

# BIOETHICS MATTERS ENJEUX BIOÉTHIQUES

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## Why not In Vitro Fertilization? Part 2

*Moira McQueen, LLB, MDiv, PhD*

In my previous paper on *in vitro fertilization (IVF)* I wrote about the Catholic Church's reasons for saying it is not morally permissible. Those reasons looked at the intrinsic rightness of the inseparability of unity and procreativity, and this current paper will review some of the consequences of IVF. If something is defined as objectively "intrinsically wrong," as IVF is, then we can be sure that there will be some harms that result from that behaviour to individuals and to society.

Let me repeat a key paragraph from my earlier article, which remains key to the development of this article:

*Donum Vitae* says in Part II A 1 that:

Every human being is always to be accepted as a gift and blessing of God. However, from the moral point of view a truly responsible procreation vis-à-vis the unborn child must be the fruit of marriage.

... the procreation of a new person, whereby the man and the woman collaborate with the power of the Creator, must be the fruit and the sign of the mutual self-giving of the spouses, of their love and of their fidelity. The fidelity of the spouses in the unity of marriage involves reciprocal respect of their right to become a father and a mother only through each other. (Section 34)

This means that the church believes that a child should be conceived through the loving sexual act of its own mother and father. Only this setting is considered worthy of human conception and birth. Only this conjugal act fulfills "the laws inscribed in the very being of man and woman." (Section 38)

Why is the Church insistent that *only* this setting is the best environment in which we should all be conceived and brought to birth? In partial reply, we can look at just two situations that show some adverse results from moving away from this principle, and can make our own judgments about them:

1. not being able to know or contact one's biological parents;
2. using women as surrogate mothers.

### 1. THE IMPORTANCE OF PARENTS

One of the most important things for a human being is to feel as if he or she "belongs." Connectedness and relationships are part of our social make-up. Security is an important part of our development, and a strong sense of that is essential for our psychological well-being.

It is true that this does not depend only on biological parents. Most adopted children feel loved and secure because of the care and devotion to them as individuals given by their adopting parents, and the altruism here is of the highest order. Nonetheless, adopted children sometimes reach the point where they are curious about their biological parents. Some jurisdictions have open registers to allow information about their

whereabouts and the possibility of making contact. Others do not. Increasingly there is a move towards openness, and the reasons for that are many.

### **Natural curiosity**

There is natural curiosity. Who is my mother/father? What are my roots? Do I have siblings? Why was I given up for adoption? Where does my mother live? How has life treated her? There is a practical side. I may want to find out about my natural mother's and father's family of origin—their health prospects, their ethnic characteristics and strengths. These are important for personal health information, especially as genetic profiling develops. I may also want to have certain information which would be helpful in choosing a career, or in decision-making about having and raising children. These are all important points, and some would claim that we have a right to such information.

In the case of children born through IVF using donated gametes, the answers to such questions can be even trickier to find. Some jurisdictions allow donors to remain anonymous, thus precluding the acquiring of familial and genetic information. If I am the result of donated sperm, I may never know who my biological father is/was. If I am the product of donated sperm and egg and born of a surrogate, I may not even know my biological mother. It is not hard to think that these states of affairs could be emotionally harmful to the children born of these arrangements. It will not always be the case. Some people are more resilient than others, others are less curious, and perhaps do not want to disturb the family relationships in which they find themselves. For those who do embark on a quest to find their biological origins, some examples will show a few of the difficulties that arise.

### **Gamete donation or sale**

Different jurisdictions have different rules about gamete donation. In Canada, gametes

must be donated. The Assisted Human Reproduction Act, 2004, expressly forbids the sale of gametes. Commodification of parts of the body or life forms is not allowed in Canada, out of a certain level of respect for human dignity. The same reasoning applies in the UK. Selling of gametes is legal in the US and other countries, and advertisements for such sales can be found in magazines and on the web.

In Canada, reproductive technologies are reliant on the good will of donors. Women who have had several ova retrieved surgically for their own IVF process may donate their surplus eggs for use by another, or for research. Sperm may be donated by any man willing to do so.

Women who have had their eggs surgically retrieved are those who are infertile in the first place, and they are understandably reluctant to donate their eggs which, given the high failure rate of IVF, they may need to use themselves in the future. The supply of gametes obtained through donation has not always met the demand, leading the UK, for example, to allow cloning for “therapeutic purposes.” This means that the resulting embryos are specifically made to be used for experimentation (whereupon the embryos die), but they are not allowed to be used for reproductive purposes, i.e., they are not to be implanted and brought to term. The limited supply of eggs has also led the Human Fertilisation Embryology Authority (HFEA) in the UK to grant licences to some facilities to create hybrid embryos from human sperm and cow eggs for experimentation.

### **Identity questions and donor anonymity**

A social/legal question that has developed concerns the personal identity of those who are born from IVF. If the gamete donors are the biological parents, then the answer is clear. If either the egg or sperm was donated or acquired, or if both gametes were

donated/bought and used in a surrogate mother, then the resulting child may not be sure of his/her genetic and personal inheritance.

Some countries keep records of gamete donors, and some have rules about access to information. In the US it varies from state to state, and some donors/sellers say they would not donate if their identity is revealed on the public record. This presents an interesting moral and legal discussion about the balancing of rights—the right of the donor to remain private versus the right of the person born of IVF to discover his/her genetic and personal identity, or factors thereof, such as ethnicity.

