

# **TANGAZA COLLEGE**

Catholic University of Eastern Africa

## **MEDICALLY ASSISTED PROCREATION, A CHALLENGE TO CHRISTIAN MORALITY**

AN ESSAY SUBMITTED TO THE FACULTY OF ARTS AND SOCIAL SCIENCES  
IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF  
BACHELOR OF ARTS IN RELIGIOUS STUDIES

**Student:** Bujiriri Gilbert, M.Afr.

**Tutor:** Fr. Charles Odeny, cssp

February 2002  
Nairobi, KENYA

STUDENTS DECLARATION

I, the undersigned, declare that this long essay is my original work achieved through my personal reading, scientific research method and critical reflection.

It is submitted in partial fulfillment of the requirements for the Degree of Bachelor of Arts in Religious studies. It has never been submitted to any other college or university for academic credits. All sources have been cited in full and acknowledged.

Signed:.....Gillen.....

Date:.....07-02-2002.....

This long essay has been submitted for examination with my approval as the college supervisor.

Signed:.....

Fr. Charles Mark Odeny

## DEDICATION

I dedicate this essay as a thanksgiving souvenir to my priestly formation, my family, friends and relatives, Fr. Charles Odeny (my Supervisor) for his dedicated guidance, *Brendan* Brendan O'Shea, for his proofreading, the Society of the Missionaries of Africa, fellow students, my local Church: The Archdiocese of Bukavu, Democratic Republic of Congo.

## LIST OF ABBREVIATIONS

AI: Artificial Insemination

AID: Artificial Insemination with Donor

AIH: Artificial Insemination with Husband

IVF: In Vitro Fertilization

GIFT: Gamete intra fallopian transfer

LTOL: Low tubal ovum transfer

MAP: Medically Assisted Procreation

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## GENERAL INTRODUCTION

In our world today, it is obvious that the advance of technology and science has changed and influenced in many ways the lives of people. Technology has brought solutions to some problems such as hunger, diseases, poverty. Machines have relieved humans from the burden of heavy and time consuming works. The ancient dream of life freed from famine and disease is being realized in some places through technology, and many people look at technology as their principal source of hope.

It is a fact that technology has greatly contributed to the welfare of human beings in their modern world. Many people, among them some theologians have given a positive appraisal of technology. They see it as a source not only of higher living standards but also of greater freedom and creative expression. Due to the many advantages it offers, they affirm technology as "an instrument of love and compassion in relieving human sufferings - a modern response to the biblical command to feed the hungry and help the neighbor in need".<sup>1</sup> In this regard technology is seen as an instrument of human fulfillment and self-expression in the use of our God-given intelligence to transform the world.

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<sup>1</sup> Ian Barbour, Ethics in an Age of Technology, London: SCM Press, 1992), 4 -5.

In matters regarding life, medical science has made it possible nowadays not only to help and assist life, but also to produce human beings in what we call Medically Assisted Procreation, (M.A.P.). In this practice, which is also at the center of our concern in this work, medical science aims no longer at repairing, relieving or prolonging life, but rather to remedy what was impossible because of some physiological obstacles: To have children without sexual intercourse despite sterility.

This practice poses, of course a lot of moral questions because not all that is scientifically possible is necessarily morally acceptable. Technology is positive in as much as it promotes the real good of human beings. But although technology does render and will continue to render many services to us, it is also at the same time a threat to us, to our dignity, and to our whole life if it is not oriented to our real good. From this perspective Pope John Paul II stresses:

"In the phase of its concrete achievements, science is necessary to mankind to satisfy the rightful requirements of life, and to overcome the different ills that threatens it. There is no doubt that applied science has rendered and will continue to render services to man, provided it is inspired by love, regulated by wisdom and accompanied by the courage that defends it against undue interference of all tyrannical powers. Applied science must be united with conscience, so that in the trinomial, science-technology-conscience, it is the cause of man's real good that is served"<sup>2</sup>

Looking around we see that not all the achievements of technology are for the real good of human beings. Some even tend to destroy us. The human being is sometimes considered as an object to be used and abused, manipulated for the sake of science. Life is not respected and so becomes, not a subject worthy of dignity but an object of

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<sup>2</sup> John Paul II in "The New Technologies of Birth and Death: Medical, legal and moral dimensions", (Dallas: Pope John Center, 1980), 6.

experiment. In many domains of technology, in medicine for example and particularly in regard to Medically Assisted Procreation, the lack of a certain control proportionate to the mastery of technology in our hands can lead to abuses, manipulations and even dehumanization of humans. In matters concerning the beginning of life, it is true that our control over conception, gestation and birth has increased steadily in our days. There are means to terminate a human life, to abort a living child or to prevent a human conception by any of the variety of chemicals and devices.

Medically Assisted Procreation consists in the use of artificial insemination, in vitro fertilization, and embryo transplants to assist sexual reproduction. All these abuses show that there is disrespect for human dignity which is a God given gift to everyone. A person has no right to destroy another person or to use him or her as a means for his or her own selfish end. The human person is created in the image of God and not manufactured according to human will. Hence life and dignity are to be respected without condition. This affirmation of Thomas O'Donnell can help us to understand this fundamental reality when he says:

"Thus when we are dealing with human life, one's own life or the life of another, we are dealing with something in which human beings can have, at most, only use of stewardship, as a right and responsibility. Absolute prerogative in human life is an exclusively divine prerogative, and right reason demands that any invasion or diminution of human life be considered in the light of the exclusively divine prerogatives"<sup>3</sup>

Human life has a great value with which no one should interfere even the physician. In this regard he strongly emphasizes:

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<sup>3</sup> O'Donnell Thomas J., Medicine and Christian Morality, (New York: Alba House, 1996), 51.

"The physician must always remember that the lives and bodies of his patients are not subordinated to himself, nor to the state nor to the science of medicine nor even to the patient himself. They are subordinated to God alone"<sup>4</sup>

Unfortunately today, this advance of science seem<sup>S</sup> to be straying from this<sup>A</sup> fundamental obligation. Many physicians have decided to use their knowledge under the pretext of helping humanity and infertile couples to have babies, to clone human beings through Medically Assisted Procreation despite the opposition of the Church and of many other well - wishers. The declaration of an American doctor, Panayiotis Zavos is enough to show us the gravity of the problem. Doctor Zavos whose team is to start cloning very soon to help infertile couples bear children declared, despite the criticisms of his plan to human cloning, that

"people would eventually get over opposition to human cloning. Historically this is normal but once the first baby is born and it cries, the world will embrace it. Now that we have crossed into the third millennium, we have the technology to break the rules of nature"<sup>5</sup>

In another related declaration, an Italian doctor determined to be the first to clone a human defended his plan and accused the Vatican of starting a new inquisition against science. He said there is no crime in cloning. To think and to research was not forbidden, and that his team is working for humanity to help man, not to create anything negative.<sup>6</sup>

All these and many other cases show that Medically Assisted Procreation disrespects the <sup>d</sup>Doctrine of <sup>m</sup>Morality which is essentially based on the dignity of the human person; and this raises many moral questions. In order to reflect more and to deepen our understanding of this controversy I have chosen this topic: **MEDICALLY ASSISTED PROCREATION, A CHALLENGE TO CHRISTIAN MORALITY.**

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<sup>4</sup> O'Donnell, Medicine, p.51.

<sup>5</sup> Sunday Nation, 11<sup>th</sup> March 2001, Correspondent and Reuter, p.28

<sup>6</sup> Sunday Nation, 25<sup>th</sup> March 2001, Life Style, p. 3

This study will try to show in which way Medically assisted procreation defies Christian morality, in as much as the morality of the act is judged in accordance to the divine law of nature. Not all the aspects will be covered in this work, but rather a few elements will be examined in the light of Christian morality.

Three main parts corresponding to three chapters will build up this study. The first chapter, **fundamental facts of M.A.P**, will consist in giving a brief history of M.A.P, then we will try to identify its causes and motivations as well as its diverse components. The second chapter titled **the moral discernment of M.A.P**, will present first of all the criteria for a moral judgment of M.A.P. Our main concern will be to show how this act is in itself immoral. The third chapter consisting of **the moral problem of selective abortion** and of **the position of the Church** will dwell on problems related to embryos, and will discuss some specific cases which will conclude our work.

The methodology we will adopt will be both descriptive and analytic. Facts will firstly be described and then analyzed from a moral point of view.

This work is not without short - comings. The first problem we encounter is that there is a lot of material from videos, and from hearsay, experiences and witnesses of people, which are not easy to account for in such a work. Hence we will rely mostly on written material from books, magazines and documents of the Church. Another problem we face is the vagueness of some terminologies that we will encounter. There is a great need to clarify certain terms as different authors may use the same term but with an opposing meaning. However, we believe that these difficulties will help us to make more efforts towards the realization of this work.

# Chapter I

## Fundamental Facts of Medically Assisted Procreation

### 1.0 Introduction

In today's world, biological and medical sciences are playing a very important role in the process of procreation. For one reason or another, some couples turn to medically assisted procreation to have a child. This artificial procreation constitutes several facts which we will analyze in this chapter. We will also examine the causes and motivations related to the practice of medically assisted procreation. But beforehand, let us first look briefly at the history of this practice.

#### *1.1 Brief History Of Medically Assisted Procreation*

Sterility has always been a problem for humans all over the world and throughout the ages. Couples unable to beget children have always sought ways to remedy this problem, and it has always been a concern for doctors, as they struggle to find means and ways to solve this problem through medically assisted procreation. The technique of artificial insemination came as one way to help childless couples have children of their own.

