

## Human enhancement: The new eugenics

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*Supporters of human enhancement through genetic and other reproductive technologies claim that the new liberal eugenics, based on science and individual consent differs from the old eugenics which was unscientific and coercive. Supporters claim it is the parent's moral obligation to produce the best children possible. At this time, a defective gene that is identified in an unborn child cannot be repaired. To prevent the manifestation of the undesirable trait the unborn child is destroyed. The arguments in support of human enhancement are based on an ethic of consequence that could allow for nearly any means as long as the desired end is reached. Medical enhancement may affect the parent-child family unit; the parents' love for the child may be conditioned on the expected results. The new eugenics, although based on science, continues to pursue the same goal as the old eugenics, the development of a superior individual and the elimination of those considered inferior.*

*Keywords:* Human enhancement, Eugenics

What is human enhancement? Lev, Wilfond, and McBride define enhancement as “intervention used to improve functioning that is considered within the normal range.” Medical treatment, in turn, is defined as “an intervention that is aimed at improving biological functioning that is considered by current medical knowledge as outside the normal range” (Lev, Wilfond, and McBride 2013, 197). In other words, enhancement attempts to improve traits that are considered normal while treatment attempts to return a condition of illness, defect or injury to the normal range.

The eugenics movement, offspring of Darwinism, a bio-social system of ideas which advocated the use of practices aimed at improving the genetic composition of a population developed in Europe in the late 1800s. In Great Britain,

Francis Galton, who was Charles Darwin's cousin, introduced the concept of eugenics as science. The eugenicists of one hundred years ago affirmed that many of the maladies of man were due to inferior inherited traits. For the eugenicist, thieves and prostitutes, the blind, the mentally retarded, all were “degenerates” considered unfit. Supported by utilitarian philosophy and Darwinian natural selection (survival of the fittest) doctrine, the eugenicists encouraged the “fit” middle and upper classes to have large families; the “unfit” poor, especially minorities and immigrants were to breed less (Porter 2006, 326).

By the early part of the twentieth century, the eugenics ideology was embraced by the academic community in the United States. Faculty from Stanford, Yale, Harvard, and Princeton universities were active promoters. In the United States,

compulsory sterilization of “defectives” was carried out. Forced sterilization laws were enacted in twenty-seven states by 1909. Funding for eugenics research was provided by the Rockefeller, Carnegie, and Ford Foundations (Black 2003). Justice Oliver Wendell Holmes endorsed the practice of sterilization of “defectives” in a 1927 United States Supreme Court decision.<sup>1</sup> This decision encouraged the supporters of coercive sterilization. Margaret Sanger, the founder of the abortion industry organization Planned Parenthood, was a leader in the eugenics movement in the United States (Grant 1995, 70).

In 1920, German intellectuals Karl Binding and Alfred Hoche published the manuscript “Permitting the Destruction of Unworthy Life.” Binding was a prominent jurist, and Hoche a professor of psychiatry. With the intent to benefit society and improve the race, the authors advised taking the life of those whose life was considered unworthy. This ideology had few advocates at first, but numbers increased gradually, many were academics, professors at medical schools (Willke 1998, 6). In 1933, a “voluntary” sterilization law was passed which resulted in the sterilization of 400,000 Germans who suffered from physical deformity, psychiatric illness, epilepsy, and alcoholism. Systematic, organized killing followed. It started with the killing of infants and children with congenital defects and mental retardation, followed by disabled and mentally ill adults. The killing criteria were subsequently expanded to include adults and children with “antisocial behavior” and those with minor handicaps. It is important to note that this program was not instituted by the Nazi government, but by the medical community. The Nazi government supported and sanctioned the program and decriminalized the killing (Black 2003). A few years later, based on the worldview of the master race, the Nazi

government commenced the killing of the “inferior” races (US Holocaust Museum 2013). Eugenics as a system of belief encourages the systematic elimination of those considered inferior.

### THE NEW EUGENICS

Supporters of human enhancement through genetic and other reproductive technologies claim that the new liberal eugenics is based on good science and individual consent, that human enhancement flows out of a legitimate desire to improve oneself (Harris 2007) and that there is a moral obligation to produce the best possible children (Savulescu and Kahane 2009, 271). The new eugenicists describe the old eugenics as unscientific and coercive, concerned with the improvement of the race. The new eugenics proposes to create better opportunities for children through individual human enhancement and undesirable trait elimination, rather than to improve the species. Robertson claims that the use of reproductive technologies falls under the umbrella of reproductive autonomy and parents should be allowed to use these technologies as they see fit (Robertson 1994). Based on the principle of autonomy and the utilitarian ethic, the supporters of the new eugenics claim a benefit to the individual and ultimately to the community. Questions arise: Will the elimination of traits considered undesirable decrease genetic diversity and weaken the gene pool? Do all peoples and cultures use similar criteria to determine undesirability? Could an undesirable trait in one community be considered desirable in another?<sup>2</sup>

The desire to improve oneself is characteristic of our human nature. Most parents wish to raise healthy successful children. Examples of parents who attempt to modify their children’s traits with the

intention of improving the child's opportunities for success are many: physical therapy for a child with cerebral palsy; medication for a child with hyperactivity and attention deficit disorder. These parents are improving their child's natural life skills. The parent who uses reproductive genetic technologies does not intend to improve the undesirable trait but to prevent it. To prevent the manifestation of the undesirable trait, the "defective" embryo or fetus is destroyed. It is obvious that the unborn child who is killed is severely burdened and receives no benefit. The child is treated as a product, to be discarded if he or she does not meet the standards of the manufacturer. The new eugenics shows no concern to preserve the life of the child who is considered inferior.

