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■ Also in this issue: “A Common Misunderstanding of Intention,” by Edward J. Furton ■

ARTIFICIAL WOMBS REPLACE ONE VIOLENCE WITH ANOTHER

Colten P. Maertens-Pizzo



The issue of abortion runs a gamut of principles. The pro-choice side references a spectrum of beliefs, some claiming human zygotes, embryos, and fetuses are parasites, others protesting they are truly human but the mother's rights and safety come before those of the child.¹ On the other side of this debate stand those who are pro-life, from those who claim the human zygote and fetus are *potential* human beings and deserve protection to those who say human life *begins* at conception and thus zygotes and fetuses have human dignity and a right to life.² Into this mixed set of conflicting first principles there arrives the artificial womb. Can we resolve this debate by appealing to a technological solution given to us by modern science?

We Are Bound to a Body

The artificial womb would fulfil a human good; specifically, it would serve the needs of infants born prematurely. This is uncontroversial. Some people further believe artificial wombs offer a compromise between the ends of those who want to terminate their pregnancy and those who reject terminating the life of any unborn child.³ This compromise would supposedly free the woman from the “bondage” of pregnancy and ensure the infant's survival.⁴ Nevertheless, we are necessarily bound to a body from our conception until our death. Therefore, to deprive a zygote, embryo, or fetus of the intimacy of embodiment in its mother's womb constitutes a violence too heinous to countenance.

We live in an age defined by an epistemic priority granted to the scientific method. Through this method, we design and develop technologies on our path to progress. The attitude of scientism may not be at play for each individual in daily life; nevertheless, the attitude is real and ubiquitous, indicative of our culture.⁵ Francis Bacon, who recognized the importance of experimentation, argued for the need for scientific freedom to explore the world and find objective truth. He wrote about science as a common good. But his understanding of the common good was not free from prejudice. Bacon believed that science was principally a masculine activity ordered to control feminine nature.⁶ As the scientific method developed, the

eighteenth and nineteenth centuries read mechanism onto embodiment, treating people as sophisticated machines.⁷ This intellectual trend eventually polluted a right understanding of the female body.

Too often we envision our bodies as purely positive, physical things which belong to us like instruments. Christian existentialist Gabriel Marcel described this twofold situation as the difference between *having* as in possession and *having* as implied by one's being. He advocated the principle of incarnation by which our lives carry meaning for us and others. He explains that *my body* means (1) my existence, (2) my consciousness of self as existing, and (3) my consciousness of self as bound to a body and thus as incarnate.⁸ The distinction between *being* and *having* stems from the mystery of what it means to be incarnate. To be bound to a body means to have experiences as a whole person and to have body parts that participate in this whole body, which is me. I have a body, and I am a body.

Unlike machines, our bodies cannot be reduced to the coordinated functioning of their individual parts even though bodies display mechanical principles that are in play within nature. Instead, any likeness between machine and human comes by way of how our intelligence designs machines. This is how computational machines come to resemble the functional principles of our brains.⁹ Our capability to design machines makes us vulnerable to eisegesis, that is, to reading mechanization onto living things. This poses a problem because it ignores the lived relationship between machines and living things. We may rightfully assert that life inspires the fabrication and structure of machines rather than machines inspire the structure of life.¹⁰ If mechanical parts were the basis of our life, then we would be nothing more than sophisticated machines. As this relates to exogenous gestation, Danial Deen, who specializes in the philosophy of science, worries that Christians “may see the artificial womb as a catalyst for strengthening the mechanistic view of reproduction that dominates the thinking of secular society, and of other religious groups, including more liberal Christians.”¹¹ He is right.

The Embodiment of the Womb

We can safely claim that a womb belongs to a woman as part of her whole, living being. It is not a part to be understood, for example, as a composition of tissues and chemicals to be analyzed under a microscope.¹² Erazim Kohák writes that our body is our most intimate entry point into the wider world,¹³ and wombs directly and significantly affect a woman's lived experiences. Machines will never know this kind of intimacy that grounds our life and love as whole human beings, differentiating us from mere collections of coordinated parts. The intimacy of our embodiment is grasped by our intellect: “The personal,” thus, “is not an addition to the biological: it emerges from it.”¹⁴ We are whole, total beings.