Human artificial insemination, as we know it today, was for a long time practiced in animal husbandry before being extended to human beings. It has helped greatly to improve the quality and breeding of animals. According to Thomas J. O'Donnell, "The technique of artificial insemination has been used in domestic animal breeding as early as

the fourteenth century among Arabs, to inseminate horses"<sup>7</sup> In the same line, Andrew C. Varga adds: "In modern times artificial insemination has been used with considerable success in animal husbandry. Through this technique it is possible to produce superior cows for milk or meat, as well as other kinds of animals with specific characteristics".<sup>8</sup>

This technique, which started with animals slowly, extended to humans. The first claims of human artificial insemination date from the end of the eighteenth-century. John Hunter, an English clinician, claimed to have successfully applied the technique to humans, and by the end of the nineteenth century, cases of disputed paternity in the circumstances of human artificial insemination began to appear in courts on both sides of the Atlantic Ocean. Thus it should come as surprise that the first condemnation of human artificial insemination was issued from the Vatican as early as March, 25, 1897.<sup>9</sup>

However it is worth noting that it was only towards the end of the nineteenth century that artificial human insemination became a significant area of human research. Though the theory of artificial insemination was known for centuries, its large-scale commercial application became possible only when the technique of freezing and storing sperm for future use became possible in the 1950's.<sup>10</sup>

Human artificial insemination was successfully performed in several cases during the last quarter of the nineteenth century in England, France, and the United States. Presently, this technique has been superseded by the latest related techniques of In Vitro Fertilization, and Embryo Transfer. The first results of these last techniques came in the

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<sup>7</sup> O'Donnel, Medicine, p. 236.

<sup>8</sup> Andrew C. Vargo, The Main Issues in Bioethics, ( New York: Paulist Press, 1980), p. 89.

<sup>9</sup> O'Donnel, Medicine, p.236

<sup>10</sup>Vargo, Issues, p.89.

second half of the twentieth century. As early as 1974, Dr. Douglas Bevis of Leeds<sup>e</sup> University in England, a gynecologist, announced that he had successfully implanted human ova, fertilized in test tubes, in the womb of three women who gave birth to three healthy babies. But for the sake of privacy he refused to disclose the identity of the women and of the babies so, the scientific community was not willing to accept his claims. The first and officially known baby produced as a result of these techniques is Louise Brown. Born on 25 July 1978 in England, Louise was hailed as "the first test-tube baby of the world".<sup>11</sup> Since then the technique has improved tremendously. Now a woman can be hyper ovulated to the extent of producing more ova. With the help of sperm banks, embryos can be frozen and kept for future use. The sex of the child can be predetermined. And through cloning it is possible to have a child who is a copy of his or her parents.

After this brief history of Assisted Reproduction, let us now see what are the main reasons why people resort to this practice.

### *1.2 Reasons For Medically Assisted Procreation.*

The reasons why people seek medically assisted procreation are many. In fact they are as many as there are people in need of a child, or sometimes scientists in need of furthering their research. For our part we will consider the two main reasons for resorting to medically assisted procreation. They are: The desire to have a child, and the fight against sterility.

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<sup>11</sup> Vargo, Issues, p.102.

### 1.2.1 Desire For Having A Child

In Augustine's doctrine about marriage, there are three blessings or goods in marriage, and one of them is the "Bonum prolis" or good of offspring. In the natural order this good serves the human race and its survival. The direct result of marital intercourse is the procreation of offspring. The one, sole justification for engaging in intercourse in marriage is to achieve the goal, the good of procreation.<sup>12</sup>

To generate offspring or to procreate is a task given to humans by God from the beginning of creation in order to fill the earth ( Gn1:28). Humans have a basic desire to give life to other humans like themselves. It is deep in the nature of a person to want to prolong him or herself and his/her species through time by begetting children. Hence it is understandable the trauma and suffering that couples who cannot have children undergo, since the desire for children is natural. And as Thomas O'Donnell says: "It expresses the vocation to fatherhood and motherhood inscribed in conjugal love. This desire can be even stronger if the couple is affected by sterility which appears to be incurable"<sup>13</sup>

It is clear from this argumentation that children do play a great role in marriage, and married people can be disappointed if their desire to have a child is frustrated. Dr. John Marshall is of the same view as O'Donnell with regards the importance of children for couples in marriage, he stresses: "The important part that children play in married relationship is revealed by observation of the sorrow of those whose desire for children is frustrated"<sup>14</sup> Marshall observes that this sorrow is not only confined to those who from the outset have wanted children of their marriage, but it is equally manifest in those who

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<sup>12</sup> Class notes on Sexual Morality, Tangaza College, p.11.

<sup>13</sup> O'Donnell, Medicine, p.289

<sup>14</sup> John Marshall, Medicine and Morals, (New York: Hawthorn Books, 1960), p.53.

( Ola! )

at first have not wanted children, and have perhaps used contraceptives in their firm desire to avoid pregnancy. After a time they wish to start a family only to find they are sterile, and their sorrow is great. Thus he concludes: "Children are a necessary complement to a marriage, and are desired by the vast majority of people. The desire is usually stronger in women, but pride in paternity is widespread and deep among men".<sup>15</sup>

Therefore sterility can be a disturbing element which needs to be fought within the marriage. Physicians have spent, and are still spending a lot of energy to fight and undermine sterility, which is one of the main reasons why couples do not have children.<sup>16</sup>

### 1.2.2 Fight Against Sterility

The desire to curb the effects of sterility has greatly promoted medically assisted procreation. When a couple cannot have a child because one of the spouses is sterile, or both of them are sterile simultaneously, they seek a remedy by resorting to medically assisted procreation. When we speak of sterility we refer to the natural act of intercourse among a couple which is fruitless for one reason or another. These reasons can exist in the man as well as the woman, or sometimes in both of them. Some are temporary, while others are permanent. Some can be corrected, but others, in the present state of medical knowledge are not susceptible to correction.

However, whatever its cause, sterility is certainly a difficult trial. For some people, sterility implies some weakness or failure on the part of the person, and <sup>they</sup> forget <sub>n</sub> that it is a medical condition like any other disturbance of bodily function. Some people are very judgmental about the childlessness of couples making criticisms and negative

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<sup>15</sup> Marshall, Morals, p.53.

<sup>16</sup> Marshall, Morals, p.54.

remarks about people who, through no fault of their own are victims of sterility. Marshall reminds us that, "such remarks or hints are not only hurtful to those about whom they are made, but are a gross infringement of the law of charity".<sup>17</sup>

Through the ages sterility has always been considered as an infirmity. It brings sorrow to those who are its victims. From experience, no single case of someone rejoicing about his or her own sterility has ever been recorded. Even people who chose not to have children, out of some preferential option or vocation, such as religious life, would not like to be sterile. To be able to produce children is even one of the conditions for celibate consecrated life. Childlessness can even be a source of distress even to those who have deliberately chosen it. Family and friends often expect a couple to start a family, and express their expectations, either openly or by implication.

Mary Warnock is right when she says:

"For those who long for children, the realization that they are unable to found a family can be shattering. It can disrupt their picture of the whole of their future lives. They may feel that they will be unable to fulfill their own and other people's expectation. They may feel themselves excluded from a whole range of human activity and particularly the activities of their child-bearing contemporaries".<sup>18</sup>

What could be more revealing about the shame, sorrow, and mockery brought about by sterility than these biblical testimonies? Abraham expressed his disappointment clearly, for he did not have a child. He said: "Lord God, what will thou give me, seeing I go childless, and the steward of my house is this Eliezer of Damascus." (Gen 15:2). In the same way, we are told about Hannah: "And her adversary also provoked her sore, for to make her fret, because the lord had shut her womb" (1Sam 1:6).

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<sup>17</sup> Marshall, Morals, p55.

<sup>18</sup> Mary Warnock, A Question of Life, (Oxford: Blackwell, 1984), p.8.

These few testimonies prove to us that sterility has never been an easy burden to bear. It is always an object of humiliation, which for many has to be fought at all cost. It is therefore natural that couples will try all means in order to have children. Modern techniques and medical personnel are also eager to provide ways and means of helping couples who cannot have children normally. In this way, they hope to eliminate sterility with the help of artificial procreation. Nowadays, Medically Assisted Procreation appears as an alternative to natural procreation for couples who need children outside the marital act of intercourse.

From this perspective, we can say that sterility is a real challenge, and right reason demands that we be more understanding vis-a-vis couples whose desire for children has been frustrated because of sterility. Marshall notes that "many people have become disheartened and depressed by their continued failure to have children."<sup>19</sup> It is important to note that childlessness, even though it constitutes a frustration to the legitimate desire for offspring, should not be seen as a danger or a frustration to the marriage itself. Procreation is not the sole purpose of marriage. The Vatican Council, in its pastoral constitution *Gaudium et Spes*, instructs us "Even in cases where despite the intense desire of the spouses there are no children, marriage still retains its character of being a whole manner and communion of life and preserve its value and indissolubility."<sup>20</sup> Conjugal life remains and maintains its value even if procreation is not possible. Marshall stresses that lack of fruitfulness of the act of intercourse does not invalidate the marriage. The fostering of love and the satisfaction of desire are also valuable and praiseworthy.

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<sup>19</sup> Marshall, *Morals*, p.56.

<sup>20</sup> Austin Flannery, *Vatican Council II: The Conciliar and Post Conciliar Documents*, *Gaudium et Spes*, no. 50, (Bombay: St. Paul's Press Training School, 1997), p. 839.

