

## **Embryo Ethics in Public and Practice**

The ethics of embryo research and assisted conception are often debated. Yet there is little reflection about how and why different groups think about 'embryo ethics'. The focus upon informed consent is important, but perhaps it overwhelms other legitimate concerns about the public interest. Too little attention is devoted to analysing professional scientists and clinicians' sense of ethics and roles in ethical decision making. How can social scientists, bioethicists and practitioners work together to develop our understanding of these issues and make a meaningful contribution to policy making in this area? These issues were explored at a recent meeting of philosophers, bioethicists, sociologists, historians, biologists and clinical embryologists. It was organised as part of Anne Kerr and Henry Leese's ESRC Science in Society project entitled 'Doing Embryo Ethics' and took place at the University of York on the 20<sup>th</sup> December 2005.

### **Embryo Ethics**

Prof Baldwin, former deputy chair of the Human Fertilisation and Embryology Authority, began the meeting with a discussion of the ethics of assisted conception, exploring the interests, rights and duties of the different parties involved – donors, embryos, patients, professionals and society. He argued that the main priority ought to be the resultant child's interests, followed by respect for the wishes of parents, the value of the embryo, donor's interests and the interests of the public at large. This was a succinct and provocative summary of the current, often implicitly individualistic, model of interests and rights which guides much of the ethical reflection and policy discussion in this field. Dr Ashcroft, Reader in Biomedical Ethics at Imperial College London, took up the theme by challenging social scientists to think through their hostility to bioethics, and its focus upon the individual, and consider how bioethics might instead revitalise the interest in social justice in these fields. He argued that we ought to go back to the future, to consider what the point of social science in this area was, especially its contribution to policy and practice, and to develop a more robust and open engagement with the theoretical and ethical commitments to pluralism and democracy which often underpin our work.

### **Practical Ethics**

In the next session Dr Clare Williams, Reader in the Social Science of Biomedicine at King's College London, explored scientists' perceptions of the ethics of stem cell research, noting the ways in which scientists draw various distinctions between acceptable and unacceptable practices as a means of securing the legitimacy of their emergent field. This was followed by a paper from Dr Brison, Principle Embryologist at St Mary's Hospital Manchester, whose perspectives on the scientific and medical priorities in this field contrasted with the scientists in Williams' study. Dr Brison made a strong case for the prioritisation of advancement in infertility treatments as opposed to stem cell research, and for the use of donated eggs to create embryos for research, rather than 'spare' embryos. Dr Sarah Parry, Lecturer in Sociology

at the University of Edinburgh, presented a paper on patients' perspectives on these issues, noting their ambivalence about the notion of 'spare' embryos. Patients and practitioners share a range of qualms about stem cell and embryo research more broadly, but they have a number of priorities, which do not necessarily overlap. This is a complex area – embryos and eggs come from a range of sources and Unit's freezing policies and practices of obtaining consent for research and explaining risks might vary, as might the actual purpose of the research being conducted. The strong focus upon informed consent in discussions of the ethics of this kind of research does not do justice to this range of perspectives, once again reflecting a liberal model of social organisation which prioritises individual's property rights.

## Public Ethics

In the final session Prof Naomi Pfeffer, City University, London, took up this theme, exploring the poverty of demographic data collection and analysis in the assisted conception field and linking it to the individualistic focus of regulation and policy making. Dr Kerr discussed the ways in which assisted conception staff make sense of the ethics of bureaucracy in both a public and a local context, noting that they often praise the HFEA's public role, are ambivalent about its effects on practice. The production of performance data on their own practices and welfare of the child procedures are especially contentious, although clinics do have considerable latitude in how they interpret and tailor these procedures. Prof Leese, Department of Biology, University of York continued this theme of ambivalence when he spoke about scientists' difficulties with negotiating the commercialisation of embryo research and the ownership of data in the laboratory as well as engagement with the public through the conduit of the media. Laws, guidelines and protocols clearly impact upon professionals' practice in a number of contradictory ways which means that particular outcomes are not necessarily just. Yet, in some circumstances, professionals' latitude in the interpretation of rules and procedures enables them to reach acceptable solutions to ethical dilemmas which they face in the course of their work.

## Conclusion

Prof Andrew Webster, Department of Sociology, University of York and director of the ESRC Innovative Health Technologies Programme and Stem Cell Initiative, summed up the meeting, noting that all of our practices are subject to considerable negotiation and questions of public accountability and professional and personal responsibility. There are clearly a number of different notions of risk at work here, and questions about ownership and the purposes of research are ones which we must all ask. Although we may deconstruct notions of rights and choice they remain important, as does theorising our work and engaging with policy makers, but retaining critical distance from them. The philosophers, bioethicists, sociologists, historians, biologists and clinical embryologists who attended this meeting were all concerned about the pressures of commercialisation, and the dangers of exploitation and elitism in decision making. The challenge we now face is to develop a critical bioethics which involves new partnerships between the

private and public sector and between donors and researchers as well as publics and professionals with the aim of ensuring that these new developments benefit the many, not the few.