

Imagine a world... where ectogenesis isn't needed to eliminate social and economic barriers for women

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We can imagine a world in which ectogenesis provides a safe gestating space that eliminates maternal morbidity and mortality while maximising healthy outcomes for babies. In this world, women, no longer physically—and visibly—pregnant, are no longer economically, socially or physically disadvantaged due to the potential for pregnancy and birth. Because everyone can access the same technology, women are able to work without fear of pregnancy-related discrimination or restrictions, and health disparities among individuals in gestation and birth based on socioeconomic status are eliminated. This imagining allows us to explore the ethical and social underpinnings of such a world, and consider how to achieve it in our current paradigm. Having explored the freedom and equality that is possible in an ideal hypothetical where all have equal access to such technologies, we can now imagine that same world without ectogenesis: women, no longer economically, socially or physically disadvantaged due to pregnancy and birth, despite still becoming pregnant. Such is the potential political perspective and provocation that can be spurred on by discussion of ectogenesis.

As Cavaliere argues, the technological reality of ectogenesis may not achieve the freedom and equality that some claim it would. Instead, this technology should be placed into a broader societal context and conceptualised in terms of advancing a political perspective that 'engage[s] with the risks and burdens of pregnancy and childbirth, as well the unfair distribution of childrearing responsibilities between men and women'.¹ The problem our society faces is not pregnancy, but the social and political structures that disadvantage women who gestate and/or parent. The solution to the problem, therefore, cannot be in the elimination of pregnancy, but in the elimination of the oppressive structures that work against women.

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However, even the use of ectogenesis as a theoretical tool to provoke change still runs the risk of centring these problems in women's gestation, rather than in the broader social and political context. Do we need a proposition as wild as the total elimination of biological gestation to demand 'better medical and social services for gestating women; a decrease in the medical hazards associated with gestation and childbirth; better working (and living) conditions for future mothers, gestating mothers, mothers and women more generally; and a true redistribution of the burdens and responsibilities of social reproduction'?¹ This imagining can help to highlight what is wrong, and point to what needs to improve—but it doesn't give us any guidance on how to get there.

What about this world in which women are not primarily responsible for physical and social reproduction? Having the option to avoid in utero gestation may inadvertently become a duty to do so, and as Cavaliere points out could 'open the door to increased control and pressure to use ectogenesis'. If ectogenesis is able to eliminate issues of maternal morbidity and mortality and increase healthy outcomes for babies, then those who choose to gestate, especially those with higher risk factors, may be stigmatised or disadvantaged. Furthermore, if any negative health outcomes do result, these women may be blamed for choosing gestation rather than ectogenesis. Socially, women who want to experience pregnancy and childbirth may be ostracised for their choice to gestate. Even in a society in which the political perspective values a woman-centred approach to reproduction, centring the perspective on a world without gestation may paradoxically devalue an experience in which many women may still find 'meaning and self-fulfilment'.

Allowing a woman to have a child without being pregnant may help to achieve 'a true redistribution of the burdens and responsibilities of social reproduction', but relying on the notion

of avoidance of pregnancy as the foundation for greater equality in reproductive labour works to devalue reproductive work as a whole.¹ In this paradigm, it is still only *through* the avoidance of pregnancy that equality and the shift in political perspective are achieved, thus perpetuating the stigma associated with pregnancy and birth.

Finally, Cavaliere rightly argues that individuals with few resources will still likely be unable to access such technologies, further maintaining disparities among gestators with different socioeconomic statuses. She is correct that we need a 'woman-centred reproductive agenda that makes visible the needs of all women, particularly poor women and women of colour', but we need more than the excitement of technological advancement to demand better for gestators. We need the painful realisation that what stands between our current reality and this ideal is not a lack of technology to fix the problem of pregnancy, but a failure in political and social support for all who parent.

Ultimately, Cavaliere is correct that what is needed is a shift in how we view and value the needs and responsibilities of women, particularly surrounding gestation and birth. It is important to talk theoretically about ectogenesis and engage in the thought experiment about how the use of such technology could impact women's lives so broadly. But it seems the value of ectogenesis is limited even in its ability to advance this political perspective. Let's imagine a world in which pregnancy did not disadvantage women socially, physically and economically, and work to bring about that change. Perhaps this technology can be a tool we can use to improve outcomes once this political and social shift occurs, but this shift cannot happen until we imagine that such outcomes are possible regardless of whether a woman is gestating.

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