Inability to fulfill the primary purpose of marriage that is begetting children should not prevent marriage. If the ability to perform the act of intercourse is there, then fruitfulness or other acts lie in the hands of God.<sup>21</sup>

From this perspective it is always worthwhile to remember that marriage does not confer upon the spouses the right to have a child, but only the right to perform those natural acts which are per se ordered to procreation. So as says Thomas O'Donnel,

"A true and proper right to a child would be contrary to the child's dignity and nature. The child is not an object to which one has a right, nor can he be considered as an object of ownership; rather, a child is a gift, the supreme gift, and the most gratuitous gift of marriage, and is a living testimony of the mutual giving of his parents."<sup>22</sup>

What is most needed from the physicians is to further their investigations or research, so that they can prevent the causes of sterility and cure it, thus enabling couples to procreate in respect and dignity for themselves and for their children. In this way they can safeguard the dignity of human procreation.

As we said before, physicians are using Medically Assisted Procreation to alleviate the distress of childless spouses. Obviously, this method has been successful so far in combating and removing obstacles of sterility in the laboratory, by producing normal and healthy human children. However, this technique has not been capable of giving the parents a child who is a fruit of their love, of their mutual giving. This technique is meant to cure sterility but in the end, we realize that even when the child is born, the couple remains sterile. The truth is that instead of curing sterility, Medically

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<sup>21</sup> Marshall, Morals, p. 55.

<sup>22</sup> O'Donnel, Medicine, p. 289.

Assisted Procreation avoids the real problem. So couples whose sterility is incurable need to understand and accept their situation however sad it may be, and find other ways to help humanity, either by adopting children, caring for the poor or engaging in development works. Marshall advises that

"they can be helped to face the facts, however unpalatable, and to accept the situation as a cross to be shouldered willingly. In this frame of mind they are well-placed to turn their thoughts to other problems for the development of their marriage".<sup>23</sup>

Having said this, let us now try to analyze the different forms of Medically Assisted Procreation.

### *1.3 Different Forms Of Medically Assisted Procreation*

Artificial procreation refers to different techniques, which are used to render possible human conception outside the sexual union between a man and a woman. Depending on the nature of the inability to procreate naturally, these techniques are of various sorts as we are going to see in the following points.

#### 1.3.1 Artificial Insemination

Artificial insemination or artificial fertilization are understood as the different technical procedures directed towards obtaining a human conception, in a manner other than the sexual union of man and woman. It deals with fertilization of an ovum in a test-tube (In Vitro Fertilization), and artificial insemination of the collected sperm, through transfer into the woman's genital tracks.

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<sup>23</sup> Marshall, Morals, p.57.

Artificial insemination is the oldest technique of medically assisted procreation. It aims at correcting the defect that prevents the normal realization of the conjugal act. According to O'Donnell, human artificial insemination can be described as any process by which the male spermatozoa and the female ovum are brought together for achieving conception apart from and wholly distinct from an act of marital intercourse, whether using the spermatozoa of a third party (Artificial insemination with donor, AID), or the collected spermatozoa of the proper spouse (Artificial insemination with the husband, AIH).<sup>24</sup>

#### 1.3.1.1 Artificial Insemination with Husband, (AIH)

This is known also as homologous <sup>i</sup>nsemination. Under normal circumstances, and according to the <sup>d</sup>Divine plan for procreation, transmission of new life must be the fruit of the intimate and exclusive marriage partnership of love. However, spouses turn to <sup>a</sup>Artificial insemination when performance of a natural marital act is not possible due to various factors, for example: when natural intra-vaginal insemination is impossible either because of a physical anomaly of the husband (hypospadias), or of the wife (stenosis and/or vaginal membrane); or because of functional troubles that lead to premature ejaculation. Also when natural ascension of the spermatozoa in the uterus is impossible after a failure of treatment for endocervicitis or for causal cervical stenosis.<sup>25</sup>

*where does  
the quotation  
begin and end?*

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<sup>24</sup> O' Donnell, Medicine, p. 277.

<sup>25</sup> Dom Peter Flood, New Problems in Medical Ethics, (Illinois: Divine Word Publications, 1962), p.16.

*Again, a very old book*

Artificial insemination is occasionally done with the husband's semen because of some physiological problems, which hinder normal intercourse. Hypospadias, for example, is an anomaly of the male penis in which the urethra opens not at the distal end of the penis but on its underside, close to the body. This may preclude the delivery of the ejaculation into the wife's vagina. The use of a perforated condom during intercourse may circumvent the problem. Another anomaly is oligospermia: a deficiency of sufficient spermatozoa in the husband's ejaculation in acts of natural intercourse. This can be overcome by collecting amounts of the husband's ejaculation with a perforated condom, which can be observed in the laboratory to obtain a residue with a heavy concentration of sperm which can be deposited artificially within the generative ~~tracks~~<sup>tract</sup> of the wife, either immediately before or after a normal act of intercourse, thus fortifying the ejaculation of that act of intercourse with supplementary sperm, previously collected in legitimate acts of intercourse.<sup>26</sup>

#### 1.3.1.2 Artificial Insemination With Donor (AID)

This is also known as heterologous insemination. Artificial insemination with the semen of a donor is the best known and the most popular of all the techniques of artificial procreation. Today, an increasing number of sterile couples opt for this sort of artificial insemination in order to get children. "Recourse to this procedure is had when the husband is sterile, or when because of hereditary disease, fertilization by him is considered undesirable."<sup>27</sup>

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<sup>26</sup>O' Donnel, Medicine, p.238

<sup>27</sup>George V. Lobo, Current Problems in Medical Ethics, (Bombay: Better Yourself Books, 1973), p.152.

The practice is also used by women who would like, on their own, to have a child outside any sexual intercourse with a man. In this way the child will have a legitimate mother, her own mother, but it will be the son or daughter of an illegitimate or/and unknown father. Besides this technique of artificial insemination there exists another related technique known as surrogate motherhood, which makes it possible for a woman to bear a child that she cannot carry in her womb.

After this let us look at the other form of assisted procreation, which is the technique of In Vitro Fertilization and Embryo Transfer.

### 1.3.2 In Vitro Fertilization (I.V.F.) And Embryo Transfer

The event of Louise Brown's birth on 25<sup>th</sup> July 1978 marked a decisive step in reproductive science. On that day, in England, a 30 year old woman named Lesley Brown delivered by caesarean section a normal healthy baby girl as a result of fertilization "in vitro" of one of her ova with sperm of her husband. The artificial insemination that had been in use for a long time was superseded by this new technique of *In Vitro Fertilization*, also termed *Test-Tube baby*, or *Instant Baby*.

Bearing in mind that this is a very vast topic, our task here will be to look at some of the situations where this technique is indicated.

#### 1.3.2.1 Situation Where In Vitro Fertilization, And Embryo Transfer Is Applied

The technique of In Vitro Fertilization, and Embryo Transfer aims at helping infertile couples have their own genetic children by overcoming the causes of sterility. It consists in achieving, in the laboratory, what naturally happens in the fallopian tubes, that

is the fertilization of the ovum by the spermatozoa, and the formation of the embryo and its development.

In Vitro Fertilization and Embryo Transfer, is normally applied in cases of female sterility where, due to destruction or blockage of the fallopian tubes, it is difficult or even impossible for the ovum and the spermatozoa to meet in the uterus despite a normal production of ova on the part of the woman. Vargo points out that

"female sterility is frequently caused by a blockage in the fallopian tubes which prevents the ovum from passing through the tube where it could be fertilized and then descend in the uterus. Surgical removal of the blockage is very difficult or in most cases impossible. Surgical removal of the ova from the ovaries, however is possible and this fact makes fertilization in vitro feasible."<sup>28</sup>

This technique is also used in cases of female sterility of which the causes are not known. Hence, since the fertilization of the ovum by the spermatozoa cannot take place in the human body, it is done in a petri dish.

The technique is also suggested in other cases such as male infertility which result from anti-spermatic antibodies or any other form of sterility of which the cause, or origin are not identified. Just as for the Artificial insemination, In Vitro Fertilization and Embryo Transfer can be either homologous or heterologous.

#### 1.3.2.2 The Principle Of In Vitro Fertilization, And Embryo Transfer

In principle, the process of In Vitro fertilization is simple. As we said <sup>above</sup> "supra", it consists in achieving in the laboratory, what naturally takes place in the fallopian tubes, in other words, the fertilization of the ovum by the spermatozoa, the formation of the embryo and its first step in development. This is possible because, as we also mentioned,

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<sup>28</sup> Vargo, Issues, p. 100.

through surgery, the ova can be removed from the ovaries. With the help of an instrument called Laparoscope which the surgeon introduces and guides through a small incision in the abdomen down to the ovary, the surgeon is able to see the maturing ovum and remove one with the help of the apparatus. The ovum is then placed in a petri-dish where it can be fertilized by the semen of the husband. The fertilized ovum or embryo, after several days of growth in the test-tube is implanted in the wife's uterus, and if everything goes well, the embryo implants itself in the uterine wall and a normal pregnancy and child birth can be expected.<sup>29</sup> We should keep in mind that the whole process consists of creating in the laboratory, an environment similar to that of the fallopian tube.

#### *1.4 The GIFT, And LTOT*

While In Vitro fertilization takes place outside the human body, there exist another similar technique, the **GIFT** or **LTOT**, that takes place inside the human body. GIFT means gamete intra fallopian transfer, while LTOT means low tubal ovum transfer. These two procedures, are essentially the same, but received different names because they were independently developed by different teams of doctors at two different medical centers. LTOT was developed in Dayton, Ohio, while the GIFT was developed at San Antonio, Texas.<sup>30</sup>

This technique is similar to In Vitro Fertilization and Embryo transfer in its process of obtaining and preparing the ova and the spermatozoa; but different by its immediate implantation of the ova and spermatozoa in the fallopian tubes. Here fertilization takes place in the woman and not in vitro. It is a direct transfer of previously

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<sup>29</sup> Vargo, *Issues*, pp.100-102.

