Autonomy of women and new reproductive technologies. An overview of the discussion in Germany

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Introduction
The term self-determination is very closely connected to another one - the term self-responsibility. That is why we should discuss these terms and the resulting recommendations for action together.

The comprehension of the two terms has not only developed in connection with the new possibilities offered by genetic and reproductive technology. There is also a diametral understanding of the terms by different authors and groups. I will not go into detail or examine the subtle differences in the arguments. It is possible to speak about two mainstreams, which I would like to characterize first. One of them ("pro gene-tech") understands responsibility and self-determination as using the new techniques to "get a healthy child". The representatives of the other direction refuse the use of these new techniques with two arguments. The first argument is the responsibility to future generations, and the second argument is human dignity. Both mainstreams can be found in the women's movement and groups of disabled people.

For example I take an official document of the German Mukoviszidose society concerning pre-implantation diagnosis (PID). We find both positions in the same document. I will translate this position as typical of other ones too: In the document it is said, that this organisation has strong arguments against the use of the pre-implantation diagnosis... But the organisation will not abandon parents who use these

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new techniques (They can also stay members of this organisation). And the organisation as a whole rejects the argument that mukoviszidose is an example of diseases against which pre-implantation diagnosis should be used.

In a lot of papers and statements there are other examples of the same situation. This shows us that there will not be "simple solutions". They will not exist especially because the new techniques have not stop at governmental borders. That was why our president of the physicians' chamber, Prof. Dr. Jörg-Dietrich Hoppe, said the following: Politicians should not close their eyes to the fact that those parents affected will not do without children, and they will not just adopt them; they will go to other European countries in order to avail themselves the new techniques"\(^2\).

As an ethicist I see my part in this social debate
- in analyzing the terms,
- in making clear the suppositions of controversial debates, which are often not spoken about and so minimizing misunderstandings
- facilitating understanding or making the points of further debate clearer.

1. About the furtive change in meaning of the word "responsibility"

The more safe methods of contraception were available for everybody, the more the idea of responsible planning of parenthood developed. At first (in former times) responsibility meant a quantitative point: "Just getting only as many children as the parents could feed and educate. Now, together with the new techniques and especially with prenatal diagnosis the term responsibility has developed\(^3\). It is understood now as a qualitative choice. Only the people who act according to eugenic criteria are still regarded as responsible. Maybe the future "responsible parents" should check if their own genes are good enough for the social mainstream or if it would be more responsible for them to use the "better" genes of a Nobel prizewinner or an egg of a younger, smarter, healthier egg-donor.\(^4\)

Even today we found the following tendency in the public opinion: the easier it becomes technically to diagnose genetic diseases in the fetus, the more the parents/the mothers are blamed if they give birth to a handicapped child. This new view of responsibility includes the following points: responsibility to society (it has to pay for necessary treatments and aid; responsibility to husband and his life-planning; responsibility to other children and for their needs; responsibility to grandparents who hope for a healthy, smart

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\(^4\)see: Wichterich Ch., Mensch nach Maß. Bevölkerungspolitik in Nord und Süd. Lamuv Verlag: Göttingen, 1994, p. 57
child which they can show their neighbors and last but not least responsibility to the unborn child. Is it responsible to give her or him a life with these handicaps, a life between charity, refusal and dependency. In the words of the market this means "Produkthaftung der Frau" - the woman's product liability (and of course the woman should not only "produce" the perfect baby, she should "produce" it also at the perfect time).

Here we can see how closely our ideas about handicaps and misfortune are bound up with the respective social context. There is a very good example which illustrates this from Italy in 1993 (which might have happened in the same way in Germany too - I don't know about Australia): A 37 year old, healthy black Italian woman who is married to a white Italian husband, took a donor egg from another Italian white woman. The egg was fertilized with the sperm of her own husband. She gave birth to a white child. And she declared, that she did this so as not to expose her child to race discrimination.

