

## BIOETHICS AND THE FUTURE OF HUMAN DESTINY

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When considering the matter of human destiny within the discipline of bioethics, a number of subthemes come into play through questions of human dignity and moral obligation. They call us to consider the nature of humanity in a pluralistic context, where there is no single expression of what it means to be human or agreement on ethical norms toward living the good life. In fact, there is no consensus on the meaning of the good. But at the most practical level, the future of human destiny finds its consideration through the marketplace of health care. Today, the future of human destiny is an issue addressed primarily by those with the financial resources available to improve their chances for a more optimal outcome when encountering the hurdles of nature.

For those whose mere existence is an ongoing concern, whose lives are severely inflicted by poverty and politico-cultural corruption, and with no hope to come out from under the oppression of evil dictators, disastrous economies, or even human trafficking, the last thing on the minds of these people is how to consume significant amounts of antioxidant rich supplements to improve their overall health. They aren't thinking about how to extend their lives by 10 or 20 years, living life to its ultimate potential. They just want to figure out how to have their 50<sup>th</sup> birthday with their families intact. In the realm of bioethics, there is a direct correlation between the future of human destiny and the wealth of those whose lives are directly impacted by the particulars of the topic.

The subthemes that relate to the topic of human destiny are seemingly infinite. Yet for the purposes of this paper, and to establish evidence for the claim that there exists a correlation between wealth and considerations of human destiny, the following subjects will be discussed throughout the course of this paper: eugenics policies, human egg donation, outsourced pregnancy to 3<sup>rd</sup> world countries, and health care availability as associated with the notion of human rights.

Population control is, by definition, a utilitarian project aimed at locating the greatest amount of happiness for the greatest amount of people. The one-child policy of China is oriented toward answering the problem of overpopulation. It is an example of how logical consistency does not always provide for a sufficient moral argument.

In 1978, China began to enforce the one-child policy on families in urban regions of the country as a means to address the growing concerns over social, economic and environmental problems. By restricting families to just one child, the Chinese government believed it would alleviate the people of problems directly associated with an increasing population. Vast amounts of people in small urban regions

are bound to lead to unrest of various sorts. It is in this context that the policy has led to coercive methods of enforcement including forced abortions, female infanticide, and a cause of China's current gender imbalance. For the sake of family honour and tied directly to family economics, the policy became naturally eugenic. A culture oriented toward patriarchy wants to preserve at all costs the family name, and this is accomplished only by the birthing of males. In this sense, the policy related coercion created a false-sense of freedom. To decide which children should live according to gender is no more a real choice than the choice Sophie [3] faced in the concentration camps of Nazi led Germany. Though a work of fiction, Sophie's decision to decide which of her two children should go to the gas chamber is helpful in illustrating that some decisions are not actual choices.

For the families in China forced to make a decision about which of their children should live is a situation forced on them by governmental powers valuing national wealth over human dignity, evidenced also by the epidemic of child labour in the nation.

Human destiny, for the people of China, is concerned with their progeny. Human destiny is about continuing the family name and mere survival.

Barrenness among women and couples is a source of significant grief all over the globe. The answer to the dilemma, however, comes with a hefty price tag and is, essentially, only available to those with vast financial resources. For many, health insurance companies will cover the cost of going through treatments to address the problem of infertility, but even these insurance companies have their limitations. The bottom line is that for people of wealth, there is no bottom line and infertility treatment can be approached with few ethical limitations.

Similar to the quandary of the people of China, considerations of human destiny have everything to do with having children and leaving a legacy. But for many couples, infertility can only be conquered through the use of egg donors.

Appealed to for their altruistic sensibilities, young women of reproductive age all over the western economic world are sought for their prime treasure trove of unharvested riches. Their unfertilized eggs are the source of ultimate joy for those who can afford to offer them tens of thousands of dollars to undergo the "donation" procedures. But harvesting donor eggs is a process that comes at a price for the one with altruistic intentions, and with little contractual obligation on the part of the recipient of the so-called donation.

Human destiny as it is applied to the topic of egg donation doesn't concern itself in a hierarchy of values with the health and well-being of the donor. A price tag is placed on her reproductive abilities such that in her mind, human destiny is correlated with economic stability and success than with concerns of personal health. For the young woman, an infant is the ultimate goal of invading her reproductive system with little acknowledgment that the future of biological child—not just a clump of cells—entering the world with little hope for information on his or her genetic past.