<sup>30</sup> O'Donnel, *Medicine*, p. 238.

collected ova and sperm in the fallopian tubes without waiting for fertilization in vitro.

According to O'Donnell,

"the husband previously collected spermatozoa, in natural acts of intercourse using a perforated silastic condom and his wife's ovum or ova recovered by laparoscopy, are positioned, in the laboratory, in a catheter in such a way that ovum and sperm are separated by an air-bubble and then deposited into the wife's fallopian tube, where it is hoped that they will unite and conception will occur."<sup>31</sup>

The technique of Artificial Insemination has opened doors to many possibilities in the field of reproductive science. Research is being done to improve the human race through what is termed **cloning**. This is our next concern.

### *1.5 Towards Clonal Reproduction*

The focus of the reproductive technique nowadays is centered on the possibility of human cloning. Cloning has already been accomplished in animals. Applied to human being, this technique consists in producing individuals who are genetically identical. According to George, V. Lobo,

"cloning is the reproduction without sexual union, which is accomplished by the removal of the nucleus of an ovum and replacing it by the nucleus of an asexual cell. e.g., a skin cell. The resulting being would be genetically identical with the donor of the nucleus."<sup>32</sup>

As we can see, through cloning the beginning of life, and the birth of a child is possible outside marriage, and without any form of sexual intercourse. This form of asexual reproduction is called **monogenesis**, **parthenogenesis**, or **virgin birth**. Human cloning was greatly influenced by success in cloning mammals. On February 17<sup>th</sup>,

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<sup>31</sup> O'Donnell, *Medicine*, pp.238-239.

<sup>32</sup> George V., Lobo, *Current Problems in Medical Ethics*, p. 158.

1997, researchers at Scotland's Roslin Institute, Edinburg announced that they had made an identical genetic copy, or clone of an adult sheep. "Dolly" was made from a single nucleus taken from an adult sheep's mammary gland as starting material. This successful mammal cloning made scientists think it is possible to clone human beings, because developing a cloning technique for mammals like sheep implied that the same could be done for human being with a high degree of success.

Human cloning can be defined as "manufacturing" another human being or a number of human beings that are genetically identical to one another. There are two types of cloning: reproductive cloning or therapeutic. Reproductive cloning is manufacturing a new person with the same genetic make-up as someone alive or who has lived. Therapeutic cloning is using cloning techniques to initiate growth of embryos in order to create new organs or cells for medical or research use.

Human beings can be cloned by either of the two techniques: embryo splitting or nuclear replacement. Embryo splitting is splicing or separating an embryo into two or more pieces, making two or more embryonic cells, each of which can grow and develop into a human being. This method is similar to the natural process which creates identical twins, only that here the embryo splits into two cells on its own, a process yet to be understood. Embryo splitting is fairly easy and is already being used as a standard animal breeding technique commonly called "artificial twinning".

Nuclear replacement was the method used to create "Dolly". A nucleus is taken from any part of the donor, for example from a skin cell or a blood cell. It is put into another person's egg from which the nucleus has been removed. Subjecting it to bursts of electrical current stimulates the eggs to begin dividing and eventually grow into a fully

developed child. This method can be used to create a clone from a person of any age, because all that is needed is the nucleus. Also, this technique can help to create many more clones than embryo split.<sup>33</sup>

## Conclusion

All through our investigation, our focus rested on the fundamental facts of Medically Assisted Procreation. Firstly, we looked at how deeply the desire for a child is rooted in many people. The desire for a child is a reality that is not to be underestimated in human society. However, this desire for a child, more than often leads to a misinterpretation of procreation. Procreation becomes a process of fabrication or manufacturing children through Medically Assisted Procreation: Artificial Insemination, In Vitro Fertilization, cloning, etc.

These techniques of human reproduction bring about moral problems. Primarily, it is the sanctity of the human life and body as well as the dignity of the human person as a whole, which are at stake. The use of these techniques raises fundamental questions in relation to freedom and history, the sense of human sexuality and its relation with fertilization.

Medical sciences have really improved, and they are to be considered as a blessing to humanity in as much as they try to direct their goal towards the respect of the dignity of humans. However, human reproductive techniques are a real challenge to Christian morality. They are issues of moral concern in our world today. This is what we hope to

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<sup>33</sup> Francisca Mwaniki, "Cursed Clones" in Daily Nation, (Saturday May 5, 2001): 8.

make clear in our next chapter, which will deal with the moral discernment of these techniques.

## Chapter II

### The Moral Discernment of Medically Assisted Procreation

#### 2.0 Introduction

Our investigation in the first chapter aimed at showing how, because of the advance of science in our time, it is possible to procreate without necessarily having sexual intercourse. Medically Assisted Procreation is the process through which other beings are brought to life outside the marital act or sexual union. We have tried to highlight the different practices in use so far. However it remains for us a question as to whether all that is technically possible is morally acceptable. The answer is not so obvious, and it is a challenge in our present world where the Christian values and morals are being sidelined by some scientists, who for the sake of their research would like to pursue assisted procreation at all cost.

The following chapter will show that the use of techniques of reproduction as we described it, in order to create a child for the purpose of fighting sterility or barrenness, is immoral and cannot be accepted. Let us first of all analyze the main criteria for a moral judgment of Medically Assisted Procreation, as suggested by the Church.

#### *2.1 Criteria For A Moral Judgment Of Medically Assisted Procreation*

Science and technology, in order to be useful for human beings must first and foremost seek their good and fulfillment. In other words, they must be ordered to the service of human beings, promote their rights, and their integral well being in conformity with the will of God. Thomas rightly puts it when he says:

*O'Donnell*

"Science and technology are valuable resources for man when they are placed at his service and when they promote his integral development for the benefit of all; but they cannot of themselves show the meaning of existence and of human progress. Being ordered to man, who initiates and develops them, they draw from the person and his moral values the indication of their purpose and the awareness of their limits".<sup>34</sup>

Therefore, a moral judgment of medically Assisted Procreation presupposes a proper idea of the nature of the human person in his or her bodily dimension. For this reason, the fundamental values connected with the technique of assisted human reproduction are two-fold: the life of the human being called into existence, or the bodily dimension, and the special nature of the transmission of human life in marriage.

### 2.1.1 The Value Of The Human Body

The human body is a constitutive part of a person through which the person manifests him/herself, communicates and enters into relation with others. The human person is a unified totality that expresses itself through the union of the body and soul. This means that human nature is at the same time corporal and spiritual; and by virtue of its substantial union with a spiritual soul, the human body cannot be considered as a mere complex of tissues, organs and functions, nor can it be evaluated in the same way as the body of animals. It is rather a constitutive part of the person who manifests and expresses him/herself through it.<sup>35</sup> *what is the conclusion here?*

From what is said above, we can see that though the body appears as a complex of tissues, organs and functions, one must not lose sight of the totality of the human being. Biomedical technique, especially from this perspective must consider and take into account the totality of human nature, corporal and spiritual, while dealing with the human

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<sup>34</sup> O'Donnel, Medicine, p.266.

<sup>35</sup> O'Donnel, Medicine, p. 267.

person. Ethically speaking, respect for the human person involves also respect for the body. Pope John Paul II enlightens us on this concern, as he stresses:

"Each human person, in his absolutely unique singularity, is constituted not only by his spirit, but by his body as well. Thus, in the body and through the body, one touches the person himself in his concrete reality. To respect the dignity of man consequently amounts to safeguarding this identity of man, body and soul in unity".<sup>36</sup>

Moreover, the natural moral law expresses and lays down the purposes, rights and duties which are based upon the bodily and spiritual nature of the human person. In this regard, Paul VI, quoted by Thomas, says:

"This law cannot be thought as simply a set of norms on the biological level; rather it must be seen as rational order whereby the person is called by the creator to direct and regulate his life and actions and in particular to make use of his own body."<sup>37</sup>

From this basis, we can now appreciate the origin and destiny of a human person. God who is love and life created man in his image. "Man and woman he created them" (Gen 1: 27). He inscribed in man and woman the vocation to share in a special way in His mystery of personal communion, and in His work as Creator and Father. For this reason, marriage possesses specific goods and values in its union and procreation, which cannot be likened to those existing in lower forms of life. Such values and meanings are of the personal order and determine from the moral point of view the meaning and limits of artificial intervention regarding procreation and the origin of human life.<sup>38</sup> Therefore, any human procreation must be done in respect to the nature of the human person. Thus, the

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<sup>36</sup> Jane E. Smith, "The Introduction to the Vatican Instruction," In Reproductive Technologies, Marriage and the Church, (Massachusetts: The Pope John XXIII Medical –Moral Research and Education Center, 1988), p.22.

<sup>37</sup> Smith, Introduction, pp. 21-22.

<sup>38</sup> O'Donnel, Medicine, p. 268.

birth of a human person must be the fruit of marriage, and in accord with the procreative act in its specific nature.

### 2.1.2 The Originality Of Transmitting Life Through Marriage

Normally, life is transmitted by a couple united in marriage, in a family context. This transmission of life is done in full acknowledgement of the rights and duties of the spouses towards God, themselves, and the community at large. The family, being the primary cell of society, is the group of people who are born from the marriage and who live in a communion of conjugal, faithful and fraternal love. It is also the natural institution in which the human person can develop bodily and spiritually in a healthy fashion; and the place where the moral and religious life of a human being and his or her capacity to love are first awakened by parental love.<sup>39</sup> Emphasizing this point, Mary Warnock stresses:

"The family is a valued institution within our present society: Within it the human infant receives nurture and protection during its prolonged period of dependence. It is also the place where social behavior is learnt and where the child develops its own identity and feeling of self-value. Parents likewise feel their identity in society enhanced and confirmed by their role in the family unit".<sup>40</sup>

From the above consideration therefore, spouses, in their task to transmit human life are not free to proceed anyhow. They must respect the nature and finalities of the conjugal act and conform to the will of God. Gaudium et Spes emphasizes this aspect in these words:

"When it is a question of harmonizing married love with the responsible transmission of life, it is not enough to take only the good intention and the evaluation of motives into account; the objective criteria must be used, criteria drawn from the nature of the human person and

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<sup>39</sup> Cf. Sexual morality, class notes.

