Abortion and Religious Freedom
(Continued from Page Two)

Second, Jaffe has committed the rather common error of supposing that the Church holds an official position regarding the time of ensoulment. The most recent official statement on abortion, the "Declaration on Procur ed Abortion" issued by the Congregation for the Doctrine of the Faith (1974), reads in part:

This declaration expressly leaves aside the question of the moment when the spiritual soul is infused. There is not a unanimous tradition on this point and authors are as yet in disagreement. For some it dates from the first instance, for others it could at least precede implementation. (note #19)

The Church claims no special competence to decide the issue. What the Church does teach is the fundamental teaching of the Church here is by no means a position which "can only be based on religious values, or metaphysical values that are religious in nature if not in expression." Rather, it is quite obviously an exclusivistic moral principle to the effect that in questions of reasonable doubt it is morally unjustified to act on the assumption that what is being killed is not a person. This teaching does not even appear to be based on any metaphysical doctrine regarding the time of ensoulment.

Jaffe's confusion, and it is a common one, results from the mistaken assumption that the only reason one can have for opposing the killing of the fetus is the belief that what is being killed is a person.

Third, Jaffe's article may contribute to the further deterioration of intergroup relations, for he clearly seems to imply that the claims of the anti-abortionists are no mora weight at all. It is part of the nature or meaning of a moral assertion that it claims to speak to the unaided reason of all human beings, that it is worthy and capable of receiving acceptance by all who will consider the matter in an impartial and informed way. Jaffe maintains that the purportedly moral assertions of the anti-abortionists are not really moral assertions at all and thus that their claims to moral objectivity and universality are without foundation. Thus, their position need not be assessed on its own merits in the way in which truly moral assertions ought to be assessed. Rather, the Catholic is requested to reflect on the nonmoral basis for his belief and to cease his attempts to impose his particular religious opinions on others. But a further problem is created for the non-Catholic. If the Catholic is confused about the nature of his position, the non-Catholic must be duped by an alien organization and dogma into taking the position he does. Not only does the non-Catholic have no right to impose his beliefs on others but in a sense he does not even have a right to hold those beliefs because their only justification requires a basis which he himself does not share.

Fourth, one might direct a tu quoque at Jaffe and request that he himself consider the social implications of using his own principle of pluralism as a basis for social policy. One striking feature of Jaffe's argument is that it could have been used in the 1850s by an advocate of slavery against the attempt of the abolitionists to impose their personal view regarding the human status of the black man on American society. The case could be made that their belief met all six of the conditions Jaffe uses to characterize a belief as "primarily religious." One is thus led to the suspicion that Jaffe's commitment to an extreme form of pluralism is specious, that he uses it when it suits his purpose and would be quick to abandon it in cases where he himself possesses strong moral (crypto-religious) beliefs. It is difficult to see how the argument can be taken seriously if it involves the consequences it appears to involve, precluding the forced abolition of slavery until a public consensus has been achieved: under such a pluralistic policy, government would neither mandate slavery nor prohibit it but rather would provide legal protection for those who wish to exercise their religious consciences by owning slaves.

BioNews-An Ethical Focus

Gene Transplantation

FACT: The successful laboratory production of human insulin using recombinant DNA technology was announced September 6th by Genentech, Inc. and City of Hope National Medical Center. Stanford University reported a month and a half later (October 19, 1978), that Professor Paul Berg and his associates had succeeded in using recombinant DNA techniques to transfer a functioning mammalian gene of one species into another mammalian cell species. In this instance, rabbit beta hemoglobin molecules were synthesized in African green monkey cells which had received the rabbit gene that directs the synthesis of the beta chain of rabbit hemoglobin.

COMMENTARY: Treating genetic disease by the replacement of a defective gene seems to be the most radical method (radical in the sense of getting down to the very roots of the problem). At the same time, before the technique can be utilized for the management of certain genetic diseases, some very great technical hurdles would have to be negotiated. Gene replacement techniques would have to be employed in the earliest stages of embryological development. If such be the case, the isolation of the embryo in an in vitro environment would likely be required. On the supposition that the embryo resulted from a natural conception and that the embryo would be returned to its mother's uterus, then, apart from the considerations of risk, the Church's teaching does not strictly prohibit such action. The assumption, of course, is that the purpose of the gene transfer is to correct a grave defect of structure/function which would provide sufficient benefits to warrant the danger to which the infant and the mother would be exposed.

However, another problem looms in the immediate future. Granted, a series of animal experiments would first take place, but eventually gene transfer experiments would have to involve human genes (Continued on Page Four)
Gene Transplantation
(Continued from Page Three)

and embryos. At that point, human experimentation begins. What kind of criteria would be required to protect the human embryo which in our nation, at present, seems to be devoid of protection in the face of its mother’s needs? Who would give proxy consent? Some might suggest that if the research were initially done with some reasonable hope of benefit on spontaneously aborted embryos—often due to severe chromosomal defects—the trail would truly be directed to the benefit of this or that embryo. Yet there would be mistakes; what would be done with them? One would need to be certain that the defect in question was due to a single gene. If it were a multiple gene defect, the chances of failure would rise exponentially. Or, even with a one gene defect, the correction might be only partial if not all the cells had successfully received the gene replacement. These and many other incertitudes and questions indicate that for the present there is no simple response to the question and further investigation is needed. Nonetheless, the potential of this procedure warrants that the question be studied in depth by an interdisciplinary team. Such a task force is in the future plans of the Pope John Center.

Medical-Moral Dilemma
Experimentation on Prisons
(Continued from Page One)

on prisoners. The Department of Health, Education, and Welfare has recently issued rules which would permit federal funding for prison research in only a few cases:

Studies of the effects and processes of incarceration, provided that the studies involve minimal risk and inconvenience to the subjects.

Studies, with “strict safeguards, on conditions that affect prisoners as a class. These include drug addiction, alcoholism, and sexual assaults.

Research that has the intent and “reasonable probability” of improving the health or well-being of individual prisoners. But such research may be approved only on a case-by-case basis by the secretary of HEW. (St. Louis Post-Dispatch, 11/11/78, p. 90)

Such rules would permit experimentation designed to benefit the individual prisoners involved or prisoners as a class, but such studies would require careful control to assure that any risk is minimal.

CenterNews

At its December meeting, the Pope John Center’s Board of Directors reviewed the following recommendations of some fifty consultants who attended the center’s planning conference held at Notre Dame University in late November.

A. Several issues were stressed as fundamental; accordingly programs in these areas were to be initiated immediately:

1. The development and statement of the first principles of Catholic bioethics.
2. Investigation and articulation of a Catholic perspective regarding the nature of the human being in a manner which would be intelligible and persuasive to especially those in health care.
3. An analysis of Catholic teaching on human sexuality, with emphasis on the family, counterparts in other fields in light of new information regarding human sexuality, especially as it relates to health care.

B. Among the specific issues cited, three emerged as the most important:

1. The right to health care and the respective obligations of the individual and of society.
2. Death: meaning, definition, and criteria; and the differential obligation to sustain life.
3. Issues in procreational biology including genetic aspects.

The center’s board of directors referred these issues to its Committee on Issues and Projects which will determine a priority and timetable.