Wombs provide some of the cellular and structural components necessary for the development of the placenta, which transfers nutrients and oxygen and gives protection to the child against pathogens. The exact nature of this organ is debated because it contains genetic and structural elements from both mother and child. Some bioethicists, for example, identify the placenta as a quasi-substance that exists in symbiosis with the mother and child.¹⁵

Wombs do not contribute to the life of women as their other organs do. But wombs do function in this way for children, that is, as an organ outside the child's body that is ordered toward the environmental needs of development. Wombs expand to enable freedom of growth for the child. Moreover, the womb conducts the mother's voice and heartbeat to the child, both of which contribute to healthy growth and development. Research attests to the necessity of sustained intimate contact between mother and child for healthy development even after birth. We may conclude that human contact is bound up with children's basic physiological needs.¹⁶ This closeness is not provided by artificial wombs, which are exogenic and cannot participate in the intimacy of life.

The bodily relationship between the woman and the infant is acknowledged even within the feminist movement.¹⁷ Once an infant exits its mother's womb, that relationship drastically changes. This occurs naturally and at the appropriate time through birth, but a woman who has chosen to remove an infant from her womb prior to birth sustains that life in an artificial organ that is not part of her or anyone else. The artificial womb functions independently from its natural and biological counterpart.¹⁸

The biological and personal womb thus bears a special relationship with the unborn child. The solution to the problem of abortion is not the artificial womb, but the loving willingness of the mother to allow her child to be born at the appointed time from her own womb. As we have seen with in vitro fertilization, the artificiality of the external womb will adversely affect the dignity and rights of those infants who have been separated from their mother's natural womb. The physical, psychological, and social risks to the infant as a result of this ejection are far too great. Once separated from the womb, the child is separated from his or her embodiment within the world.

Replacing One Violence with Another

Artificial wombs, it is argued, offer a technical compromise between the mother's right to abortion and the child's right to life. To the contrary, the serious concerns associated with this compromise cannot be assuaged by a technological solution. Artificial wombs replace one kind of violence, the killing of a uniquely vulnerable human life, with another kind of violence, the deprivation of the intimacy endemic to embodiment. Endorsement of this exchange indicates a flawed perspective on human beings, treating human beings as machines with interchangeable parts and ignoring the intimacy of an embodiment that defies mechanical explanation. We are necessarily bound to a body from our conception until our death. Therefore, to deprive a zygote, embryo, or fetus

of the intimacy of embodiment in its mother's womb constitutes a violence too heinous to countenance.

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Notes

1. This spectrum among feminist authors is evident in Sarah LaChance Adams and Caroline R. Lundquist, eds., *Coming to Life: Philosophies of Pregnancy, Childbirth, and Mothering* (New York: Fordham University Press, 2013).
2. See BBC, "Potential Human, Potential Rights," accessed August 27, 2019, <http://www.bbc.co.uk/ethics/abortion/child/potential.shtml>.
3. Zoltan Istvan, "The Abortion Debate is Stuck. Are Artificial Wombs the Answer?," *New York Times*, August 3, 2019, <https://www.nytimes.com/2019/08/03/opinion/sunday/abortion-technology-debate.html>.
4. Shulamith Firestone, *The Dialectic of Sex: The Case for Feminist Revolution* (New York: Farrar, Straus and Giroux, 2003), 11, 65. According to Firestone, women will never escape the bondage of reproduction unless they can seize the means of that reproduction.
5. R. C. Lewontin, *Biology as Ideology: The Doctrine of DNA*, reprint ed. (New York: Harper Perennial, 1991).
6. See the writings of Carolyn Merchant, who argues that the Enlightenment is that era when the atomization of nature began in force.
7. Lynda Birke, *Feminism and the Biological Body* (New Brunswick, NJ: Rutgers University Press, 1999), 56.
8. Gabriel Marcel, *Being and Having*, trans. Katharine Farrer (UK: Andesite Press, 2017), 10–11.
9. Jerome Lejeune, "Physiology of Human Intelligence," lecture, John Paul II Institute, Washington, DC, YouTube video, 8:05, accessed October 20, 2020, https://www.youtube.com/watch?v=r4nqFF0E_L0.
10. Georges Canguilhem, *Knowledge of Life*, ed. Paola Marrati and Todd Meyers, trans. Stefanos Geroulanos and Daniela Ginsburg (New York: Fordham University Press, 2008), 91.
11. Daniel Deen, interviewed in David Warmflash, "Why Don't We Have Artificial Wombs for Premature Infants?," *Leapsmag*, March 2, 2018, <https://leapsmag.com/dont-artificial-wombs-premature-infants>.
12. Science has a way of feminizing nature and supporting the objectification of women. Many sources argue against scientific bias against women. See Anne Fausto-Sterling, *Sexing the Body: Gender Politics and the Construction of Sexuality*, rev. ed. (New York: Basic Books, 2000); and Judith Butler, *Bodies That Matter: On the Discursive Limits of "Sex"* (New York: Routledge, 1993), 8–11.
13. Erazim Kohák, *The Embers and the Stars: A Philosophical Inquiry into the Moral Sense of Nature* (Chicago: University of Chicago Press, 1984), 105.
14. Roger Scruton, *On Human Nature* (Princeton, NJ: Princeton University Press, 2017), 41.
15. Becket Gemmels et al., "The Metaphysical Status of the Placenta," *National Catholic Bioethics Quarterly* 14.2 (Summer 2014): 295–333, doi: 10.5840/ncbq201414231.
16. Alexandra R. Webb et al., "Mother's Voice and Heartbeat Sounds Elicit Auditory Plasticity in the Human Brain before Full Gestation," *PNAS* 112.10 (March 10, 2015): 3152–2157, doi: 10.1073/pnas.1414924112; and Evan L. Ardiel and Catharine H. Rankin, "The Importance of Touch in Development," *Paediatrics and Child Health* 15.3 (March 2010): 153–156, doi: 10.1093/pch/15.3.153.
17. See LaChance Adams and Lundquist, *Coming to Life*.
18. John F. Crosby, *The Selfhood of the Human Person* (Washington, DC: Catholic University of America Press, 1996), 41–81.