<sup>40</sup> Warnock, Question, p. 8.

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human action, criteria which respect the total meaning of mutual self-giving and human procreation in the context of true love".<sup>41</sup>

From this perspective we can say that the transmission of human life has a special originality, and it cannot be equated to any other transmission of life in lower beings. This originality is due to the specificity of the human person as created in God's image. *Gaudium et Spes*, once again gives us light in this regard as it states:

"Man's sexuality and the faculty of reproduction wondrously surpass the endowment of lower forms of life; therefore the acts proper to married life are to be ordered according to authentic human dignity and must be honored with the greatest reverence".<sup>42</sup>

Marriage remains the privileged place where life is transmitted through the specific conjugal acts. It is only in this way that the transmission of human life can be judged morally upright. Hence, other means or methods used lawfully in transmitting the life of plants and animals cannot be applied to human beings.

It is due to the value attached to the human body, the respect of the human person, as well as the originality of the transmission of human life through conjugal acts in marriage that we will be able to formulate a moral evaluation of Medically Assisted Procreation.

## 2.2 *The Immorality Of Medically Assisted Procreation*

We have just seen that the main criteria for a moral judgment of Medically Assisted Procreation presuppose, first of all a right conception of the nature of the human person, and secondly the nature of the conjugal act. We will now show how this practice

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<sup>41</sup> Flannery, *Gaudium et Spes*, no 51.

<sup>42</sup> Flannery, *Gaudium et Spes*, no 51.

→ not the author!

is illicit and immoral, because it does not conform to the natural law in regard to the gift of life for human beings.

### 2.2.1 Dissociation Between Procreative Act And Union.

The teaching of the Church is unequivocal on the inseparable connection between the two meanings of the conjugal act, unitive and procreative. Hence, it is never permissible to dissociate the two to such an extent as to exclude either the procreative intent or the conjugal relation. The Church stresses that

“there is an inseparable connection, willed by God and unable to be broken by man, between the two meanings of the conjugal act: the unitive meaning and the procreative meaning. Indeed, by its intimate structure, the conjugal act, while most closely uniting husband and wife, capacitates them for the generation of new lives, according to laws inscribed in the very being of man and woman”.<sup>43</sup>

Thus we can say that the moral value of the intimate link between the goods of marriage and the meanings of conjugal acts is based upon the unity of the human person, a unity involving body and soul. Spouses mutually express their personal love in the language of the body, which clearly involve both spousal meaning and parental ones. The conjugal act by which the couples mutually express their self-gift at the same time expresses openness to the gift of life. It is an act that is inseparably corporal and spiritual. It is in their bodies and through their bodies that the spouses consummate their marriage and are able to become father and mother. In order to respect the language of their bodies and their natural generosity, the conjugal act must take place with respect for its openness

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<sup>43</sup> Congregation for the Doctrine of Faith, Donum Vitae no. 12, (Nairobi: St. Paul's Press Training School),p.26.

to procreate; and the procreation of a person must be the fruit and the result of married love.<sup>44</sup>

Medically assisted procreation goes against this teaching of the Church in the sense that it violates and corrupts both the unitive and the procreative meanings of the conjugal act. The whole technical process dissociates husband and wife by the intrusion of a person outside the couple; donor of sperm, donor of the ovum, surrogate uterus etc.

Heterologous artificial insemination, for example, infringes the right of a child to be conceived, carried in the womb, brought into the world, and brought up within marriage. It also betrays the right of the spouses to become father and mother through each other. Homologous artificial fertilization techniques, though less reprehensible than the heterologous, are still morally unacceptable, because they dissociate the sexual act from the procreative act.

"fertilization is licitly sought when it is the result of a conjugal act which is per se suitable for the generation of children to which marriage is ordered by its nature and by which the spouses become one flesh. But from the moral point of view procreation is deprived of its proper perfection when it is not desired as the fruit of the conjugal act, that is to say of the specific act of the spouses' union".<sup>45</sup>

Consequently, any procreation which is achieved outside the human body of the couple is deprived of the meanings and values which are expressed in the language of the body and in the union of human persons. Medically Assisted Procreation, automatically falls under this moral judgment. Under its various forms, it is morally unacceptable, by the very fact that from the starting point it does not respect the normal conjugal act, the dignity of the human person and his origin.

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<sup>44</sup> Congregation for the Doctrine of Faith, Donum Vitae, no. 4, pp. 27-28.

<sup>45</sup> Congregation for the Doctrine of Faith, Donum Vitae no. 4, p.27.

It is exactly because it disrupts the connection between the two meanings of the conjugal act that Medically Assisted Procreation is morally wrong. By trying to reach procreation which is not the fruit of the specific act of conjugal union, this practice separates the meanings of marriage. Let us mention, by the way, that this separation is made possible by both the techniques of Artificial Insemination, and In Vitro Fertilization and Embryo Transfer.

In this perspective, we can say that to engage in these practices which dissociate union and procreation in the conjugal act, is to lack respect for conjugal and family life. It is only when the two meanings, union and procreation, are safeguarded and respected that the conjugal act maintains fully its sense of true love and its ordination to the vocation of humans to parenthood. From this originates a bond between a child, who is the result of the very act, and the parents. This parental and filial relationship is however disrupted by the practice of Medically Assisted Procreation and by its tenants.

### 2.2.2 The Problem of Filiation (Kinship)

Depending on the causes of the infertility or sterility to be fought or overcome, the practice of medically Assisted Procreation recur to the donation of sperm or of the ova. We have spoken at length about the moral concern that the whole practice entails. In fact it is not clear to whom the child, who is the result of this technique, deserves his or her parental filiations.

We know that the father or the man who provides his sperm, in the case of insemination and In Vitro Fertilization, can well be a stranger to the couple. Likewise, the woman could be a donor or a carrier, depending on whether she gave the ovum, or only carried it to term, having got it from a different woman. The recent interest in Medically

Assisted Procreation tends to accept and legitimize this practice which in fact is a moral disorder. Reproductive sciences have shifted from assisting the begetting of children to manufacturing a product. People could argue that, for example, concerning Artificial Insemination, kinship is not disrupted when done in the context of marriage, since the father or the man willingly accepted the technique, and the mother is after all the one who delivers the baby.

This simplistic way of looking at things does not however concur with the law of nature. In this situation, kinship is not assured. In Artificial Insemination with a Donor, the man, as the potential father, can be less present or totally absent. On the part of the carrier mother, there are two women involved; hence the maternity of the child will in one way or another be affected with something lacking. Another element that makes the filiations doubtful, in the technique of Assisted Procreation, is the secrecy or anonymity which surrounds the whole process. In Artificial Insemination and heterologous fertilization, the identity of the donor of the sperm is kept secret. This is against the moral right of conjugal love, especially in the person of the husband. In this way, neither the child, nor the so-called legitimate parents will ever know the identity of the donor. In this line, Mary Warnock emphasizes the fact that Medically Assisted Procreation involves a third party outside the infertile couple. She explains:

"In artificial Insemination with donor (AID) another man provides the semen; in egg donation another woman provides her egg; in embryo donation both another man and another woman contribute; in surrogacy another woman provides her uterus (womb) for the duration of the pregnancy. In all cases, the question is whether it is better that a third party who helped a couple to overcome their fertility should be known to the couple or that the third party should remain anonymous."<sup>46</sup>

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<sup>46</sup> Warnock, Question, p. 15.

The reason given for this anonymity is that it protects all parties not only from legal complications but also from emotional difficulties. But in any case, this state of secrecy can be disturbing for the child as well as for the parents. Since life is transmitted in the family, it is good and worthwhile to know, on the part of the child, from whom one got this life so as to be grateful to him or her. This secrecy denies the child of its right to know its biological origin.

From what has been said, it is clear that Medically Assisted Procreation affects the filiations system by dissociation. Normally, a child is a genetic child of its parents. This is not the case in Medically Assisted Procreation as we described it. This view of Andrew Varga can help us to grasp better how this practice causes a problem of kinship or filiations. In another related technique called Artificial in ovulation, whereby it is the ovum which is given to an infertile woman within a marriage, he says;

"In this procedure, the sperm of the husband of an infertile woman is used to inseminate an anonymous donor. If the donor woman conceives, five days later, the fertilized ovum is flushed from the donor's uterus and is implanted in the uterus of the infertile woman who carries it to term... The technique avoids the difficult and costly procedure of fertilization in vitro, but the baby's genes are made up of those of the husband's and the donor's. The wife only carries the child to term. The child is genetically not hers... it is not a satisfactory remedy for infertility from the ethical standpoint because the child genetically belongs to only one of the spouses, and a third person, the donor, is brought into the exclusive union of two persons in marriage."<sup>47</sup>

In all these techniques, the child is deprived of the filial relationship to his parental origins. Hence Medically Assisted Procreation is an offense to the common vocation of the spouses who are called to both paternity and maternity. It puts a barrier between genetic kinship and filiations. The child will never be able to establish his filiations towards his biological parents, these last ones being simply anonymous.