The future of human destiny is at risk as children of egg donors and even sperm donors are unaware of their genetic heritage. With the risk of unknown siblings in concentrated areas due to the lack of regulation of the reproductive industry, the future of human destiny may very well just be out of everyone's reach to have any real and reasonable control over. This isn't the stuff of sci-fi or television police dramas; this is the reality of unfettered use of reproductive technologies. Interestingly, it is a problem exclusively for the western world of affluence [2].

As the fertility industry continues to pillage young, college-aged women of their reproductive resources, another wealth-progeny associated debacle is occurring in third world countries through the wealth of westerners. In an effort to continue the family name, to leave a personal legacy through another human person, the wealth of western society is garnering the assistance of women in third world countries around the globe to serve as surrogates. And it is becoming a noble cause, especially for women in India searching for a means of income to support their families. Little awareness exists as to the exploitive nature of the situation.

Hospitals and fertility centres within India are helping to establish relationships between the haves and the have not's, believing they are creating a sense of equity in a culture where so many live in poverty. But the situation that existed accounts for what is truly the exploitation of women who will involve themselves in a surrogacy contract, only to be paid far less than commercial surrogates in western nations might receive. The differential is radical. Where those dealing with infertility may spend \$200,000 in the US for treatments, in India, it is only around 10% of that cost. The nature of the economy dictates the value of the procedure and has little to do with the value of the surrogate. Yet women all over India are functioning in the role of incubator for women all over the world who can't carry their own pregnancies to term.

How we think about the future of humanity may not necessarily be how we think about how to answer today's bioethical issues. Most people of basic intelligence know that we ought not to live in a way that financially or otherwise exploits others, yet to fulfil our own notions of human destiny and legacy, many are willing to redefine terms. For the women of India who are being exploited as overseas incubators, they believe what they're being told. Though only garnering roughly 10% of what a US surrogate would make for the same process, they believe their financial best interests are a top priority. And the women and families utilizing the services of these women believe they are helping them by enabling them to escape the ravages of poverty. This may or may not be the case, but the true motivation is the utilitarian nature of

this venture and for so many, the ends (having a child) certainly justify the means [1].

No one wants to suffer, and because of the Image of God, or perhaps of Aquinas' understanding of the "divine spark," each of us has a sense of responsibility and/or justice toward those in need. Unnecessary suffering has become the state of things for many people all over the world, and from this has stemmed a movement that believes in the natural and civil right to health care. In the US, this has become a pointed area of discussion at every level of society with sophisticated arguments on all sides of the debate. The question is ultimately, for the purposes of this work, even if health care—or health in general—is not a natural or civil right, are we a better society and a better people if we treat it as such.

This issue has become a faith-based debate on many fronts. As it pertains specifically to the individual mandate of President Obama's health care policy signed into law in 2009, a number of religious arguments have found their way into the discussion. With appeals to neighbour love in a semi-secular language, President Obama has appealed to the sense of moral obligation to help those in need to justify tax dollars being allocated to health care coverage to those in need.

Any time a sense of moral obligation is appealed to, one is required to ask of the source of this obligation. Why is anyone obligated to any act or decision that conforms to a particular standard? Obligation is the fruit of the sense of an objective morality, and such appeals have been delivered to the faith community on a regular basis.

It isn't erroneous to appeal to an argument for neighbour love or to argue on the basis of human dignity rooted in the Image Dei to make a case for health care assistance to those in need. The problem with this from a political perspective is the equivocation between the secular and the sacred. A case for helping any one in need cannot be developed from a godless worldview. This can only be a subjective, personal decision that can only be considered as an independent choice. But arguments grounded in a sense of Christian responsibility find their basis in scripture and, then, are of the domain of the Church. In no case is government to be prescribing biblical constructs to unbelievers—at least according to the rules of the secular. This is the standard line of thought when it comes to dealing with the risk of theology within a secular context.

So what exactly do all of these political deliberations have to do with the bioethical questions related to human destiny? First of all, in defining the good from the perspective of a Christian worldview, it is "good" to know that government recognizes that there is a manner in which all people should be treated. The neighbour-love approach to political decision-making is not all that illegitimate. It is a reflection of the character and nature of God and depends on the foundational teachings of the church found in scripture. The image of God is something which resides in each of us in many aspects including our use of logic and reason, our compassion, our love and our sense of morality. This image of God, however, is not accounted for outside of the domain of a Christian view of the world. As representatives of a secular culture begin to function within the framework of human dignity, they cannot explain well their rational for making such appeals.