Again, one can see that, for example, a man who donates or sells sperm which is then used for countless fertilizations may not be thrilled to be tracked down by multiple children, all claiming him (rightly) as their biological father. He may not want to be involved at all in knowing about them, their lives, their problems, their requests, whether emotional, financial or otherwise.

The effects of realizing this can be devastating for many; knowledge of one's father is usually an important matter. To feel oneself to be merely a product of sold sperm is not likely to engender feelings of security, especially if it is clear that the sperm donor/father chooses to remain anonymous, with no interest in the children his sperm has helped to produce.

This can also be the case when one is a product of another person's egg as well as sperm. The resulting embryo created by IVF is implanted in a surrogate mother, who then brings the baby to term, but is not its biological parent. This sometimes occurs when the would-be parents are homosexual, where natural procreation is clearly impossible. Some use donated gametes and pay a woman to bring "their" child to term. I

use "their" with no intention to demean such a couple, but to underline the fact that the child is not "theirs" biologically, although one of the couple might have donated sperm towards making the embryo. Even then it is still not the *couple's* child in the genetic/biological sense, and the same applies to the child of two lesbians, or to a heterosexual couple who use others' gametes and the services of a surrogate mother. These couples may claim and love the child as their own, but the reality is still more akin to adoption than to natural parenthood, no matter what terminology is used to describe the process.

### **Inherent dignity of all children**

As mentioned in the previous article, a very important point is that this does not affect the dignity of the child who is born in any of these arrangements. The Church affirms that dignity, at the same time reminding us that the *way* in which such children are brought into the world does not attain the full moral dignity of human procreation.

When these children grow up, closed records, lack of information, unanswered genetic questions, and so on, do not serve their dignity well. These issues deserve humane resolution, and underscore the type of problem that can occur when society embarks on technological means of resolving human needs that breach the natural law of full respect given to the inseparable elements of procreativity and unity.

## **2. WOMEN AS SURROGATES**

The second point which sometimes appears in the news is the use of women for surrogacy purposes. Again, Catholic teaching is clear that children deserve to be born of their own mothers and fathers. Surrogacy means that an embryo or embryos is/are implanted in the womb of a woman who is paid to bring the child to term.

In Canada, the Assisted Human Reproduction Act, 2004, forbids commercial surrogate contracts, but allows private arrangements. Surrogacy means that women are paid, usually for nine months, to undergo a lengthy and sometimes difficult path to bear a child for someone else.

A normal pregnancy means that one continues to work or function in one's usual pattern for most of the pregnancy, with medical and social support as required. Pregnancy is not an illness, and most women experience little or no risk. As the baby develops, of course, pregnancy can be uncomfortable, and sometimes distressing, for example, if one is prone to ongoing morning or daily sickness. For women who become surrogates, the pressure is on them to stay healthy, to do nothing that would put the baby at risk. It is fair to say that their health is a priority, but more for the sake of the baby they carry. Poor women from countries where these procedures are less regulated are frequently used as surrogates, the relatively large sums of money offered being a strong inducement. Many of these mothers are gathered in a house or clinic where their health can be monitored (again more for the sake of the babies), and they may see their own families only occasionally.

### **Ethical questions**

Some ethical questions arise around the very idea of surrogacy. Should another woman's body ever be used in this way to satisfy someone else's desires? Does this way of proceeding commodify the woman employed, whose body is now contracted out to the people who will pay her? Does it exploit women from poor backgrounds who see this process as a way of earning some much-needed money for their families?

For socioeconomic reasons these women are less likely to be as healthy overall as those paying for their services, and the health risks they incur are at least disproportionate. Not

only are they putting their own health at risk, but they may also be putting their chances of obtaining other employment at risk because of the time commitment. Their own families' needs become secondary, partly because of the residency requirements. If a woman miscarries or delivers a child with some sort of handicap, some agreements incur severe penalties. Legally, the contract may be ended, or less money may be paid, while at the same time the woman's own health may be endangered, and her chances of future pregnancies (i.e., her own) diminished.

### **Moral status of IVF**

These socially unjust contracts convince many people that not every result of IVF, specifically the selling of gametes or paying for surrogate mothers, is good. Some results are clearly harmful, albeit legal in many jurisdictions. Such situations help to demonstrate why the Church's teaching has a sound basis. When we start to separate unity from procreativity there are always consequences, some quite unforeseeable. Some of these consequences are harmful to individuals and perpetuate injustices in some societies.

We have considered only two situations here, but we can see that it would be naïve to think that IVF is morally neutral or completely acceptable, with no bad or wrong consequences. Some think that the Church is being overly strict in saying it is not morally permissible, but the Church's reasons have to be evaluated in a broad way, looking at the overall consequences to individuals and society. Only after an evaluation that is as objective as possible can we make a good conscience decision about these matters. ■

*Moira McQueen, LLB, MDiv, PhD, is the Executive Director of the Canadian Catholic Bioethics Institute. She also teaches moral theology in the Faculty of Theology, University of St. Michael's College, and has written and co-authored several articles in bioethics, fundamental ethics and other areas.*