Currently prenatal screening is offered routinely to pregnant women in the United States. The aim of the screening is to detect congenital defects in the embryo or fetus, some of which are genetic in origin. Prenatal diagnosis is performed with the intention to enhance the individual child. Advocates of prenatal testing state that the goals are the reassurance of parents, better management of pregnancies, and decreased rates of birth defects. At this time, a "defective" gene that is identified cannot be repaired. The means to prevent the manifestation of the undesirable trait is to abort the fetus.

### REAL-LIFE SITUATIONS

The fetal aneuploidies are genetic defects that can be identified prenatally. The most common of these is Trisomy 21. There is no therapy, no available cure for these defects that could be applied at this time to the unborn child. The only way to prevent the manifestation of this congenital condition is to destroy the child. Nine of ten prenatally diagnosed fetuses with

Down syndrome are aborted in the United States (IDSC 2009). The inferior person, the person who shows the undesirable trait, is eliminated with the expectation of a healthy future child.

Prenatal screening is also done to determine characteristics not considered birth defects, such as the sex of the fetus. Sex selection is practiced in some cultures; the male child is preferred. Male children remain in the family and are a source of income and support for the parents as they age. Female children leave their own family and join the husband's. In addition, there is the expense of a dowry for the female child. Abortion after an ultrasound and infanticide of baby girls are widely practiced in China and India to ensure the birth of a male offspring. An imbalance of the male-female ratio has resulted from this practice. In China, the population ratio has been seriously affected, where normal male-to-female ratio is 105 boys to 100 girls, in some areas it is as high as 150 boys to 100 girls (Steinbock 2002). Serious social consequences have resulted in countries where sex selection is commonplace. Men of reproductive age cannot find wives and have resorted to leaving their countries to find wives elsewhere. The birth rate has decreased alarmingly. This is an example of a worthy end, to support the family unit, achieved by the killing of innocent girls, and with alarming long-term consequences.

These are real-life situations. Parental selection for specific traits raises significant concerns: the destruction of the "defective" or unwanted child is always a feature of the decision making; and in the case of germline genetic enhancement, every consequence, expected or unforeseen, would be passed on to all subsequent generations. There are simply too many unknowns, and the side effects could be disastrous. Other, long-term social consequences come to mind: Will parents be coerced to

practice enhancement in their children? Will the parent who cannot afford enhancement or does not enhance his child for another reason be considered a bad parent? Will these parents suffer discrimination? Will the “inferior” children be diminished or rejected by the parents, by society?<sup>3</sup>

Does human enhancement of the child affect the parent–child relationship?

Parents have the responsibility for the wellbeing of their children; they have a wide range of discretion to determine of what that wellbeing will consist. At the same time, children are considered beings in their own right, with certain interests that must be acknowledged regardless of their parent’s preferences.

Good parenting ought to be founded on the love and acceptance of the child. Parents ought to offer unconditional love and value their children without consideration of their traits. Parents desire for their children the physical, behavioral, and psychological traits that enable the very best outcomes in life and relationships. With unconditional acceptance, parents work to improve their child’s natural life skills in an effort to provide the best opportunities for success.

Human enhancement through genetic or other reproductive technologies presents a different situation. This intervention results in the design of the child to the parents’ expectations. The design of the child according to the parents’ selection of traits may leave little room for consideration of the child’s choices. A basic ethical principle states that persons are ends in themselves, not to be used as means. When persons are used as means they are not free to make their own choices. The child may be viewed as a product. This unequal relationship may result in a situation of control, of dominion over the child. There may be a link between mastery over the child and conditioned

love (Lewens 2009, 354). The child would be accepted if the parent’s expectations are met. If the undesirable trait is not improved, the child may be viewed as defective and less desirable. Total rejection occurs when the unborn child is aborted to prevent the undesirable trait. Unconditional love means full unqualified acceptance. In this case, the child is accepted on the condition that he or she is born without the undesirable trait.

In conclusion, the new eugenics, although based on science, continues to pursue the same goal as the old eugenics, the development of a superior individual. The elimination of the inferior individual continues to be an integral part of this system of ideas. The conditioned acceptance of the child by the parent may affect negatively the parent–child relationship, and ultimately the family unit which is the basic institution of society.

## ENDNOTES

1. “It is better for all the world, if instead of waiting to execute degenerate offspring for crime, or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind.... Three generations of imbeciles are enough.” *Buck v. Bell*, 247 U.S. 200 (1927). The Supreme Court ruled that a state could perform compulsory sterilization of the unfit including the mentally impaired “for the protection and health of the state.” This was an endorsement of eugenics, the improvement of the race by eliminating the defectives from the gene pool. Justice Oliver Wendell Holmes wrote the decision.
2. Individuals who are carriers for the sickle cell disease have protective advantage against malaria. This undesirable trait would be considered desirable in a malaria endemic area, see CDC (2010).
3. *Gattaca* (1997) is a science fiction drama that poses ethical questions about the nature of scientific development and

genetic engineering and concern over reproductive technologies which facilitate eugenics. The film presents a future society driven by eugenics where potential children are conceived through genetic manipulation. An “inferior” person uses his wits to achieve a “superior” role in society.

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## BIOGRAPHICAL NOTE

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