

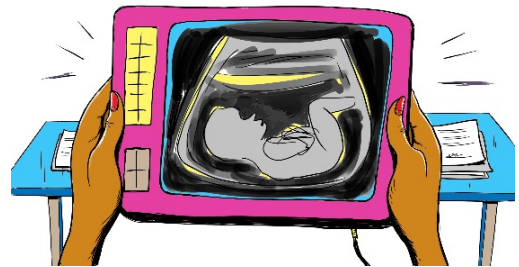
## ***Prenatal Diagnosis & Parental Choice***

In the United States, many citizens agree that the government may impose limits on the freedom of individuals when individuals interfere with the rights of others, but the extent of these limits is often a topic of debate. Among the most debated of bioethical issues is the issue of abortion, which hinges on whether the fetus is a person with rights, notably the right to life.

In conjunction with the legal right to abortion affirmed in the Supreme Court decision in *Roe v. Wade*, the issue of prenatal diagnosis has led to decisions by pregnant women to pursue abortion where prenatal testing has revealed genetic abnormalities in fetuses. However, this practice has met with recent opposition in the wake of research showing that between 60 and 90 percent of fetal diagnoses of Down syndrome have led to abortion. In 2015, legislation was introduced in the Ohio Legislature that would make it illegal to terminate a pregnancy for the purpose of avoiding giving birth to a baby with Down syndrome.

Those opposed to this legislation have noted that such a law would violate the *Roe v. Wade* decision by the Supreme Court, and that laws based on intention or motivation to terminate would be unenforceable. “This is interference with a medical decision following a complicated diagnosis,” according to Kellie Copeland, executive director of NARAL Pro-Choice Ohio, “Not knowing the family and the circumstances, the legislature can’t possibly take into account all the factors involved.”

Supporters of the legislation have described this as a way to limit the number of abortions in the state and protect babies born with disabilities. Mike Gonidakis, president of Ohio Right to Life, stated, “We all want to be born perfect, but none of us are, and everyone has a right to live, perfect or not.” Rachel Mullen, a member of the Cuyahoga County chapter of Ohio Right to Life, said in an interview, “we need this bill so that [babies with Down syndrome] can be born, and not culled.”



### **Teaching Note:**

Bioethics examines the moral dimensions surrounding the use of medical technology, raising questions such as: Should all scientific advances in medicine be made available to all? Do some advances conflict with society’s values and morals? What role should the government play in the moral decision-making of individuals insofar and with respect to limiting or expanding choices available? These are broader questions to keep in mind while reading and discussing this case study.

**Discussion Questions:**

1. According to those opposing the legislation, what harm is done by limiting women's freedom to terminate a pregnancy? According to supporters of the legislation, what is the harm done by not limiting women's freedom to terminate a pregnancy?
2. Who are all of the moral agents in this case? Who are the subjects of moral worth? Explain your reasoning.
3. Since *Roe v. Wade* holds that first-trimester abortions are legal, is it ethically permissible to limit the freedom of women who do not wish to bear babies with birth defects if the diagnosis and the procedure take place in the first trimester? Why or why not?
4. If it is legal to abort babies with disabilities like Down syndrome, what message does this convey about the value that society places on the lives of persons with disabilities?
5. If the Ohio Legislature decides to criminalize abortion in cases where the motivation for abortion is a prenatal diagnosis of Down syndrome, does the Legislature have an ethical responsibility to ensure that poor families are not driven into bankruptcy by the high medical and educational costs of raising children with disabilities? Why or why not?
6. Should physicians be required to divulge the motivation for terminating a pregnancy? Do you think this is an ethically defensible reason to breach doctor-patient confidentiality? Explain your reasoning.
7. Should parents have the freedom to decide whether to abort for other reasons, such as the discovery that the fetus will be born deaf or diabetic? In a free society, should the government limit the reproductive options of families who will be left with a financial, emotional, and physical burden as a result? Explain.

**Resources:**

Prenatal diagnosis and selective abortion: a challenge to practice and policy

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1508970/>

Baby conceived to provide cell transplant for his dying sister

<http://www.nytimes.com/2000/10/04/science/04BLOO.html>

The problem with an almost-perfect genetic world

<http://www.nytimes.com/2005/11/20/weekinreview/the-problem-with-an-almostperfect-genetic-world.html>

Ohio bill would ban abortion if Down syndrome is reason

<http://www.nytimes.com/2015/08/23/us/ohio-bill-would-ban-abortion-if-down-syndrome-is-reason.html>

First-Trimester or Second-Trimester Screening, or Both, for Down's Syndrome

<http://www.nejm.org/doi/full/10.1056/NEJMoa043693>

Prenatal diagnosis of Down syndrome: a systematic review of termination rates (1995-2011)

<http://onlinelibrary.wiley.com/doi/10.1002/pd.2910/abstract>

Ethics Questions Arise as Genetic Testing of Embryos Increases

<http://www.nytimes.com/2014/02/04/health/ethics-questions-arise-as-genetic-testing-of-embryos-increases.html>

Wanting babies like themselves, some parents choose genetic defects

<http://news.blogs.nytimes.com/2006/12/05/wanting-babies-like-themselves-some-parents-choose-genetic-defects/comment-page-6/>

Prenatal whole-genome sequencing — is the quest to know a fetus's future ethical?

<http://www.nejm.org/doi/full/10.1056/NEJMp1215536>

**Author:**

Mitch Sudolsky, MSSW, LCSW

School of Social Work

The University of Texas at Austin