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<sup>47</sup> Varga, Issues, p.104.

Apart from these dissociations resulting from the technique of Medically Assisted procreation, the means of procuring the sperm for In Vitro Fertilization are also in themselves against nature, and of doubtful morality as we are going to highlight in the following points.

### *2.3 Means Of Obtaining Sperm*

Time and again we have stressed the fact that human procreation is a result of a normal and natural sexual act; an act which, in no way should be transgressed for any reason or finality. Therefore, any intervention or disrespect for this act makes it morally illicit. The immorality of human medically assisted procreation is well shown by the means used in order to obtain sperm, such as the interrupted coitus, masturbation, and the use of condom. All these methods stand in opposition to the essence of the human being, and are in contradiction with God's plan.

#### *2.3.1 The Coitus Interruptus*

The conjugal act which, is a total mutual donation of the spouses, reaches its climax by the deposition of the male seed in the vagina of the woman. The coitus interruptus goes against the very nature of the conjugal act. Coitus interruptus is therefore "the act of withdrawal whereby the penis is withdrawn from the vagina prior to ejaculation".<sup>48</sup> The husband approaches his wife in an act of love. Then in the process of the marital act he removes his penis at the time of ejaculation so that the sperm can be collected in a sterile container. This practice renders the whole conjugal act solitary instead of being an act of total corporal, spiritual, and psychological union. Hence the act

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<sup>48</sup> Cf. Charles Odeny, Classnotes, manuscripts, Sexual Morality, 2001.

becomes immoral by the very fact that it is solitary and does not point towards procreation.

### 2.3.2 Masturbation

Masturbation is a solitary act for sexual pleasure. It is one of the common practices used to collect sperm in order to achieve Medically Assisted Procreation when a normal conjugal act cannot be reached. Artificial Insemination mostly depends on this practice of masturbation. Masturbation is an irregular act, and it is a morally condemned practice because, as Gerald Kelly says

"it implies the solitary and essentially individualistic use of sexual activities intended to be used in association. It disregards the truth that with those powers God provides physiological means for exercising them in a joint and common act".<sup>49</sup>

Although psychologists justify masturbation as being a normal phenomenon inherent to the evolution or development of sexuality during adolescence, it remains nonetheless a disorder. It is characterized by the absence of the sexual relation required by the moral order, there is no mutual self-giving leading to procreation. In a marriage context, masturbation is simply a refusal of procreation.

From this perspective, it is clear that the act of masturbation through which the sperm is collected in view of artificial procreation, is an act which breaks the conjugal union. It is in itself a moral disorder because, by its solitary nature, it stands in contradiction with the true meaning of sexuality which is exclusively relational, and ordered to the love of the other, and leading to the transmission of life. Masturbation by

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<sup>49</sup> Gerald Kelly, Medico-Moral Problems, (Missouri: The Catholic Hospital Association, 1958), p. 235.

which human sperm is procured for artificial procreation deprives human sexuality of its unitive aspect.

Catholic moralists, as Gerald Kelly points out, are unanimous on the fact that masturbation is against the natural law. Basing their arguments mainly on the physical sex mechanism, they assert that

"the very configuration of the male and female bodies, and the biological process pertaining to reproduction make it clear that the psycho-physical processes culminating in orgasm should be directed to and find their fulfillment in coitus. Solitary orgasm makes a mockery of this entire mechanism".<sup>50</sup>

In this same line, Dr John Marshall condemns the practice of masturbation as morally wrong and contrary to the natural law. He points out that the sperm is a cell of great potentiality, being capable with the ovum of giving rise to new human life. The sexual act is designed to enable the sperm to reach the ovum. It is clear therefore that the voluntary emission of the sperm is intended to take place only in the sexual act, and that for it to take place in any other way is wrong. Because the sperm is so important in itself, being an essential element in the production of new life, and because sexual act is so important a human act both biologically and psychologically, misuse of this function as in masturbation is gravely wrong.<sup>51</sup>

But is it right to condemn the practice of masturbation at all levels and in any case as the Church's position suggests? A study commissioned by the American Theological Society of America tells us that; a study of sexual fantasies that accompanies masturbation persuades one researcher that the practice is not emotionally unhealthy or

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<sup>50</sup> Kelly, Medico, p. 236.

<sup>51</sup> Marshall, Morals, p. 58.

alienating in itself. It becomes so only if it interferes with actual encounter with the opposite sex. For this study, masturbation would seem to be abnormal only when it is the sole method of sexual outlet when other methods are readily available; or when it is clearly a part of psychotic pattern.<sup>52</sup>

In regard to the case of In Vitro Fertilization, for example, the practice of masturbation takes a different appreciation. Some people, while recognizing that masturbation for self-pleasure is wrong, consider that it should be permitted in the hope of enabling a married couple to have a child. In this regard, when one of the members is affected with infertility, the sexual act by itself is incapable of leading towards procreation. Only procurement of the semen, by way of masturbation in order to fertilize in vitro the ovum of the woman, would make procreation possible. In this situation there is acceptance of one another and the love between the spouses is manifested through sexual relation. The practice helps only towards getting a child that is needed by the couple.

These different views, which in one way or another seem to be in favor of masturbation are however contrary to the natural law. The moral order that guides the norm of the action prohibits that the human seed meant for procreation be procured by masturbation. And Dr John <sup>Masturbat</sup> to clarify:

"It must be asserted that every human act must be judged as a whole, considering not only the need in view but also the means used to achieve that end. In this case the end in view, namely enabling a sterile couple to have a child, is beyond doubt good; but the means to be used, namely masturbation, is evil. Masturbation is fundamentally wrong, being contrary to the

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<sup>52</sup> Catholic Theological Society of America, Human Sexuality, New directive in American Catholic Thought, (New York: Doubleday and Company, Inc., 1979), pp.84-85.

natural law, hence circumstances cannot make it good. The whole act must therefore be condemned".<sup>53</sup>

In other words, the reproductive organs and sexual acts are designed to deposit the male seed in the genital tracks of the woman. To secure this deposition, by means other than intercourse is against natural law. The conjugal act must be performed in accordance with the norms prescribed by nature. Masturbation being contrary to the natural law is morally unacceptable. Having said this, let us consider the use of condom in the conjugal act.

### 2.3.3 Use Of A Condom, Or Condomistic Intercourse

In order to perform Medically Assisted Procreation, another means used by doctors is the condom. This is used to collect the ejaculate or man's fertilizing fluid during the conjugal act. It is taken out of the vagina right after consummation of the sexual act, to allow the doctor to inject the sperm in the uterus of the woman.

When the use of technical means facilitates the conjugal act or assists it to attain its natural ends it can be morally licit. On the contrary when, in the example of a condom, this technical means takes the place of the conjugal act, it is morally illicit. In a conjugal act performed with the use of condom, procreation is reached indirectly. The act is itself unfruitful in the sense that the sperm has first to be retrieved from the vagina before being re-injected in the uterus.

In the same way we can say that this practice is immoral since there is no direct contact of the genital organs. The intimacy of the spouses is broken by an introduction of

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<sup>53</sup> Marshall, Morals, p. 58.

a foreign element, the condom, in the process. Condomistic intercourse makes the sexual act not to be a true marital act as ~~Thomas~~<sup>O'Donnell</sup> remarks:

"In this situation the sexual act between husband and wife is simply not marital intercourse. The husband does not ejaculate into his wife's vagina, but rather into a condom that at the moment happens to be in his wife's vagina. From a moral viewpoint this is simply not a marital act anymore than anal or oral copulation would be a marital act."<sup>54</sup>

Obviously, the means used, namely, masturbation, interrupted coitus, and condom to obtain the sperm in order to achieve assisted procreation are unnatural sex acts, hence immoral and they are to be condemned. The reason is that, as Gerald Kelly puts it,

"the psycho-physical process leading to sexual orgasm are used in such a way that the orgasm itself takes place outside of coitus. It is true that there is an appearance of coitus in condomistic and coitus interruptus, but it is only an appearance. The determining factor of true coitus is ejaculation into the vagina; and that factor is missing in all three procedures".<sup>55</sup>

## Conclusion

This chapter has been primarily concerned with the moral implications of technical advances in the area of Medically Assisted Procreation. This of course is not a question that admits to easy answers. A moral judgment of Medically Assisted Procreation cannot simply be drawn on the basis of criteria used to evaluate other medical practices. Our present analysis must be evaluated in reference to the dignity of the human person. The value of the procreative act is to be considered in line with the dignity and respect attached to the human person, who is created in the image of God,

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<sup>54</sup> O'Donnell, Medicine, p. 225.

<sup>55</sup> Kelly, Medico, p. 242.

and who is called to realize his vocation from God to the gift of love and the gift of life.<sup>56</sup> Pope John Paul II continues in this line as he stresses,

"At the origin of each human person there is a creative act of God: no man comes into existence by chance; he is always the result of the creative love of God. God's creative act is loving and since spouses are God's co-creators in the transmission of human life, it is appropriate for their life-begetting acts to be loving as well".<sup>57</sup>

The fact that this way of reproduction is characterized by the absence of sexual relations, the participation of a third party in inseminating, and the many manipulations involved in the case of In Vitro Fertilization, all these point to the immorality of the practice of Medically Assisted Procreation.

Our aim is not to condemn medical initiative, but to look at its legitimacy and set their limits in regard to the dignity of the human person. In the beginning we said that science and technology must be ordered at the service of humans. It is in this spirit that we tried, in this chapter, to point out some guidelines or criteria for a moral judgment of Medically Assisted Procreation.

At this point, let us now turn to our next chapter, which deals with the moral problem of selective abortion, and the position of the Church on some specific issues.

