much compatible with the dependence asymmetry: the prospects of future people are not *as* dependent on our actions as the prospects of presently existing people (even if they depend on us more than any other generation that might follow). Once we have this claim, however, the argument I sketched above follows easily.

The second problem I wish to address concerns the relative outcomes or goods which we can distribute to the short-term and long-term. In my presentation of Funding Gamble, I presumed that the short-term opportunity costs of long-term interventions are of the same nature as the long-term opportunity costs of short-term interventions – that we, for example, are comparing lives to lives, and so forth. However, one could object that if this assumption fails – if the short-term opportunity costs were comprised of relatively trivial harms compared to the long-term opportunity costs – then both *ex-ante* and *ex-post* equality would tell us to favour long term interventions. This would be regardless of the greater chances of help that future people have. My only response to this is that I think it would strain credulity to believe that if we began diverting resources into the far-future, then the only needs we would have to forgo satisfying in the short-term would be trivial ones. This, however, is an empirical claim, which I leave to others to settle.

for a 'could'. This is a question about future generation's capacity to help the far-future, as opposed to their actual likelihood of doing it. Such a reading would support an argument for prioritizing aid based on the causes possibility of getting alternative support, not its likeliness to. This would have some parallels to Liam Murphy's *compliance condition* (1993).

<sup>12</sup> For discussion see Derek Parfit (2011) and Will MacAskill (2022).



Let us turn to the third and final problem – the antecedent risk problem. This problem attacks the significance of the *ex-ante* inequality and whether Funding Gamble is an appropriate analogue. To set up the criticism, it should be noted that to a large extent the mitigation of *ex-ante* inequality created by the treatment option in Funding Gamble is a result of the fact that the preventative option seeks to reduce already antecedently low levels of risk. Now, some – perhaps many – long-term interventions may look like this. But, the objection goes, there are a great number of long-term interventions which are not like this. Rather, they seek to reduce risk which is antecedently high.

This, in fact, is a natural upshot of many longtermist assumptions. A key part of their argument for axiological longtermism is the expected duration of humanity's future. If our future is vast, then the risk of things like nuclear catastrophe, rogue AI, or asteroids impacts occurring *at some point* becomes extremely high.

The objection, then, is that in such cases, there will be significantly less inequality generated by engaging in long-term interventions, and, as such, less reason to prefer short-term interventions. We can see how this would be if we, for example, raised the independent risk each individual faces in the large prevention group to ninety nine percent (ignoring the implications this would have for the expected number of lives lost *ex-post*): the *ex-ante* claim, for example, against the long-term analogue would be one of certain death, whilst the *ex-ante* claims against the short-term analogue would be one hundred million claims of a ninety nine percent risk of death, discounted by the likelihood they will receive help from someone else – a likelihood which could be, for all I have said in this paper, very small. This is all a rather complicated way of saying that Funding Gamble obfuscates the fact that the inequality caused by the dependence asymmetry is potentially rather small.

I have two responses to this. First, yes. Depending on the likelihood of help arriving for the future people, the inequality will vary. This is exactly to be expected. The important point is that if there is any chance of the future being helped beyond our actions, there will be some inequality, *ceteris paribus*. And the more likely it is that the future can be helped even if we fail to do so, the greater the *ex-ante* inequality, and – resultantly – the stronger the reasons we have to favour short-term interventions. This at least tracks my intuitions.

My second response to this objection is that it is fundamentally mistaken regarding how one ought to model the fact that some risks have high likelihood of actualising at some point in history. Modelling the individual members with higher antecedent probability is not the appropriate way to capture the fact that many long-term risks are extremely likely to happen at some point. The reason such harms are extremely likely to occur is *not* because each individual – or even each generation – is extremely likely to suffer them.

The risks longtermists point to are supposedly likely to actualise because the future is enormous in expectation. With enough time they are seemingly bound to actualise across *some* set of individuals or generation. The presentation of Funding Gamble captures this – the likelihood *that no one* develops the illness is extremely tiny, precisely because there are so many people facing this risk.

