

WOMEN AND BIOPOLITICS

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WOMEN AND AUTHORITY

Women make up the majority of the population. Although they assume numerous social responsibilities, their presence is limited in political, financial, cultural and religious centres of decision-making.

Women are finding it increasingly important to intervene. One may wonder if their presence will change things very much. This is difficult to assess, since presently there are few women at such a level. Their isolated presence leaves them in a male-modelled society.

Following certain examples, one can believe that women could deprive authority of its sanctity, as well as of the methods which exercise it. Authority is a responsibility like any other. It must be converted into service. The decorum maintains a distance between those who exercise power and those who do not. To desanctify authority and its decorum is a trend of associating people with those interested in the elaboration of decisions.

WOMEN AND LABOUR

The situation of women differs according to world regions. In western Europe the number of women entering the labour market has increased considerably during the last 30 years. They are also affected by unemployment more extensively than men. This situation, linked with other phenomena, poses the question of the direction of evolution in our society based on labour. Labour has always existed but has not affected equally all levels of society. There were periods when one did not work because of sufficient revenues and this was highly appreciated. Later, not to work and be idle had negative connotations.

In western society, during the 18th and 19th centuries, a separation between the location of work and family life was realised due to the expansion of industry.

Under the influence of the development of manifestations and later of services, western society has been structured on the basis of the organisation of labour. Social rights of persons and families were derived from past exercised activities. The evolution of production means and the new distribution of labour on a worldwide scale posed the question of the places of labour in personal, family and social life. I do not have a ready answer but it seems that we need to think of the future of societies when the time spent working will represent an increasingly reduced part in relation to the period of training, and to the prolongation of human life.

Today, in western society, working time corresponds to half of that in the 19th century. In the West, women search for social insertion through work and demand positive measures that will dissolve all factors retarding their dues to posts of importance. They also hope for a greater repartition of the roles in their families. It is no longer normal for women to be deprived of professional insertion in all areas of education. Both women and men need to contemplate the next step which will provide more valuable time for all.

WOMEN AND PROCREATION

In addition to the problems of social organisation, questions are raised as to the development of reproduction techniques.

A study was conducted in 1987 with the participation of the association members of the CNFB pluralist council. Unanimity was voiced for the consideration of human embryos as potential human beings. It was followed by the recommendation of the Council of Europe, which pronounced the prohibition of "all creation of human embryos by fertilisation in vitro for research, while they are alive or following their death".

The parliamentary assembly of the Twelve also pronounced a decision against the research on "living" human embryos and has deemed necessary the definition of the biological status of such embryos.

On the contrary, at the level of the European Medical Research Council (EMAC) a recent declaration pleaded for the pursuit of such research leading to the development of the pre-embryo concept, an embryo less than 14 days old, in order to increase the efficiency of the Fivette in relation to the therapy of sterility. This different view indicates that the embryonic status is the essence of the bio-ethics problematics.

The fact that only 15 per cent of the treated cases by this method are sterile couples poses the problem of the medicalisation of reproduction. This situation may risk the existing consensus for accepting the Fivette as a treatment for sterility in a stable heterosexual couple.

The results of this study that I have previously mentioned, reject formally the utilisation of the Fivette for non-stable and homosexual couples.

Women ask to be informed and wish to obtain guarantees on:

- the number of removed ovocytes of fertilised ovocytes of reimplanted embryos, destroyed or frozen
- the identity of the reimplanted embryos of the ovule and the sperms united during fertilisation
- the realised research on the reimplanted embryo on the frozen embryo.

Scientists are held responsible for deontological regulations. Never have the laboratories been charged with so much mystery. But who is to judge the development of the medical sciences?

With reference to this question no colloquy has been able to reach a consensus, since the balance oscillates constantly from the social regulation to the auto-regulation of the medical sciences. In the United States the scientists themselves have imposed a moratorium on DNA.

The ghost of Frankenstein is regularly agitated - a manipulated being so grotesque that the genetic code for reproduction will be lost by over-manipulation leading to the extinction of the human species.

As a parliamentarian, I do not believe that a legislator can be authorised to interfere systematically in a field where scientific facts are particularly evolving with a risk to propose texts that will be rapidly outdated and deformed. In relation to the law on the removal of organs, for instance, the legislator has not defined the criteria of death. It has appeared more just to declare that the diagnosis of death should be based on the most recent scientific techniques.

Should we have confidence in the conscience of the researcher or the medical specialist and his professional deontology?

The elaboration of a European medical ethics guide will be desirable. It is, in effect, at least on the European level, that we can confront our reflections on bio-ethics since the challenge concerns not so much a country as a civilisation. In embryo research the medical specialists are themselves extremely divided. At the 22nd Conference of the Ministers in Charge of Domestic Affairs in the Council of Europe and in Finland, as well as of the observers of the Holy Seat and the Commission of the European Communities (CEE), held on May 21 1987, the final committee realised a certain number of convergences and the following interesting text was adopted in unanimity: "Realising that the open debate on artificial procreation in the general public, as well as among the specialists, is still far from being conclusive, the Ministers have, however, estimated that the time has come not to let the determination of the code of ethics and the directives of judicial decisions in the hands of the professionals." And they added: "in certain cases, only intervention on the part of legislation can bring the necessary guarantees to reassure, in the spirit of a state of law, respect for some fundamental principles."

Should we let death clarify things? We must consider, firstly, the fact that people's awareness is still far from being equal and, secondly, that these problems are not yet mature enough.

What virtuous role will the committees on ethics play in the future? Do we only need local committees with identical functions and composition? Do we need a case of mobilisation?