As we can see in this case, the influence on women or the dependence of the women on society is reinforced by the fact that these new methods always require the active participation of experts (in other words: the active participation of third parties). The decision on birth regulation is no longer, according to Susan Sherwin, the private business of the parents or of the woman. That is why we can not speak about more freedom for women through these techniques - on the contrary: they mean less freedom for women.

Moreover, as the criticism of a lot of feminists says, these techniques are used to stabilize the mother-function of women and internalize these social roles. Not-being-a-mother is seen as a disease or as a social handicap, which should not exist any more - thanks to the new techniques. They also criticize (and I share this view) that the planning and technocratic control of female bodies is seen as the liberation of women. By using such models of thinking it is possible to see the aim of prenatal diagnosis not as eugenics but as rational life planning. What is seen as rational also depends here on the place where the women live - in the so called 1st or 3rd world. I have no space to go into this more deeply but I would like to name the fact. The German authors Christa Wichterich and others have written a book on the two different ways of assessing birth-policies in North and South. And they describe that all possible techniques are used in the first world (the highly developed countries) to give birth to (healthy) children. In

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5 see Beck-Gernsheim, p. 328
6 Wichterich Ch. p. 55
8 see internet-homepage "Gender-Killer": Sabeth Buchmann Formkontrollen
9 ibid
10 see Mürner Ch. et al Schöne heile Welt. Biomedizin und Normierung des Menschen. Hamburg/Berlin 2000, p. 121
the 3rd world new methods are used to reduce the number of children by abortion and sterilization. And both times these strategies are steered by the same pharmaceutical industries\textsuperscript{11}. The German politician Jutta Ditfurth called these tendencies "a gate to genetic racism"\textsuperscript{12}. The supporters of such interpretations are criticized for reducing individual self-determination to the full utilization of technical possibilities. And they are also criticized for the position that it is not possible to choose “das Recht auf Nicht-Wissen” (the right not to know) or to refuse this technology.

\textit{2. Self-determination - thoughts on the term and its consequences}

It is not possible to find this term in most medico-ethical encyclopedias. We can only find the terms autonomy or physician-patient-relationship. Nevertheless, in Germany the term self-determination is seen as the "uniting paradigm of modern medical ethics"\textsuperscript{13}. The term developed together with the movement for more patients' rights. I have no time to speak about this now.

If you start a lesson on the term self-determination in Germany usually you have to go back to the German philosopher Immanuel Kant. He saw self-determination as the force of a subject through imagining something in the future as the effect.

I will not take you through the centuries, but I will take a big step in history to the 70s in last century. At this time in Germany there were two big movements which developed the term self-determination for their own demands. The first of them was the crippled people’s movement – a name they chose themselves. They interpreted self-determination mainly as autonomy and fought for an autonomous life outside the typical institutions and hospitals. The peak of this movement was in 1994 when a new antidiscrimination law was included in the German constitution\textsuperscript{14}.

The second movement was the women's one. With the sentence "Mein Bauch gehört mir" ("My belly is mine") they fought against the old abortion law and for a self-determined life planning\textsuperscript{15}. Since this time in the 70s self-determination has been one of the main positions in the German women's movement. In the 80s prenatal diagnoses developed as a new detail in the discussions. Now we can see the two different ways in which responsibility is understood. There developed different positions in the women's movement. Some of the authors understand this as the division of the women's movement.

\textsuperscript{11}Wicherich Ch. p. 17

\textsuperscript{12}Ditfurth J. Feuer in die Herzen. Plädoyer für eine ökologische linke Opposition. Carlson Verlag GmbH: Hamburg, 1992, p. 25

\textsuperscript{13}see Schöne-Seifert B. Präimplantationsdiagnostik und Entscheidungsautonomie. Neuer Kontext - altes Problem. in: Ethik in der Medizin 1999, Bd. 11, Suppl. 1, p. 87

