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Abortion: Analysis of the Bioethical and Metaphysical Standpoint

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Ethical Dilemma

The antagonistic relationship between a mother and their unborn child creates the controversial topic of abortion. With massive moral implications and consequences associated, education on the laws and reasoning is significant to determine the direction of society. To analyze the ethics of abortion, the bioethical and metaphysical debate must be considered. With the former, the four principles of bioethics are used in healthcare practice to break down an ethical concern. On the metaphysical side, the life-status and rights of the fetus are acknowledged. With this topic, it is important not to argue in favor of one position, but instead have an open discussion so people can be informed about this prominent topic that has recently been brought back into light. Understanding the different points of view, whether it is the perspective of the health professional, society, fetus, and woman are important to take in account in order to completely dissect this dilemma.

Four Principles of Bioethics

There are four main principles that are considered in bioethics: autonomy, beneficence, nonmaleficence, and justice. These pillars are considered when approaching an ethical dilemma in healthcare, such as abortion, and finding a course of action.

Autonomy

A patient has the right to their own body and decision-making capacity according to autonomy. Beauchamp and Childress, American philosophers known for their contributions in bioethics, states autonomy incorporates both “liberty (independence from controlling influences) and agency (capacity for intentional action)” (Sedig, 2016). According to this, the decision to

undergo an abortion cannot be obstructed by the government or society according to the right to autonomy and liberty. This not only considers the viewpoint of the carrier, but also the viability of the fetus. Depending on when or if a fetus is considered human, it may have the right to bodily autonomy as well. This introduces the question of whether the fetus's bodily autonomy would deprive the pregnant woman from their right.

Beneficence and Nonmaleficence

Beneficence is described as the healthcare provider having the duty to do what is in the best interests of their patient. The treatment options should be weighed when determining the best course of action to be taken. Healthcare providers are obligated to inform the patient on alternatives such as keeping the child, placing the child into the adoption system, or different methods to abortion. In contrast, nonmaleficence describes how the healthcare provider has “a duty to do no harm or allow harm to be caused to a patient through neglect” (Nineham, 2023). Nonmaleficence relates to the deontological theory in that healthcare providers are obligated to correspond with the Hippocratic Oath. Providers pledge to “prescribe only beneficial treatments... to refrain from causing harm or hurt” (*Hippocratic oath*). Abortion would be harming the fetus, but also may harm the mother by keeping the child. Together, these concepts put forth the idea of doing more good than harm. In this case, aborting a fetus causes harm to the unborn child in the attempt to produce a favorable result for the carrier. By keeping the child, the mother may have life-threatening complications by carrying, increases in economic hardship and insecurity, or significant detriments to their mental health. From each perspective, harm will be placed on either party.

Justice

In bioethics, justice considers the law, patient's rights, and equality when analyzing a situation. Justice and authoritarian ethics are closely related in that people look up to government and law to determine the right course of action. The most impactful United States Supreme Court ruling in abortion is the 1973 case of *Roe v. Wade*. This ruled that "the decision to continue or end pregnancy belongs to the individual, not the government" (Center for Reproductive Rights, 2022). In the United States Constitution, the fourteenth amendment protects an individual's liberty of bodily autonomy and privacy from government interference. This includes an individual's decisions and privacy on child-rearing and contraception use. Following the court ruling, access and safer options of abortion increased for pregnant women.

In June of 2022, The Supreme Court overturned the *Roe v Wade* ruling in *Dobbs v Jackson Women's Health Organization* therefore abandoning its duty to protect the right of abortion, thus violating a fundamental right provided in the constitution. After this decision, half the United States banned abortions causing women to seek access in different states or carry against their will.

Reproductive oppression violates the rights to equal protection and freedom from discrimination. Banning abortion further subordinated women, people of color, and low income groups by controlling their reproductive rights. In doing this, the government interferes with the rights of women through discrimination putting them inferior to the law. As women have a history of being controlled by the law and government, the United States threatens the forward progression of equality. The struggle of possessing decisional autonomy and non-discriminatory health care during pregnancy, childbirth, and postpartum continues. (Center for Reproductive Rights, 2022).

Metaphysical

Determining when an entity is considered human is an integral factor for possessing “moral inviolability” and a “right to life” (Gillon, 2001). Different theories question at which characteristic of development does the fetus have moral and legal rights: conception, attainment of human form, ability to move, viability, or birth (Dabbagh, 2009). Fundamentalist theories claim that the newly fertilized ovum becomes a human at the moment of conception. Meanwhile, attainment of human form starts at week 9. At this stage, the entity is assigned a sex (which cannot be recognized by ultrasound) and major organs and systems mature. The mostly widely accepted viewpoint of when a fetus becomes a human is around weeks 18-24 where the fetus could be felt moving. This time is of great significance to the pregnant woman for this is when the fetus feels “alive” or “human”. Doctors in neonatology and gynecology go off the technological criterion of viability. At this point, around weeks 20-22, the fetus is able to live independent of the mother given intensive support. Legally, it is at birth where a baby becomes a legal person and is able to possess rights (Gillon, 2001).