If the sciences of life and health have progressed rapidly over several years, reflection on bio-ethics has progressed at an enormous pace. Following two important symposiums, the Belgian Government declared its willingness to institute a scientific council on bio-medical ethics, whose composition and competence would be strictly defined by Parliament, taking into account the existing philosophical concepts. The mission of this council will be to inform both Government and Parliament of its proceedings.

My proposition differs from those given at the Belgian Parliament in that it associates personalities who belong to principal, spiritual or philosophical families with other qualified personalities, selected for their competence and interest in these problems, among them are four members of the National Council of Belgian Women.

The main idea is to further catalyse reflection in our country, as well as to associate people as tightly as possible to the moral questions posed through the brilliant advances in life and health sciences.

With our friends from Quebec, we pose the following questions:

- will the fragmentation of maternity affect the identity of women and their relations with children?
- do the new reproduction techniques risk to extremely medicalise maternity?
- does not the desire for a child take, in certain cases, the form of an unjustified impulsion?
- does one have the right to create "perfect children" according to our own criteria?
- should not the freezing of embryos and various foetal therapies stir a debate on the rights of the embryos and foetus?

We also ask for particular attention to be paid to the commercial aspects of these techniques and specifically to the trade of embryos.

In March 1988, I proposed a law aiming to assure the transference of centres practising artificial insemination and Fivette. It seems to me that bio-ethics will become more profound in its content if it is provided with complete information on techniques and their results and costs, similar to that which exists in France.

I know that discussion on these issues will prove difficult, even turbulent. It will be the same with abortion. For more than ten years, the Belgian Parliament has discussed the various Bills on abortion without result. The Government has left this question to the appreciation of a very divided Parliament. Practically, there is a consensus on practising abortion in certain exceptional circumstances, but there is no actual agreement on the definition of such a situation.

For some, it is a matter of danger, for others it is a matter of social circumstances. The following are suggested:

- better education of the general population, especially adolescents, in the domains of:
 - the accentuation of human relations
 - the respect for other people and the sense of responsibility
 - initial sexual education, integrated in a realistic manner in the school as well as in the family. The surroundings should be pre-defined for this task.
- an arrangement of births by a larger recourse to methods of contraception
- a real support of pregnant women in difficulties.

WOMEN AND DEATH

In terms of existence, women want to distinguish the therapeutic incitation from the adherence to heavy therapeutic methods and apparently complex attitudes from real comfort which relieves a person about to die. Generally, they reject active euthanasia (direct control to cause death in order to alleviate suffering) and are positive about passive euthanasia (deliberate abstention, according to the patient's free choice), or his/her consent to some possible treatment, accompanied by ortho euthanasia (set of exclusively palliative and non-curative comfort techniques). Simultaneously, we honour medical progress but estimate that a therapeutic activism is not always reassuring.

WOMEN AND PREVENTION

With regard to public health, we pay equal attention to both prevention and information.

Prevention

I am thinking of an organised campaign against AIDS but also about the fact that some analgesics which are found at the rate of 30 per cent of renal dialysed in my country, should not be allowed on the free market. I am also thinking of some complications of infections, diseases, or sexually transmitted diseases which constitute one of the causes of sterility in 30 per cent of artificial procreation indications.

I am surprised by the fact that in spite of the seriousness of the consequences of sexually transmissible diseases, no-one thinks of applying a prevention program.

Information

The information campaign for the donation of organs has been well received. AIDS will never cease to concern us, but information is important since it is a matter of global fight.

We do not possess enough time to develop all the centres of interest that still attract the attention of women: education, financial planning, economic development, research for peace, disarmament, nuclear security, worldwide famine, relations between people, the respect of human rights. Finally, from all this, another, more fundamental, question is posed, for example: for which values is our society ready to fight?

The last revision of the Belgian Constitution added an urgent reference to the rights and freedom guaranteed by the European Convention on

the protection of fundamental rights and freedom, in particular, the right of each person to be respected as a physical and moral integrity, as well as to the recognition of his existence by others. It would be a serious situation if all interpersonal relations were reduced to a simple social utility and became isolated from any feeling of love.

I think that we should all agree on the singularity of each human being. Medicine by itself tends to individualise this practice.

Andre Gide affirmed that each one of us is the most irreplaceable of all beings. This is an affirmation that many philosophies and religions share. Under this perspective, life is a gift and not a duty. Therefore, it is quite important to define life as a precious deposit and allow for it to be fruitful in all dimensions in relation to other people in this common world and especially in relation to God. Life is not reduced to the rational. On the contrary, it is reasonable to believe that in developing the capacity for being, difficulties, distortion, values and disorders are unavoidable. They are part of the fragility of the human condition that we are unable to make disappear.

In order to give to every single person or social group the best conditions for development, young and old, men and women, have a responsibility to work according to their own particular talents.

We all desire happiness. Economic, social, cultural, financial or political factors will never produce it. But they can greatly contribute to create favourable conditions. Only philosophical, theological and spiritual dimensions can blink light, significance, sense, a content and wisdom, in short, a life in its most flourishing, dynamic dimensions, able to overpass any confrontation.

Senator Dr. **Huberte Hanquet**, studied philosophy and religion, political and social sciences. Since 1984, she has been President of the National Council of Belgian Women and is a member of the International Sociology, Gerontology and Demographic Society. She has worked on different committees of the Parliament of Belgium with special dedication to programmes concerning the role of women in modern society, as well as the international co-operation on health and social security. She has developed an outstanding parliamentary action and has participated in numerous conferences and also published various articles on feminism, health and bio-ethics.