The image of God resides in them, but they cannot account for why these are their positions. Only those oriented to the secular and the sacred in the most objective ways can identify when the secular is over-reaching in adopting the manners and methods of the sacred.

What the discussion of health care has to do with the future of human destiny is of considerable consequence. No one wants to say governments or worldviews ought to restrict life spans. Our nature is to live long and healthy lives, and this is best done in our quest for health care, general and specialized. When individuals – all around the globe – struggle to have their basic health needs met, many are touched with a sense of compassion to want to accommodate these needs. In non-third world contexts, we have learned to extend that sense of compassion, but do we do this rightly? Do all people have the natural and civil right to health care?

The future of human destiny is always going to be in question if secular forces try to answer the dilemmas of biotechnology, reproduction, and beginning, middle and end-of-life questions. Secularism with no epistemological basis for moral absolutes can only offer progress as an answer for the future of human destiny, but secularism cannot offer any goal or end point. If, according to the natural leanings of secular philosophies to reject notions of God as public reasons for anything we understand or claim to know, there can be no goals because there is no sense of where humans are going. There is no sense of human obligation to any biological or technological considerations.

The best answer to the question of the future of human destiny from within the discipline of bioethics is found within the framework of a Judeo-Christian framework. No other worldview properly accounts for the sense of obligation continuously being ordained over cultures and societies around the world capable of helping those in need. The image of God within each of us is an indirect source of the epistemological confusion within these very public conversations.

But to more effectively carry on with these discussions of human dignity – which grounds a generous and protective

view of human destiny – it is important to stake a claim and give an explanation for the moral similarities that exist in such a pluralistic environment. We need to do more than demand that there is a good life to be lived; there is a need to be able to explain the source of this understanding.

Where we go from here with reference to the future of human destiny is to create an environment in the world of bioethics where thought leaders can in the most intellectually honest ways connect with each other on the rational justifications for stated moral arguments. This gets at the grounds of the worldview driving various stated positions, where all voices are welcome in the public discussions and no voices is forbidden. What results from this give and take on foundational paradigms is an understanding and perhaps the persuasive opportunities to make the case for moral obligation toward our human brethren. If no moral truth exists in the world, no reason exists for us to be concerned with forced abortion, infanticide, sex trafficking, and financial exploitation within the infertility industry. But if any repugnance exists, then this repugnance can be filtered through the dominant worldviews to see if it is a justifiable reaction. If, however, no moral truth exists, nothing matters including those things we identify as human atrocities throughout the world.

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## БИОЭТИКА И БУДУЩЕЕ ЧЕЛОВЕЧЕСКОЙ СУДЬБЫ

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**Резюме.** В статье анализируются проблемы биоэтики, которые в значительной степени могут повлиять на будущее судьбы человека: донорство яйцеклетки, суррогатное материнство, технологии, улучшающие жизненные показатели человека. Сделан вывод, что решение этих вопросов требует соблюдения прав человека. При этом речь идет как о правах будущего ребенка, так и о правах женщин, мужчин и семей. Проведена корреляция зависимости использования новых репродуктивных технологий от уровня материальной обеспеченности семей, религиозных приоритетов в различных странах, а также от социальной политики государств.

**Ключевые слова:** биоэтика, биотехнологии, репродуктивность, евгеническая политика, передача человеческих яйцеклеток, контракт о суррогатном материнстве, человеческая судьба.

## БИОЕТИКА І МАЙБУТНЄ ЛЮДСЬКОЇ ДОЛІ

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**Резюме.** В статті аналізуються проблеми біоетики, які в значній мірі можуть вплинути на майбутнє долі людини: донорство яйцеклітини, сурогатне материнство, технології, поліпшуючі життєві показники людини. Зроблений висновок, що рішення цих питань вимагає дотримання прав людини. При цьому йдеться як про права майбутньої дитини, так і про права жінок, чоловіків і сімей. Проведена кореляція залежності застосування нових репродуктивних технологій від рівня матеріальної забезпеченості сімей, релігійних пріоритетів в різних країнах, а також від соціальної політики держав.

**Ключові слова:** біоетика, біотехнології, репродуктивність, евгенічна політика, передача людських яйцеклітин, контракт про сурогатне материнство, людська доля.