Funding Gamble, rather than obfuscating the moral situation, actually demonstrates that the asymmetry under discussions *compounds* pre-existing *ex-ante* inequality between short-term and long-term interventions. This pre-existing *ex-ante* inequality arises because even if we can be certain *someone* will be harmed by asteroids, or AI, or the like, no *individual* member in the future faces a particularly high risk of such a risk. This is not the case for at least some individuals in the short term. To put it simply, that far-future individuals are *both* facing small *ex-ante* risks, and that these risks could be mitigated by others, should combine to create an especially strong case against forgoing helping those in the short-term.

## 5. Applications: prioritisation and climate change

At this point, one might have the following thought: it may be the case that we have a *pro tanto* reason of fairness to prioritise short-term interventions, but this reason will be vastly outweighed by the reasons in favour of prioritising long-term interventions. Indeed, some readers might not have shared my intuitions in Funding Gamble that we ought to help Fred – the loss of only four additional lives might have outweighed the improvement in *ex-ante* equality.

If you have had this thought, then I think you are probably right. Yes, whilst it has been demonstrated that morality seems to tell us to trade-off aggregate expected wellbeing, or goodness, for improvements in fairness, this only holds for moderate reductions in aggregate expected wellbeing. But, according to longtermists, long-term interventions will bring about many orders of magnitude more expected wellbeing than short-term interventions. The considerations outlined in this paper may simply be swamped out given the axiological stakes.<sup>13</sup>

Nonetheless, I think they can play an important role in helping us decide which long-term interventions to prioritise. Here is a problem that longtermists face: given the significant uncertainty we have over the impact of our actions on the very far future, whilst we might be able to speculate that an intervention will probably improve the prospects of future people, we are generally unable to give any accurate account of by how much. At best, it seems like we might just be able

<sup>13</sup> Indeed, this is an assumption of the stakes-sensitivity argument for deontic longtermism, proposed by Greaves and MacAskill (2025: 39).

to carve out a wide range of possibilities. This makes choosing between long-term interventions very difficult. There are many potential interventions one could choose to help the far future – global warming mitigation, pandemic preparedness, AI security, institution design – and each of these might offer very similar set of prospects of positively impacting the future.

Here is, what at least I take to be, a plausible principle for prioritisation: if we are choosing between two interventions which we lack adequate means of distinguishing between based on goodness, then alternative moral considerations should be used to break the tie between them. If one is willing to accept such a principle, then considerations of distributional fairness are able to play an important role in prioritisation decisions. It also might play an important role in protecting those currently in existence.

This prioritisation principle does not just seem to me to be a practically useful principle, but one with normative force. It is not clear how to make sense of the claim that *ex-ante* equality is of moral significance if, when choosing between interventions which are indistinguishable to us in all other relevant ways – such as their consequential profile – we are not required to choose the intervention which gives rise to the least *ex-ante* inequality. Moreover, how could we justify ourselves to those who would be the victims of these inequalities? Without reasons of aggregate expected wellbeing to appeal to, it seems that we lack an obvious means to justifying a choice to create these inequalities.

What types of long-term interventions do the arguments of this paper break the tie in favour of? My arguments for their being a *pro tanto* reason of fairness in favour of short-term interventions made two key assumptions. First, I implicitly assumed that there was a competition between long-term and short-term interventions; to satisfy the *most* need possible in the future, you will have to forgo satisfying some need in the short term, and *vice versa*. Second, I assumed that threats facing future people could be addressed by agents other than ourselves. As such, I concluded that, if left without our aid, future individuals would generally have higher prospects than those in need currently. It was the combination of these two assumptions which gave us our *pro tanto* reason in favour of short-term interventions. As such, amongst their potential interventions, longtermists ought to prioritise those which help those currently in existence or are addressing far-future problems that cannot be solved by anyone but us.

