EDITORIAL

RICH DISCUSSION ABOUT REPRODUCTIVE AUTONOMY

Being able to decide whether or how to reproduce based on one’s own values is crucial to people’s well-being. In other words, having reproductive autonomy is crucial. The authors here discuss what it means to protect reproductive autonomy, what sort of policies will protect it and to what degree society ought to protect it. Many of the authors challenge common conceptions of reproductive autonomy that have misdirected genuine efforts to defend this freedom.

The following are specific themes that appear in the work of multiple authors:

Autonomy and Options: a common defence of new reproductive practices is that they increase people’s options and therefore increase their autonomy. As some of the authors emphasize, however, having more options does not necessarily mean having more autonomy. The act of expanding options can undermine autonomy by making choices ‘unproductively difficult’ (Kukla) or by making certain ‘choices’ irresistible (where the expanded options include an offer that the patient simply cannot refuse). It matters how health professionals present options and how socio-political norms influence our perception of them. It matters whether the available options cohere with patients’ values, and not simply how many options there are. The authors who deal with these issues directly are Kukla et al., Donchin, and Seavilleklein. They apply their insights about autonomy and options to the following issues respectively: ‘caesarean delivery upon maternal request’ (CDMR), conflicts over the disposition of frozen embryos, and prenatal screening.

‘Relational Autonomy’: during the past decade or more, feminists have promoted the idea of ‘relational autonomy’ as a replacement for autonomy traditionally understood. But people sometimes misinterpret ‘relational autonomy’. My hope is that this special issue will put an end to confusion surrounding the concept. A number of the contributors give clear articulations of relational autonomy (Goering, Donchin, Seavilleklein), and one even describes strong and weak versions of the concept (Donchin). These authors claim that we can only understand what it means to protect reproductive autonomy if we understand autonomy relationally: roughly, as a phenomenon that exists only in certain kinds of socio-political environments.

What are matters of reproductive autonomy? When people think about reproductive autonomy, they typically focus on what happens before or during pregnancy. Kukla et al. encourage us to ‘find autonomy in birth,’ and think carefully about birthing options, especially CDMR. Goering introduces the concept of ‘postnatal reproductive autonomy’ and explains how reproductive health professionals, especially those in the NICU, can respect the autonomy of new parents.

Practices that threaten or enhance reproductive autonomy: many of the authors emphasize that there is no simple answer to whether certain reproductive practices threaten or enhance reproductive autonomy. For example, Parks claims that whether ART is liberating or oppressive depends on how it is ‘taken up within’ a particular cultural context. She gives a radical feminist position on ART that is contextualist in nature. Harwood is skeptical about whether egg freezing ‘as insurance’ against age-related infertility’ would truly promote women’s reproductive autonomy, although she does not deny that it could do so, under the right conditions. Goold & Savulescu write on the very same practice but are considerably less skeptical about it. They argue that women would benefit from what they call ‘social egg freezing’; in particular, women would enjoy more equality with men because of it.

Limits on protecting reproductive autonomy: exercising reproductive autonomy can deprive other people of their reproductive autonomy or harm them more generally. Donchin focuses on the case of Natalie Evans, whose former partner withdrew his consent to the reproductive use of embryos created using his gametes and hers. Evans wanted the chance to be impregnated with these embryos, so she took him to court, but lost. To be clear, she wanted but was denied the chance to have any biological children, for immediately after the embryos were created, her ovaries were removed. Donchin speaks to those who believe that Evans’s reproductive autonomy deserved more consideration than her ex-partner’s and that the legal outcome of her case was unfair.

DiSilvestro discusses whether bringing people into existence with the help of reproductive technologies or without the help of genetic tests can wrong them, even though they would not exist were it not for the very acts or omissions that are meant to have wronged them. DiSilvestro explains how some quite compelling attempts at solving this problem (the ‘non-identity problem’) do not succeed ultimately because they generate a new problem:
the ‘non-person problem.’ He offers a way out of the non-person problem, however, and in doing so, develops an account of persons that is radical, yet of interest to those who believe that many non-rational, non-autonomous human beings are persons.

This issue of *Bioethics* is large and rich in content. We had many wonderful submissions and the authors were diligent in responding to comments. I would like to thank them, along with Ruth Chadwick and Udo Schüklenk who gave me some very helpful advice. Clancy Pegg was a joy to work with; I would not have known that this special issue was her first as managing editor of *Bioethics*. I am very grateful to the reviewers for this special issue. Some of them were especially generous with their time, agreeing to review papers more than once in a short time frame and giving extensive comments for authors. Many young researchers benefited from the comments they received and a number of them had revised papers accepted as a result.

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