

CONFERENCE REPORT

REPORT ON THE PHILOSOPHICAL ETHICS IN REPRODUCTIVE MEDICINE 2nd International Conference, University of Leeds, 14–19 April, 1991

Planned as one of a series of three yearly conferences, PERM 2 was intended to stimulate and give space to a multidisciplinary exchange of views on the ethical issues arising in reproductive medicine. Given that the concerns raised by human embryology seem remote or irrelevant to many people, the remit this year was extended to cover both high-tech interventions and the everyday issues of reproductive health care, particularly in the developing world. A heavy program comprised 5 days of set-piece papers interspersed by a wide variety of free communications. As all were given in the same lecture theatre, discussion was limited to a fairly formal set-up, but that had the advantage of ensuring the more radical contributions were not side-lined. Approximately 120 people registered with an extensive range of background interests: philosophers and gynaecologists (obviously); delegates from Canadian, Norwegian, and Australian commissions on reproductive technology; health economists; family planners; representatives of development agencies; a few lawyers; and several theologians.

Overall, participation was fairly well balanced between women and men, but sadly the set program speakers, the inclusion of some of whom seemed to reflect reputation rather than relevance, were markedly biased towards male input. Unfortunately, none of those chairing the program made any attempt to challenge the persistent use of the low-level sexist language in which male concerns were often expressed. It is ironic that there should be such scant regard for respect for the individual, a concept supposedly central to contemporary medical ethics. As it was,

women were referred to as girls, or at best as ladies, man reproduced himself, and it was man's needs that were addressed. Probably none of this was intended to be provocative, as the assumption of gender neutrality, for example, was not questioned even in the context of reproduction. Nonetheless, the greatest display of obstinacy and aggression during the week came when Patricia Baird, Chair of the Canadian Royal Commission, voiced her disquiet. One wondered if other unexpressed hostilities lay below the surface. For all that, as far as male health professionals go, these were the undoubted "good guys," the ones who could already see or were willing to consider the relevance of and the need for an ethical analysis of practice. The scientific blinkers were for the most part off, but given the phallogocentric bias of mainstream Western philosophy, it was perhaps too much to expect that issues of gender might be directly addressed.

So did the conference satisfy its own remit? There seemed to me to be a commendable lack of clinical positivism – indeed few sessions encouraged such an approach – but what struck me was that the "certainties" of science had simply been replaced by an equally inflexible adherence to a particular philosophical system. With very few exceptions, participants to the debate adopted a utilitarian approach to justify their own assertions and critique those of others. The alliance between a utilitarian model of morality and a cost-benefit analysis of practice in reproductive medicine clearly reflects the managerial, entrepreneurial direction being pursued in the provision of health care throughout the Western sphere of influence. As one gynaecologist confidently put it: "We are all into social marketing now." What is disturbing is not simply that that particular political controversy should be

taken as settled, but that the utilitarian model of provision has some very dubious implications indeed. It is not that we should wish medical practice to be conducted without regard for consequences – clearly much of the anxiety around high-tech interventions is generated by the perceived insufficiency of such a regard – but that what is seen as morally justifiable can override individual rights and needs, encourage a thoroughgoing paternalism, and disregard the notion of diversity that is an important marker in feminist philosophy at least. In an unconstrained form, utilitarianism can be a crude tool, concentrating as it does on a supposedly objective calculation of the ensuing harms and benefits of each action to the exclusion of considerations of motive, intent, self-determination, and so on. Few philosophers would see it, on its own, as a satisfactory basis for a theory of medical ethics, so what is worrying is the disregard of the majority of speakers at PERM 2 for either any alternative framework or a more pluralistic approach.

The result was that although a wide range of controversial issues in reproductive medicine was explored, from fertility planning in the developing world to the mapping of the human genome, there was a tendency to foreclose on the attendant moral dilemmas. Gynaecologist David Bronham, one of the organisers, impressed listeners by his willingness to pinpoint some hitherto unregarded ethical troublespots around fetal “rights,” IVF provision, and embryo freezing, but the real test is whether those theoretical insights result in more cautious practice. In general, discussion centred on what can be done rather than on whether particular actions can be ethically justified. The emphasis on utilitarian criteria too often allowed debate to focus on what is economically viable and expedient, with little apparent recognition that the users of reproductive services are moral agents in their own right with their own self-chosen ends. The problem was particularly evident around the several papers and

discussion on the provision of services in the developing world.

The presentation given on behalf of the by now notorious Maurice King of Leeds University on “Expanding Populations and Ecosystems” highlighted many of the issues that are morally disturbing. The central thesis developed here, and implicitly accepted as “the problem,” is that where a high mortality rate is outstripped by an even higher birth rate, that is, in countries caught in the so-called demographic trap, the major focus of aid should be on fertility control. Aside from the neo-Malthusian determinism of King’s theoretical analysis, his conclusion that aid programs should withdraw entirely from certain life-saving selective interventions such as UNICEF’s GOBI initiative—a child saved by oral rehydration to die later of malnutrition does not represent a utilitarian good – is deeply controversial. Coming after extensive sessions on embryo therapy, abortion as a choice, and the rights of the pre-embryo and fetus, it was painfully clear that the ethics of reproductive medicine have yet to break out of their ethnocentricity. King and his colleagues would prefer, it appears, to privilege the moral autonomy of the affected community; but given that the situation of population pressure arises, in their view, in the context of oppression and despotism, then the ideal is abandoned as inappropriate with no consideration given to how it might function in practice. The dividing lines between third party intervention for the good, control, and manipulation are thin indeed. A paper given by Pramila Senanayake of the International Planned Parenthood Federation (IPPF) in the same session on “Maternal Mortality in the Developing World” was at least concerned with raising the status of women, but it was unclear whether the proposed fertility control would be self-regulated or imposed. In general discussion, a questioner asked whether we should be prepared to manipulate Western society in

ways consistent with King's proposal. Now clearly the degree of external control exercised over individual fertility is already highly manipulative although nowhere near as overt as the mass program approach to the developing world. No one, of course, would openly voice the eugenic subtext to the debate, but it felt uncomfortably close.