\textsuperscript{14}see Waldschmidt A. Selbstbestimmung als Konstruktion. Alltagstheorien behinderter Frauen und Männer.Leske + Budrich: Opladen, 1999, p. 18

\textsuperscript{15}see: Seitz R. Mein Bauch gehört mir? Schwangerschaftsabbruch als Möglichkeit weiblicher Autonomie. Centaurus-Verlagsgesellschaft: Pfaffenweiler, 1993
But both movements are acting in the social context of Germany. The first Kantian question "What can I know?" is answered typically for the society of the person who answered it. "What can I know?" in a society which has not enough money for teachers; “what can I know?” in a society where a lot of lessons cannot be held in the schools because there are no teachers; “what can I know?” in a society where we still have illiterate people? On the other hand we have the internet, globalisation in the book market and globalisation in TV. Especially when we speak about "Brave new world" we should not forget TV with its advertising. More and more people get their ideas about "what is a brave new world" from TV and advertising, where they can see normally young, good looking, healthy people.
So it is time to have a look at the connection between genetic engineering and money (in the history of ethics I am now in the time of John Locke and his idea that rights are always connected with life, freedom and property).

3. Morals - market - manipulation

In modern capitalist societies the stock rates, the revenues etc. are always connected with advertising, manipulation and self-deception. First some figures about this:

E. Göpel has found for the advertising of alcohol and tobacco in Germany, that 30 times more money is spent on this advertising than on the popularisation of a healthy life style\textsuperscript{16}. That means that the creativity of artists, designers and experts in advertising are bought for the popularisation of life styles which are social and economic nonsense. The question, by whom and why, is self-answering. Unfortunately I could not find equal figures for the budget of biotechnical advertising. But I think that the following figures show the same effect:

"In 1987 American couples spent an estimated $ 1 billion on infertility treatment... The estimated potential clientèle for IVF is one million persons and the estimated income will be $ 2 billion by 1990\textsuperscript{17}. That means it doubled in only 3 years! For the worldwide trade in biotechnical products an increase from 30 billion Euros by 1999 to 200 billion Euros by 2010 is estimated\textsuperscript{18}. I think that I should not explore what the advertising strategies look like with such high revenues. As a medical ethicist who was trained by Marxist ideas I spontaneously thought of the following words - commonly it is said that they were written by Karl Marx. But to be exact they are found in a footnote in the famous 1st book of "Capital" where Marx is citing T.J. Dunning: "Capital eschews no profit, or very small profit, just as Nature was formerly said to abhor a vacuum. With adequate profit, capital is very bold. A certain 10 per cent. will ensure its employment anywhere; 20 per cent. certain will produce eagerness; 50 per cent. positive audacity; 100 per cent. will


\textsuperscript{17}see Hofmann H. Die feministischen Diskurse über Reproduktionstechnologie. Positionen und Kontroversen in der BRD und in den USA. Campus Verlag: Frankfurt a.M. New York, 1999, p. 52

\textsuperscript{18}Pfeifer E. Biotechnologie gilt als der einzige Lichtblick. Segment wächst in einem schrumpfenden "Wachstumsmarkt" Mitteldeutsche Zeitung vom 24.12.2000, p. 27
make it ready to trample on all human laws; 300 per cent. and there is not a crime at which it will scruple
nor a risk it will not run, even to the chance of its owner being hanged.\textsuperscript{19}

The feminist writer Rosalind Pollack Petchesky writes in connection with another paper by Marx - the
"German ideology": "In analogy to Marx it would be possible to say that women make their own choices
about reproduction. But they do not make these choices in their own interests. They have to make them
under conditions which are not made by themselves, and they are dependent on social forces which they
can not change. That people are dependent on social pressures does not mean that their self-
determination and moral judgement are suspended. It only means that we have to concentrate less on
the question of decision-making itself and more on the transformation of social conditions for decision-
making, work and reproduction.\textsuperscript{20}

This is the 2nd Kantian question "What should I do?" or the question of responsibility. I gave the analysis
of this term at the beginning. Now I would like to speak about the responsibility for further generations.