Practically speaking, what sort of interventions might fall under these categories? Well, interventions mitigating anthropogenic climate change very plausibly do. The first reason for this is because it is not clear that climate change policies – or at least, some available climate change policies – involve a clear competition between us and those in the future.

Anthropogenic climate change threatens those amongst us right now, alongside those in the short-term future. Climate change caused heat waves have been estimated to have cost the global economy over \$16 trillion in a two decade period spanning from the early 1990's (Callahan and Mankin, 2022), and reports from Swiss Re suggest that, at our current trajectory, the world may lose 10% of its economic value by 2050 (2021). Current climate change threatens food security, and extreme weather, alongside water stress, threaten to cause mass migration, with the World Bank warning of 216 million people being displaced within their border by 2050 (2021). In short, climate change threatens to have significant impact on the wellbeing of those living in the short-term. As such, whilst climate change interventions might be a powerful way to improve the prospects of future people, it is not clear that they are not also an efficient way to improve the wellbeing of those around us now. The short-term opportunity costs of engaging in climate change interventions, are, therefore, significantly smaller than other characteristically longtermist interventions.

Second, it is not clear that the harms of climate change can be addressed by those other than us. Whilst an ongoing topic of scientific debate, a number of experts have claimed that to avoid the worst effects of global warming, certain actions – such as achieving net-zero carbon – must be achieved by 2050. These lock-in effects suggest that certain climate-change related risks can only be dealt with by us; it is not the case that future generations can attend to them. Just as if we fail to help those around us now, they are doomed, if we fail to properly address climate change, future people are condemned to significant harm.

Taken together, it should be clear that the requirements for the argument sketched against long-term interventions do not hold in the case of climate interventions, or, at least, are significantly weakened. As such, the resultant unfairness which results from engaging in climate-change interventions should be smaller than that created by other long-term interventions. Whilst I have sketched this argument with respect to climate change, the same argument could be used to identify other long-term cause areas or interventions for prioritisation.

Beyond being a practical means of prioritisation for the longtermist, I wish to draw out the larger implications of the discussion found in this section. I began my discussion of longtermism with a certain concern hovering in the background: if longtermists are to be believed, then we might have to stop doing much of what we currently do for those around us. Some of those around us will need to be left to suffer as we redirect resources towards the far future.<sup>14</sup> However, the arguments of this paper seem to suggest that this is not the case. All else being equal, redistributing from the short-term into the long-term generates *ex-ante* inequality. If you take concerns about giving people an equal chance seriously, then this

<sup>14</sup> This concern has also been raised by Elizabeth Hupfer (2025).

implies that longtermists ought to prioritise those future-orientated interventions which do not take from those presently in existence, but instead benefit them too.

## 6. Conclusion

In debates surrounding our obligations to the future, the language of fairness has been a presumptive resource of longtermists. We are often reminded that it is unfair of us not to act to help the future, given that the threats it faces are in large part due to us. Surprisingly, then, in this paper I have suggested that such considerations can be a resource for those who wish to prioritise the near term.

I began with the observation that, unlike those who presently exist, those living in the future can – in many cases – be helped even if we fail to. Whilst I have tried to gesture at one way this dependence asymmetry complicates the trade-offs between those living now and those in the future, I hope that more attention is given to it in the future. One upshot of the asymmetry is that forsaking some present day needs to instead help those in the future gives rise to inequality in the distribution of prospects between future people and presently existing people. This inequality compounds pre-existing inequalities in the prospects of future and present-day people: it is not just that the risks that individual far future people face are small, but they can also be attended to by others.

Whilst such considerations might not be able to decisively tell us to abstain from investing in long-term interventions, it can guide us towards long-term interventions which are morally preferable to invest in. Crucially, these interventions are ones which involve those living now, instead of those which threaten to leave the present behind.

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