A COMMON MISUNDERSTANDING OF INTENTION

Edward J. Furton



Philosophers and theologians have given us ample descriptions of the moral act, with its three fonts of object, intention, and circumstance. St. Thomas Aquinas, for example, describes these elements in great technical detail.¹ His analysis is of little value, however, unless we know how these elements show up in day-to-day experience. If I cannot identify object, intention, and circumstance in my own decision making, then the most careful study of these in the abstract will not help me assess the moral character of my actions or those of others. One area of significant confusion concerns *intention*. The common use of this term does not properly reflect its technical meaning. My hope is to throw some light on this problem so that those who rely on the standard philosophical terms of moral analysis might better identify the true place of intention within ordinary moral experience.

Intention and Deliberation

Obviously, words refer to objects, or the realities around us. When words are misused, we can fail to understand what is true. This also occurs when we use a word in a manner that is different from someone to whom we turn for direction. We are no longer speaking the same language. The word *intention* means something very definite in the Catholic moral tradition, but in the common language of today, it typically means something else.

Consider the phrase, “He intends to go to the store.” This phrase refers to a state of mind. There is a plan in mind to go somewhere, apparently in the near future. This is not what *intention* means for Catholic philosophers. An intention is not a plan, but an action that is knowingly and willingly done.

Let us take an example. Consider a nurse who believes that euthanasia is good. He adopts this view because he has as his goal the alleviation of suffering. The administration of a deadly dose of morphine is, to his mind, a good or even loving act. This is a mistaken view, but what is instructive about this example is that the end in view is indeed good. The alleviation of suffering is something we that we should all want to secure for those who suffer pain.

Most people who consider this case would say that the nurse is wrong but nonetheless has a good intention. That is true in common language, but it is not true in the technical way the term *intention* is used by philosophers. They would say instead that the sentence “he has a good intention” signifies a motive, not an intention. A motive is a *reason* for action. The defender of euthanasia does indeed have a good motive. He asks, “How can I relieve this person’s suffering?” He answers, “One way would be to give the patient a massive dose of morphine. This would end his life and so alleviate his suffering.”

A motive, or reason for acting, is not technically an intention. We know this because the word *intention*, as used by Aquinas and others, refers to an act of the will, that is, to something that is done

or carried out.² But a motive or reason for acting is not a movement of the will; it is instead the conclusion to an act of reasoning about something to be done.

Deliberating about what to do occurs prior to carrying out what is planned. In our example, the nurse looked to a goal that he wanted to achieve and then inquired about how to get there. He engaged in a process of thinking. As Aristotle put it in his *Nicomachean Ethics*, in deliberation one begins at the end and reasons back until one reaches the first thing that can be done.³ In the present example, the nurse began with the goal of alleviating suffering and decided on the use of morphine; when the opportunity presented itself, he got the hypodermic needle, filled it with the drug, and injected the patient. These actions are all intentional. None of them was a good act, though perhaps one could argue that there is nothing wrong with getting a needle or with filling it with morphine, which are common actions carried out by nurses and physicians, but that what was wrong in this case was the injection.