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<sup>56</sup> Smith, Introduction, p. 23

<sup>57</sup> Smith, Introduction, p. 24.

## Chapter III

### The Moral Problem of Selective Abortion, and The Position of The Church on Some Specific Cases

#### 3.0 Introduction

When we speak of selective abortion in this context, our focus is on the fate of embryos, which, during In Vitro Fertilization and Embryo Transfer are not transferred to the human uterus in order to result into human beings. Usually, during In Vitro Fertilization and Embryo Transfer, after the ova have been fertilized, there is always a great number of embryos and not all of them are needed. The number of embryos always surpasses the two, three, or four which are needed for transfer into the human uterus. Hence the remaining embryos serve for use in laboratories for scientific experimentations, or simply destroyed. The destruction, freezing, or the use in laboratory of human embryos, automatically raise moral concern since, according to Christian morality, these human embryos are of great value, hence worthy of respect. It is exactly this problem of the value of human embryos, which we will deal with in this chapter.

#### *3.1 The moral status of an embryo*

The principle of the moral status of an embryo is necessary in order to clarify the relation of physicians vis-à-vis the human embryo. If this status is ignored, there is a danger that the embryo will be considered as a simple tissue, and something of little importance to be used and misused, either for diagnostic, therapeutic, scientific or

commercial purposes. Bernard Haring saw the danger when the moral status of a human embryo is not respected. Thus, he warns:

"In a society where the right to manipulate not only things but also persons is loudly asserted, it is no great wonder that the human fetus is a main object of manipulation. Even its identity is often denied; it is called 'tissue' or 'genetic material', and considered as simply a part of the mother's womb, about which she can do as she likes"<sup>58</sup>

Therefore it can be deduced that, it is only when we acknowledge and affirm the moral status of the embryo that we can set limits for ourselves and for physicians who are involved in Medically Assisted Procreation, when dealing especially with human embryos.

From a moral point of view, a human embryo is a complete human being. It is an entity distinct from the mother who carries it, and it has the genetic potentiality which if placed under a favorable ecosystem, it becomes a child. It is therefore a human person to be respected and protected. This is in accord with the teaching of the Church, which says that life, once conceived must be protected with the utmost care, and that abortion and infanticide are abominable crimes.<sup>59</sup>

It has always been a concern for the Church to uphold the dignity of the human person, and the respect for human life. Thus, according to *Donum Vitae*, in matters concerning the respect for human life in its early stages, and the dignity of procreation, the Church insists on the respect that is due to human embryo and declares:

"From the time that the ovum is fertilized, a new life is begun which is neither that of the father nor of the mother; it is rather the life of a new human being with his own growth. It would never be made human if it was not human already. To this perpetual evidence...

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<sup>58</sup> Bernard Haring, Manipulation, Ethical boundaries of Medical, Behavioural & Genetic Manipulation, (Slough: St Paul Publications 1975), 97.

<sup>59</sup> O' Donnell, Medicine, 271.

modern genetic science brings valuable confirmation. It has demonstrated that, from the first instant, the programme is fixed as to what this living being will be: a man, this individual-man with his characteristic aspects already well determined. Right from fertilization is begun the adventure of a human life, and each of its great capacities require time... to find its place and to be in a position to act".<sup>60</sup>

It is also in this perspective that we have to understand and appreciate the status of embryos resulting from In Vitro Fertilization. Reverend Russell E. Smith says "human embryos obtained in vitro are human beings and subjects with rights: their dignity and right to life must be respected from the first moment of their existence. It is immoral to produce human embryos destined to be exploited as disposable biological material."<sup>61</sup> When the ovum has been fertilized, whether in the womb or in vitro, we get an "egg" with a real capacity to develop into a human being. In other words, it is a real human life which, by means of techniques is conceived through In Vitro Fertilization. Consequently, any kind of intervention, manipulation or experimentation carried out on these human embryos which is not aimed at their well being, is immoral and cannot be accepted. It is in this same line that, convinced of the identity and nature of the embryo as a human being in need for respect and protection that Thomas, O'Donnel affirms:

"Since the embryo must be treated as a person, it must also be defended in its integrity, tended and cared for, to the extent possible, in the same way as any other human being as far as medical assistance is concerned"<sup>62</sup>

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<sup>60</sup> Congregation for The Doctrine of Faith, *Donum Vitae*, I.1, 13.

<sup>61</sup> Reverend Russell E. Smith, "The Principles of Cooperation in Catholic Thought," in *The Fetal Tissue Issue*, ed. Peter J. Cataldo and Albert S. Morawczewski (Massachusetts: The Pope John XXIII Medical-Ethics Research Center, 1994), 90.

<sup>62</sup> O' Donnel, *Medicine*, 272.

### *3.2 Embryos freezing and experimentation*

For the various ends of Medically Assisted Procreation, different interventions, curative and therapeutic or not are carried upon human embryos. This is another practice, which raises moral concern, because as we already mentioned, a human embryo being a human person deserves to be treated with dignity and respect.

It is good to mention that curative and therapeutic interventions on human embryos are morally acceptable only when they respect the life and integrity of the embryo, when they are oriented towards its well being. And the instruction *Donum Vitae* adds:

"As with all medical interventions on patients, one must uphold as licit procedures carried out on human embryo which respect the life and integrity of the embryo and do not involve disproportionate risks for it but are directed towards its healing, the improvement of its condition of health, or its individual survival".<sup>63</sup>

In this same perspective, Pope John Paul II sets the legitimacy and criteria of these procedures in the following teaching where he states:

"A strictly therapeutic intervention whose explicit objective is the healing of various maladies such as those stemming from chromosomal defects will, in principle, be considered desirable, provided it is directed to the true promotion of the personal well-being of the individual without doing harm to his integrity or worsening his condition. Such an intervention would indeed fall within the logic of the Christian moral tradition".<sup>64</sup>

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<sup>63</sup> *Donum Vitae*, I.3, p. 15.

<sup>64</sup> *Donum Vitae*, I. 3, p.15.

From this point of view, it is clear that any intervention, which would lead to the destruction of an embryo, is immoral, and is to be considered as a crime and an abomination.

Embryos, which have been fertilized in Vitro, are frozen and kept alive before they are transferred. The practice of freezing embryos was encouraged after freezing of animal embryos, which proved successful. Since then, a number of human embryos has been frozen, thawed and transferred into receptive wombs. The ova can be obtained from a woman taking part in In Vitro Fertilization. Since hormonal stimulation before laparoscopy produces several mature eggs, some of the fertilized eggs are frozen and stored for later use if the first attempt does not succeed. In such a case the woman does not need to undergo another operation for extracting a ripe ovum from her ovaries.<sup>65</sup>

But these frozen embryos are always exposed to the danger of death. Apparently not all of them survive at the time when they are being defrosted in order to be transferred, and it seems, according to Andrew Varga, that the success rate of embryo transfer is still greater with unfrozen embryos than with frozen ones. This means that embryo freezing is an immoral practice, exposing the fetus to undue danger, thus undermining its rights.

Another issue of concern is the experiments that are carried out upon human embryos. We have already mentioned that from the great number of ova, which are fertilized in vitro, for instance, only a few are transferred to the uterus. The extra embryos

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<sup>65</sup> Varga, Issues, p. 106.

are used for various purposes, commercial, experimental, and even for research in order to improve the techniques of In Vitro Fertilization and Embryo Transfer. Though experimentation at the very first stages of the development of human being may seem acceptable, for the purpose of the progress of medical science, this can in no way be tolerated or approved from a moral point of view. In fact these embryos, which become an object of experiment are destined to die because they are not transferred to the uterus. Thomas O'Donnel warns about the danger of experimentation on human embryos, he emphasizes: "Experimentation on embryos and fetuses always involves the risks, and indeed in most cases it involves the certain expectation of harm to their physical integrity and even their death"<sup>66</sup> This happens when the value of the human embryo is lost sight of, and the advance of science is put to the forefront. In fact, no objective, no matter how noble it is in itself, such as foreseeable advantage to science, to other human beings or to society, can in any way justify experimentation on living human embryos or fetuses, whether viable or not, either inside or outside the mother's womb.<sup>67</sup>

The results of all these considerations is that any kind of research or experimentation carried out on human embryo would be illicit, if they are not therapeutic and curative, and meant for the improvement of its condition, should it be in any danger of death or destruction. Reverend Russell E. Smith brings more clarification to this point as he says:

"Medical research must refrain from operations on live embryos, unless there is a moral certainty of not causing harm to the life or integrity of the unborn child and the mother, and on condition that the parents have given their free and informed consent to the procedure. It follows that all research, even when limited to the simple observation of the embryo, would

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<sup>66</sup> O'Donnel, *Medicine*, p.275.

<sup>67</sup> O'Donnel, *Medicine*, p.274.

become illicit were it to involve risk to the embryo's physical integrity or life by reason of the methods used or the effects induced"<sup>68</sup>

The principle guiding us in our investigation at this point, is the acknowledgement of the human embryo as a full and complete human person, a person with fundamental rights. We cannot tamper with the dignity and integrity of the human embryo without at the same time tampering with the dignity and integrity of the human person. Therefore, to use human embryos as an object of experimentation constitutes a crime against their dignity as human beings having the right to the same respect that is due to the child that is already born and to every human person. For this reason, respect for the dignity of the human person excludes all experimental manipulations or exploitations of the human embryo. The practice of keeping embryos alive in vivo or in vitro for experimental or commercial purposes is totally opposed to the human dignity.

At this juncture, let us see what the Church says on some specific cases concerning the Practice of Medically Assisted Procreation.