The question of if or when abortion is ethical enters the equation. When considered human, the fetus has the “right to life” so therefore it is unethical to abort the fetus. This is taking away the fetus’ right to autonomy and validates the widespread idea that killing a human is wrong and unethical. But if the fetus is not considered human and therefore has no rights, it may be said as acceptable to go forth with an abortion. The main consideration is when the line is drawn to where the fetus is human, and hence “moral inviolability” and “right to life” is attained.

International

Abortion is considered criminal law in some countries including Colombia, Germany, and Poland. Christianity is used to validate abortion being a criminal offense in Columbia for it states life starts at conception. Therefore, the fetus is protected by the rights of life and liberty. Similarly, Poland and Germany see an unborn fetus containing life which gives it constitutional rights of life, liberty, and protection. Abortion is seen as unethical and punishable under these laws. An exception is in Germany, if the fetus is aborted in the first trimester following counseling, the carrier is not punished by the law.

The 1995 Beijing Platform for Action encouraged countries, such as Chile and Nepal, to reconsider their laws and punishments against women who underwent illegal or self-attempted abortions. France responded by eradicating punishments on the subjected women and legalizing self-administration of abortifacient drugs in 1988. These drugs are also available in China, Sweden, and the United Kingdom. In contrast, Australia restricted access in 1996.

Sex-based abortion criminal laws have risen from the abuse of prenatal sex determination. In countries such as China and India, the determination of female fetuses caused an increase of facilitated abortion. These laws prevented the unethical practice of sex discrimination of prenatal fetuses. Genetic services continued for it is able to screen for the possibility of a fetus containing a sex-linked genetic disorder.

The practice of unsafe abortions has been increasingly concerning in many countries. The World Health Organization approximates a yearly total of 42 million abortions, half of which used unsafe methods where 78,000 resulted in maternal death and more than 100,000 in disability. A significant amount of these occurrences are located in undeveloped countries where

access to healthcare and resources are limited. Legality itself is unable to increase safe abortions and mortality rates. (Cook et al., 1999).

Methods

Limitations and requirements are put into place to offer safe and more ethical abortions. But these services are not accessible to some populations which force them to resort to unsafe and unethical methods. Two common and safe methods are medication and procedural abortion. Before going through with one treatment, the healthcare provider uses an ultrasound to determine how far in the pregnancy the woman is and the alternative treatment options available. Therefore, the patient has autonomy on their decision and is completely informed to get the outcome desired. Unsafe abortions are the product of the desperate need of a pregnant woman and lack of resources.

Medication abortion is used in the case of a pregnancy below 11 weeks. A pill called mifepristone is taken first, followed by misoprostol a couple days later. This option causes a miscarriage in the pregnant woman. One procedural abortion is suction which is available for pregnancy less than 16 weeks along. The suction is inserted to remove the pregnancy in a clinical setting rather than in private like the medication option. The dilation and evacuation abortion, for pregnancies later than 14 weeks is similar to the suction method but additional instruments must be used (National Abortion Federation , 2022).

Women in desperate need of abortion are forced to risk their lives by resorting to unsafe and unethical methods. This may be because there are limited resources and support available. 97% of unsafe pregnancies occur in undeveloped countries where there is less access to healthcare and education. In addition, the social, religious, and political factors influence the

decision of pregnancy. The method used, quality of care provided, and woman's readiness can affect the results of increased harm to the fetus, maternal disability, or maternal mortality.

Methods used include drinking toxic fluids, inflicting direct internal or external injury, or having a procedure done by an unskilled provider. Unsuccessful attempts result in hospitalization, death, or long term health complications. Not only are the women and families responsible for these immoral actions, but also the public health system (Haddad & Nour, 2009).

The ethical reasoning behind these two options are based on the consequentialism theory of ethics. This idea supports a decision not based on morality, but the net benefit that comes out of the decision. A misconception of the net benefit may occur in those who choose to go through with unsafe and unethical methods. The position and severity of the pregnant woman varies and should be taken into account to understand their reasoning.

Literature Gaps

Many other factors are involved with the ethics of abortion that were not covered. Pregnant women may face instances such as disability, rape, maternal harm, life threatening conditions, teen pregnancy, or inability to provide. These motives drive pregnant women to resort to abortion whether it is safe or unsafe. Ethicality can be determined situationally or just based on the action of abortion. More research can be done individually to be educated on the topic and consequences associated.

Summary

The ethics surrounding abortion is questioned and judged for those who decide to follow through with the actions. The ethical dilemma relies upon which life, the mother or fetus, is

viewed as more important. Bodily autonomy of the mother, situational measures, and safe methods of abortion can argue for the reasoning of an ethical practice. The metaphysical debate of when a fetus can have the “right of life” and the fact that killing a human is wrong, supports the claim that abortion is morally unethical.

The stigma surrounding abortion prevents an open discussion that needs to be acknowledged. Without this, determining a personal stance and developing a social and political system around the actions of abortion is prolonged. Considering the extreme consequences associated, there must be more effort to acknowledge the topic.

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