To determine whether an action is intentional, philosophers look at two primary factors.⁴ First, did the source of motion come from within the agent? In other words, did the agent originate the action? Suppose that someone bumps my arm while I hold a hypodermic needle filled with morphine, and I stick the patient. This was not an intentional act. The source of motion was external to me.

The other element is whether the action was done knowingly. I could, for example, think that the needle contains some beneficial substance and inject morphine instead, causing the patient’s death. This would also be unintentional because I acted in ignorance, but we have a moral obligation to have sufficient knowledge for correct action. We can still be at fault through negligence. A health care professional should know how to handle hypodermics.

So an action is intentional if it is done willingly and knowingly. Every step in a process that brings about an end in view is therefore an intentional act. The nurse in this example intends to alleviate suffering, but here the word *intention* is too narrow. The nurse alleviates suffering through actions that kill the patient. Intention does not concern the end alone, which is indeed accomplished, but all the things that are done to achieve that end.

Obviously, moral action requires that the means be suited to the end. That is not the case in the present example. What is important for present purposes is to see that a motive for action is not the same as an intention, at least not as that term is used in the Catholic moral tradition.

The Law of Nature

The nurse has also deliberated badly. Faulty deliberation is likewise not an error of the will, but a problem in how the nurse thinks about morality. He believes that killing innocent people is either a good or an indifferent act. Otherwise, he would never conclude that a lethal dose of morphine is an appropriate way to alleviate suffering.

From the wider rational perspective, a plan that results from deliberation must be in accord with nature. That is, it must follow the laws that God has made evident to reason in nature. How do we know that the nurse’s actions are wrong? We know this because life is a fundamental good of the person. This is an immediately known fact that derives from experience. Killing an innocent person destroys human life and cannot be properly ordered to the alleviation of suffering.

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My will has no power to decide what actions are right or wrong. Therefore, the goodness of my intention depends entirely on the order of nature. That is why the Catholic tradition places the primary emphasis not on intention, but on what is called the *object*. The object is what is done. The alleviation of suffering is a good goal to have, but the moral law determines whether what we do under our plan of action is good or bad. I cannot make a bad action good by having a good motive.

To summarize the results, the commonplace use of the term *intention* does not reflect what philosophers mean by *intention*, because the former refers to the conclusion of a deliberative process, not to an act of the will. In the above example, after the nurse's process of deliberation is complete and a plan of action has been put in place, each step taken by him in completing that plan is what he intends—and one of those steps kills an innocent human being.

Someone who says, "Well, at least he has a good intention" does not speak in the technical terms of the Catholic moral tradition. One can truthfully say that the nurse has a good motive or end in view, but the actions taken in service of that goal are what the tradition calls intentional. Whatever is not caused by an outside force

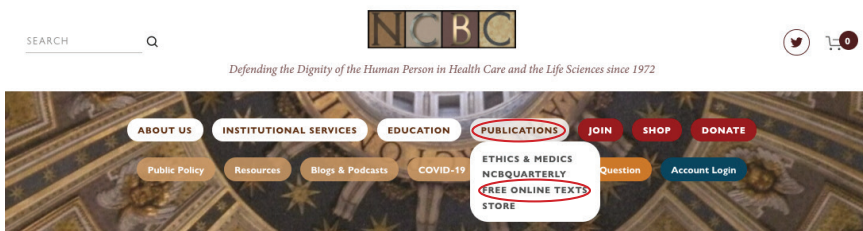
or done in ignorance is done with intention. The term *intention* does not refer to one's motive for action, but to the carrying out of a plan through the free exercise of the will.

The above analysis does not mean that we should try to change the way people speak. Linguistic conventions do not change except through broad societal agreement. Instead, we need to make sure that we are not confused by the common way people talk about intention. That is enough to help clear up at least some of the confusion. We can contribute even further to sound moral discourse by insisting that people deliberate properly before they carry out a plan of action.

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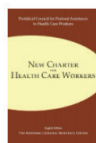
Notes

1. Thomas Aquinas, *Summa theologiae (ST) I-II.18.6.*
2. Aquinas, *ST I-II.20.2.*
3. Aristotle, *Nicomachean Ethics*, III.3.1112b12–1113a3.
4. Aristotle, *Nicomachean Ethics*, III.1.



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