The desire to express morality as a matter of measurement was evident throughout the week, explicitly in presentations like that of health economist John Hutton: "Is it Ethical to be Efficient," which dealt with quality assessed life years (QALYs), and less stridently in philosopher Torbjorn Tannsjo's short paper: "Who are the Beneficiaries?" Both men, and here we were clearly back in the West, felt that high-tech infertility treatments might well get financial and moral backing as effective means of maximising human benefits. In utilitarian terms, the creation of a new person with a life expectancy of 70 to 80 years outweighs even a highly cost-effective improvement in the health of an adult. This prioritising of potential as opposed to existing people, indeed the whole exercise of weighing up disparate demands in a situation of scarce resources, characterises an approach that deals in norms and averages rather than acknowledging the diversity of human needs and desires. The attempt by gynaecologist James Thornton and others to construct an ethometric model that could both formally calculate the efficacy of outcomes *and* respond to individual interests around issues such as surrogacy merely emphasised the disinclination of the conference to move outside a positivist rationalist model of ethics. In adopting what he called a decision analysis approach to prenatal exclusion testing, for example, Thornton set himself the impossible task of trying to incorporate the patient's values while at the same time excluding "biased subjective probabilities." Evidently he felt he had succeeded. There was no hint of irony in the offer: "If anyone wants I could show

you the maths of this." And yes, Dr. Thornton is one of the good guys.

Perhaps the conference organisers, being aware of the radical and innovative nature of some of the scientific techniques at issue, felt the need to ground discussion in some more familiar areas. A complete session was therefore devoted to "Sex and Society," which predictably provided a platform for the expression of strictly conservative views. In an extraordinarily retrogressive paper, "The Nature of Love," Malcolm Potts of Family Health International offered a heavily biologicistic commentary on why males are aggressive and females "shy and coy." Apparently, the necessity of entering the "mating pool" and passing on one's genes makes talk of social construction quite irrelevant. By way of evidence, Potts produced a vaguely offensive array of slides, of the type that might be thought to appeal to certain male student medics, and a few references to primate studies. Further, we learned that family life (on the Western model, I assume) is the natural form of human relationship; that "manifestly children require a father's nurture"; that "good" family planning is enforced family planning; and much more.

With a substantial number of delegates still in a state of shock, the session moved on to a paper given by Peter Byrne, Director of Medical Law and Ethics at Kings College, London on "The Ethics of Sexual Restraint." While his insistence that love should be about mutual realisation was a welcome change from the sexual Darwinism of the previous speaker, it quickly transpired that all sexual activity should express love, and all such love should be located within the heterosexual, monogamous nuclear family. As the unspoken implications for reproductive technologies were readily apparent, and as I was myself due to give a short paper on autonomous motherhood (Shildrick, 1991), it seemed a good moment to offer from the floor a little deconstruction of the Potts/Byrne norm of family life. To general surprise, the façade to male reason visibly cracked as Byrne

responded with a momentary flash of animosity centred on my identity as a lesbian. Whatever else the session produced, it had at least the positive effect of rousing the hitherto dormant feminist voice.

So why wasn't that voice heard throughout? Clearly the conference had been planned with little regard for divergent views in that the main program of invited speakers contained only two presentations that might seem to recognise the feminist perspective. Bonnie Steinbock of Albany University spoke on "Maternal-Fetal Conflict"; and Jennifer Jackson, herself a conference organiser, gave a paper misleadingly entitled "Prolifers and Feminists – The Shrill Voice of Dissent," which probably evoked harmful stereotypes without doing anything to valorise our agenda. Of the remaining women on the main program, Janet Radcliffe-Richards remained distanced from feminist concerns, and Dame Mary Warnock's written contribution assured us that we must look to the law, that bastion of neutrality and fairness, for protection against the potential excesses of reproductive and genetic technology. Her dismissal of anxiety about the human genome project, for example, seemed both to miss the point about its moral acceptability *per se* and to fail to challenge the astronomical cost of the research. The question of why certain developments are being pursued was both here and elsewhere subsumed under the issue of how "effective" control might be exercised. The issue of who might have that control remained largely unproblematised.

What was disappointing was not so much that the invited speakers should generally fail to represent a clear feminist framework, but that the program of free communications should be no better. Aside from my own overtly feminist

presentation, which offered a poststructuralist ethical critique of both the access conditions to reproductive technologies *and* of the yet prevailing notion of maternal instinct, there was nothing to suggest that malestream philosophy could not provide all the answers. Yet, for all its isolation in the program, the paper was met with a clearly positive response not just from other dissatisfied feminists but from a wide range of delegates. Though interventions from the floor clearly play an important part in any exchange, all too often periods marked for open discussion were heavily restricted, and it seems essential that we should get our views incorporated into the formal schedule. It was suggested that PERM 3 might set aside a session for specifically feminist papers, but I hope the organisers will resist the temptation to officially marginalise our voices while seeming to heed them. The fundamental idea of the PERM series is a good one and could provide an important forum. We must establish that feminism is not just another subject area to be tacked at will but something that properly should be integral to the agenda.

The current main proceedings are to be published, and planning for 1994 will shortly be underway.

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REFERENCE

- Shildrick, Margrit. (1991). *Lifestyles and limits: Reproducing the difference*. Unpublished conference paper.