### *3.3 The Position of the Church on Some Specific Cases.*

Medically Assisted Procreation, under its various forms as we saw it, is morally unacceptable. We have dwelt with this in our previous chapters. On this point we will limit ourselves to the cases of Artificial Insemination with Husband, and Artificial Insemination with Donor, since from a moral point of view, a real responsible procreation must be the fruit of marriage. The Church says no to any other way of transmitting life outside marriage, and through the appropriate conjugal acts.

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<sup>68</sup> Smith, *Principles*, 88-89.

### 3.3.1 Artificial Insemination with Husband

Many moralists see Artificial Insemination with the husband a good alternative to prolong the sexual life of a couple, especially when it is the only way to beget a child. It is true that this practice helps to remedy a situation of suffering of a sterile couple. But this practice, as good as it may appear, has many consequences, legal and psychological, as well as moral. The man who accepts to realize a fertilization without a normal conjugal act feels diminished in his personality and in his sexual power and capability. In the same way, the woman who accepts that a technical device be introduced into her genital organs, experiences a sentiment of humiliation. Both the man and the woman are deprived of their freedom and of their personality. It also follows that the physician plays the role of the husband because by injecting the sperm by means of a syringe, he accomplishes the act, which naturally belongs to the husband. On this point the Church strongly affirms: "Homologous Artificial Insemination within marriage cannot be admitted except for those cases in which the technical means is not a substitute for the conjugal act but serves to facilitate and to help so that the act attains its natural purpose".<sup>69</sup>

This practice dissociates the two meanings of the conjugal act. It also uses masturbation to obtain the sperm, which, as we already mentioned, is a condemned behavior. In this line, the teaching of the Church stresses: "It lacks the sexual relationship called for by the moral order, namely the relationship which realizes the full sense of mutual self-giving and human procreation in the context of true love".<sup>70</sup> The Church totally rejects Homologous Artificial Insemination, and teaches:

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<sup>69</sup> Catholic International, May 2001 ., ed., s.v. "Donum Vitae." 105.

<sup>70</sup> Catholic International, 105.

"In its natural structure, the conjugal act is a personal action, a simultaneous and immediate cooperation on the part of the husband and wife, which by the very nature of the agents and the proper nature of the act is the expression of the natural gift which, according to the word of scripture, brings about union in one flesh".<sup>71</sup>

### 3.3.2 Artificial Insemination with Donor

The immorality of Artificial Insemination with Donor comes first of all from the fact that it dissociates the two meanings of the conjugal act, and more so it introduces a third party in the marriage. Human conception, in this case, is achieved through the fusion of gametes of at least one donor other than the spouses in marriage. Hence it becomes contrary to the unity of marriage, to the dignity of the spouses, to the vocation proper to parents, and to the child's right to be conceived and brought into the world in marriage, and from marriage<sup>72</sup>

Previously we emphasized the primacy of the marriage and its indissoluble unity as the proper setting worthy of truly responsible procreation. Time and again we stressed that every human being is always to be accepted as a gift and a blessing from God. This is precisely what the teaching of the Church aims at in the following assertion: "The procreation of a new person, where 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 their fidelity".<sup>73</sup> The teaching of the Magisterium rejects Heterologous Artificial insemination as a morally unacceptable practice and clearly states:

"Fertilization of a married woman with the sperm of a donor different from her husband and fertilization with the husband's sperm of an ovum not coming from his wife are morally illicit.

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<sup>71</sup> Catholic International, 105.

<sup>72</sup> Donum Vitae, II.2, 24.

<sup>73</sup> Catholic International, 103.

Furthermore, the artificial fertilization of a woman who is unmarried or a widow, whoever the donor may be, cannot be morally justified".<sup>74</sup>

From what has been said, it is clear that the Church is opposed to any kind of Medically Assisted Procreation. However the Church is also aware of the suffering of couples who are unable to beget children due to sterility, and she urges the community of believers to be understanding and supportive vis-à-vis those who are unable to fulfill their legitimate aspiration to motherhood and fatherhood.<sup>75</sup>

Finally, as a way to remedy this problem, the Church suggests to infertile couples some alternatives, which can be of help for humanity. She says:

"Even when procreation is not possible, conjugal life does not for this reason lose its value. Physical sterility in fact can be for spouses the occasion for other important services to the life of the human person, for example, adoption, various forms of educational works, and assistance to other families and to the poor or handicapped children".<sup>76</sup>

These alternatives offered by the Church, though not a real solution to sterility, have the advantage of not interfering with the conjugal life of the couple. No third party is present in the marriage, contrary to Medically Assisted Procreation. The infertile couple can live happily and find fulfillment in these good services that they are able to render to humanity. In the case of adoption, for example, the relation and the conjugal intimacy is safeguarded, and the adopted child is a complete substitute to a procreation that is impossible. Of course, the filiation here is only moral, but it offers the same advantages as the biological filiation. The two spouses know well that the child is not their<sup>S</sup> but they can love him or her as theirs, because their mutual love for one another is not affected by

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<sup>74</sup> Donum Vitae, II.2, 23.

<sup>75</sup> Donum Vitae, 34.

<sup>76</sup> Donum Vitae, p. 34.

the intervention of a third party in their midst, as it would be the case in Medically Assisted Procreation.

The Church is always concerned with the dignity of the human person, and holds that a true responsible procreation is not to be separated from the exclusive natural conjugal act.

## **Conclusion**

In this chapter, our attention focused on the problem of selective abortion, the moral status of a human embryo, and on the position of the Church on some specific issues related to assisted procreation.

Firstly speaking of selective abortion we saw that, of the many eggs which are fertilized during Artificial Insemination and Embryo Transfer, only a few are transferred into the human uterus in order to grow into human persons. The remaining eggs are either destroyed, or frozen and kept for future use, or they become simply objects of experimentation in laboratories. Human embryos however deserve a proper treatment, since from a moral point of view, they are of great value because they are full and complete human beings to be respected and protected. They have all the capacities to develop as human persons. They are seen as having the same status as a child or an adult, by virtue of their potential for human life. For this reason, to disrespect them, and to endanger their lives by carrying out experiments on them, which are not meant for their good, is immoral and a condemnable practice.

Secondly we tried to outline the position of the Church concerning the practice of Artificial Insemination with Donor, and that of Artificial Insemination with Husband. These practices are, according to the teaching of the Magisterium, immoral because they

do not uphold the dignity of marriage and respect for human procreation. The Church is uncompromising of the necessity of procreation in marriage, but always through the natural acts of intercourse. Hence she rejects all other forms of procreation, which stand in contradiction to this.

## GENERAL CONCLUSION

At the end of our investigation, let us have a brief look on the different points; namely the fundamental facts of Medically Assisted Procreation, the moral judgment of Medically Assisted Procreation, and finally the moral problem of selective abortion and the position of the Church on some specific cases.

The first chapter, the fundamental facts of Medically Assisted Procreation, aimed at showing first of all the different techniques involved in medically assisted procreation. Before analyzing them we gave a brief history of artificial procreation. Here we saw that sterility has always been a problem for humans throughout the ages, and this has prompted doctors to seek ways to remedy this problem. We saw that as early as the fourteen Century, the technique of artificial insemination was already being used in animal husbandry before it extended to humans.

After this we looked at the reasons, motivations and causes of Medically Assisted Procreation. We pointed out that the main cause is the desire for a child, followed by the fight against sterility. Humans have the basic desire to give life to other humans like themselves. It is deep in the nature of a person to want to prolong him or herself and his or her species through time by begetting children. Naturally, it can be frustrating if one spouse comes to realize that they cannot fulfill this task due to sterility or any other physical or physiological anomaly. Hence they resort to Medically Assisted Procreation.

This led us to the different forms of medically assisted procreation. They can be classified in two main categories: Artificial insemination, In Vitro Fertilization and

Embryo Transfer. These can be either heterologous or homologous, depending on whether they are carried out in or outside marriage. We also analyzed the GIFT (Gamete Intra Fallopian Transfer) or LTOT (Low Tubal Ovum Transfer), as another practice through which procreation is possible. Finally we discovered that nowadays, through the technique of cloning it is possible to produce individuals who are genetically identical.

For sure all these techniques are a proof of great achievements of science, and they are a clear sign of real progress in biomedical sciences. However, from a moral point of view they are of doubtful appreciation and morally dubious due to the manipulation they impose on the human person and human procreation. Speaking of the moral judgment of Medically Assisted Procreation, we first of all set the criteria for its moral judgment. These criteria are rooted in the dignity of the human person, and the way of transmitting life in marriage.

The immorality of Medically Assisted Procreation is due to the fact that it dissociates the two meanings of the conjugal act: unitive and procreation. It also brings disorder in the filiation system of the family. Also the way the male's seed is collected and introduced into the woman's genital organs is a practice that disrespects the dignity of the sexual act and breaks its unitive dimension.

In our third and last chapter we looked at the moral status of human embryos, and the fate of extra embryos resulting from In Vitro Fertilization. We emphasized that human embryos, whether in the womb or in Vitro have the capacity to develop into children and adult persons. The Church teaches that they are complete human beings to be respected and whose dignity is to be safeguarded. In this way all interventions or

experiments carried out upon them, which are not aimed at their well-being, are to be condemned as immoral.

We finally presented the position of the Church on some specific cases. The Church is opposed to any form of Medically Assisted Procreation no matter what their reasons and motivations are. The Church upholds marriage as the proper setting where true and responsible begetting of children is to take place. She holds that true and responsible procreation is not to be separated from the exclusive conjugal act.

Medically Assisted Procreation is a wide and broad topic. We do not hope to have said all about it. However, we hope to have clarified its main aspects, and to have opened doors to those who after us would like to deepen their study of Medically Assisted Procreation.

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