\textbf{4. Yesterday "Brave new world", today "The cloned paradise", tomorrow "The red-
haired, blue-eyed, mentally stable, healthy and creative human being"?}

Aldous Huxley wrote in the preface of the 1946 reprint of his novel from 1932 "Brave new world": "All
things considered, it looks as though Utopia were far closer to us than anyone, only fifteen years ago,
could have imagined. Then, I projected it six hundred years into the future. To-day it seems quite possible
that the horror may be upon us within a single century".

He was right with his prediction on the new technical possibilities. His opinion, that they will be horrible, is
not commonly accepted today. Lots of people have great hopes in these new techniques and in the profit
for the biotechnical industries.

The American writer Lee M. Silver wrote a book titled "The cloned paradise. Artificial insemination and
life-design in the new millennium". There he developed different scenarios for the next thousand years. In
all his ideas he takes as the starting point today's American society with its social structures, values and
ideas (to be exact: he takes the values and ideals of the white middle and upper class). That means that
he focuses on personal freedom and individual rights. Starting from this he develops the following idea: if
parents have the right to spend more than $ 100 000 on an exclusive private education why should they
not have the right to spend the same sum on being sure that their children have a special sequence of
genes? The influence of the environment and the influence of our genes work in the same way. Both
have a great influence on the success of the children even if neither can guarantee it.\textsuperscript{21}

The main point of his ideas is the thesis that it is natural and eo ipso morally good that parents use every possibility they

\textsuperscript{19} see K. Marx Das Kapital. Kritik der politischen Ökonomie. Erster Band. Gesamtausgabe (MEGA)
Zweite Abteilung. Band 5, Dietz Verlag Berlin, p. 987

\textsuperscript{20} see Hofmann H. Die feministischen Diskurse, p. 161

have to create the best starting conditions for their children. He can already see that today's gulf between the poor and the rich will widen still more as a result of these technologies. Rich parents would not only give the best education which is available for money to their children, they would also give them the best cumulative genes too. A well balanced state of mind, contentment, innate talents, a high creativity and a healthy body - these would be the starting conditions for the children of the rich. Dispositions for diabetes, heart diseases, high blood pressure, alcoholism, mental disease and cancer would remain the fate of the poor.

I have no time to argue in detail against all the theses of Silver. But I think it is necessary to contend the following: firstly, the availability of new medical techniques. We already have this problem today in Germany when we look at the catalogue of treatments, which are paid for by Health insurance companies and which should be funded with private money. Secondly, we have to deal with the "slippery slope" argument. Even in the few words I have cited here it comes out that the primary aim of medical technologies - to heal diseases - is no more the point. It has stepped forward to eugenics. In my paper I have argued only to the third point - the understanding of self-determination.

Summary
But even if this term self-determination is often seen only in one way we should not reject it outright. Women's individual self-determination can not be seen independently from social values, conditions and developments. That means that the term self-determination should have a political dimension. If we exclude these conditions from our ideas on self-determination it will always stay limited and helpless. Every real step in the direction of self-determination and democracy is only possible and successful if the socio-political development includes steps towards the equality of handicapped and non-handicapped people (and equality means more than giving them the same constitutional rights). Doing this is working on the 3rd Kantian's question: "What can I hope fore?"

In answering his 4th question "What is the human being?" we should reject every orientation that understands human life as a special level of physical or mental ability. And we should also reject viewpoints like those in Brecht's drama "The life of Galileo". In this work the people of Italy wish to use the discoveries of Galileo Galilei as arguments for more democracy. But the scientist Galileo answers: I have written a book on the mechanics of the universe. That is all. I have nothing to do with what other people do with my discoveries.

The biomedical sciences are not nonpolitical sciences and there are no women or parents outside a society. We have a market-dominated-society which needs our responsibility and critical discussion of every new technology.

\[^{22}\text{ebd., S. 297}\]