



UNIVERSITY OF
GOTHENBURG

PHILOSOPHY, LINGUISTICS &
THEORY OF SCIENCE
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ETHICS OF PERSON-
CENTRED CARE
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Vetenskapsrådet



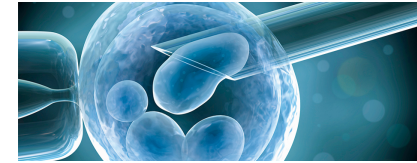
THE NETWORK ON
ETHICS OF FAMILIES

THE ETHICS OF ASSISTED REPRODUCTION THROUGH THE LENS OF PUBLIC HEALTH

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All this technology and all these techniques ...

- Regular arsenal of obstetric, pregnancy and neonatal care
- IVF
- Insemination
- Donor gametes and embryos
- Prenatal testing, screening
- PGD (and its variants)
- Surrogacy
- Reproductiv tissue banking
- Uterus transplantation
- Preconception genetic screening and partner matching
- Better selection of gametes and embryos for transfer (Time-lapse, etc)
- Genetic modification (starting with mitochondria) (?)
- Synthetic gametes (?)
- Ectogenesis (?)



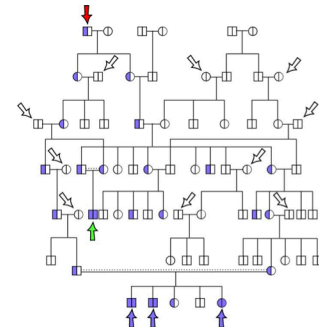
AND SO ON ...

What's it all good for?

- **Traditional idea 1:** promote and enhance the **reproductive liberty and autonomy of individuals** (here ART comes together with, e.g. Contraceptives, abortion, sexual education + countless political arrangements).
- **Traditional idea 2:** Secure the economic and political procreative need of societies: the supply of workers and consumers, and the continued organisation of family
- Both used to argue in favour of ART, but having their sources in vastly different considerations: reproduction as an individual activity, and population procreation as a social activity.
- Adding these together as an object of ethical reflection gives us **Reproductive Public Health Ethics**.
- Both aspects are embedded in and coming out of a peculiar "reproductive culture"
 - Important to have one's "biologically own" children (whatever that means)
 - The nuclear family presumed
 - Reproduction is about self-determination
 - Society cares for the good of (nuclear) families
 - Society regulates and directs social reproductive patterns
 - Society needs to procreate itself through the reproduction of its citizens

This culture is in flux (partly due to technology)

- New (retro-new?) family contellations
 - The "plastic" family
 - The electively child-less family
 - The polyamorous family
 - The single family
 - Rainbow families
 - So, what *is* a family? The answer determines who will be allowed to use ART!



The plastic nature of normality

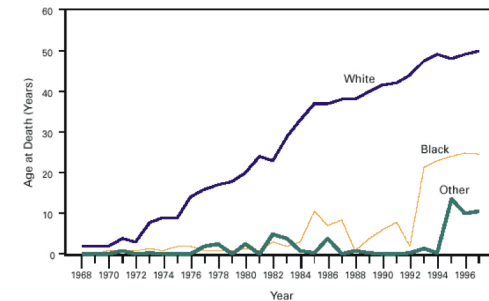
- What is normal is not given by nature,
- Neither what is pathological
- We choose where the boundaries are between the desirable and undesirable, the acceptable and unacceptable, and these choices determine what we view as healthy or unhealthy, determining our priorities, in turn determining what we view as desirable/undesirable, and so on.



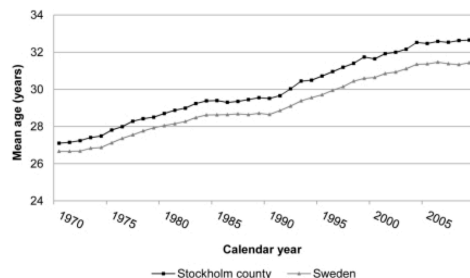
1970's

- Often left to die in delivery clinics
- No treatment for heart- and other common defects
- Harder hit by socio-economic ill-health determinants

FIGURE 1. Median age at death of persons with Down Syndrome, by race — United States, 1968–1997



- What we view as a "fertility problem" and to what extent this problem is "medical" or "social" is likewise a matter of choosing where to draw the boundaries, not recording patterns of nature.



- The conditions surrounding such choices are construed by larger socio-economic patterns that change our reproductive culture: **When is it "normal" to have one's first child?**

Where do we find individual liberty and autonomy?

- Societal regulations (of family, parenthood, ART, etc.) rest on an unclearly motivated sample from a slightly dated reproductive culture
- Business actors with agendas of their own try having us believe that we need their products – growing globalised *geschäft* of ART (and related medtech, e.g. stem cells)
- Structural factors directing our reproductive choices and creating needs of technical solutions, reinforced by business (e.g. offers of gamete/embryo banking)
- Uncritically adopted assumptions about what we have to do *to do* and be happy
 - Pregnancy and birth quite dangerous also under safe conditions,
 - Parenthood does not make us happy, quite the opposite
 - Genetic or "biological" linkage seems to have no bearing on how well we do as parents
 - Reproductive culture much more plastic and flexible than we imagine
- Technology fools us: we tend to feel more secure and in control than what facts support
- The more we allow society to develop in a way that increases our need of ART, the more we make ourselves dependent on these techniques and those who control them

The Public Health Ethical Perspective

- The goals and values of health policy are **social rather than individual**: population health and the basic economic factors of society, e.g. population growth, consumption, etc.
- The boundaries of reproductive liberty and autonomy, as well as what reproductive culture is to be promoted (e.g. what families are publicly sanctioned) are drawn on the basis of these considerations
- New ethical landscape for ART: it may be good when needed, but what makes it needed may not be so good,
 - increased parental age,
 - offers of tissue banking to facilitate that,
 - programs to have men routinely freeze sperm in their teens,
 - environmental pollution affecting fertility, resulting from the same economic growth facilitating ART
- **Or maybe more reproduction is not the way to a good, healthy and wealthy society anymore?**

Where is the procreative need of society in light of ongoing and coming global transformations?



Maybe we need to free some space for other people rather than make more of us?