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On Being Genetically “Irresponsible”

ABSTRACT. New genetic technologies continue to emerge that allow us to control the genetic endowment of future children. Increasingly the claim is made that it is morally “irresponsible” for parents to fail to use such technologies when they know their possible children are at risk for a serious genetic disorder. We believe such charges are often unwarranted. Our goal in this article is to offer a careful conceptual analysis of the language of irresponsibility in an effort to encourage more care in its use. Two of our more important sub-claims are: (1) A fair judgment of genetic irresponsibility necessarily requires a thick background description of the specific reproductive choice; and (2) there is no necessary connection between an act’s being morally wrong and its being irresponsible. These are distinct judgments requiring distinct justifications.

WE ARE CONCERNED with the charge of genetic irresponsibility, especially in the context of reproductive decision making. It is a charge made increasingly often, as the ability to control the genetic endowment of one’s offspring grows. Until recently such control was unknown. Although children sometimes suffered tragically as a result of some abnormal gene, no one could be blamed for the suffering because no one could have prevented it. Today that is changing. In the eyes of many, the increasing capacity to choose the genetic endowment of children brings with it a corresponding responsibility to do so. And when people—i.e., parents—do not do so, some accuse them of being irresponsible.

We argue that such accusations should be made rarely, and only after careful thought. They depend on complex assumptions that should be analyzed rather than taken for granted. Charges of irresponsibility also have a moral depth, which is not always obvious and which makes them offensive. We believe that the rhetoric of irresponsibility can be in itself irresponsible.

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SCIENTIFIC AND PHILOSOPHICAL BACKGROUND

The capacity to control the genetic endowment of children is growing rapidly. More than 500 tests are now available that allow people to determine their risks of having a child with a serious genetic disorder. Some tests, for instance, inform potential parents of their chances of having a child with Tay-Sachs, a devastating neurologic disorder that begins to manifest itself about a year after birth, with gradual neurologic deterioration ending in death within a few years. Other tests reveal the chance of having a child with cystic fibrosis, a disease that significantly shortens and compromises life. The genetic domain is complex, of course. Some genetically based disorders manifest themselves only in mid-life or later. In addition, although some genetically based disorders are monogenetic and determinative (if an individual has the gene for Huntington's disease it is virtually certain he will develop the disorder itself), other genes increase vulnerability to a disease—e.g., colon or breast cancer—but do not make it inevitable.

Examples like these raise many new questions. We are interested in only one of them: What does it mean to judge that prospective parents have *acted irresponsibly* if they fail to exercise the genetic control now possible? Specifically, do prospective parents behave irresponsibly if they fail to use genetic testing and to act on the results? The question, of course, arises within an intricate web of issues about responsibility and about moral obligations (Calhoun 1989; Walker 1997; Feinberg 1970, 1988-89; Haydon 1978). As genetic science advances, questions from this web of concepts are plentiful and often ambiguously phrased: Are parents now *responsible* for the genetic endowment of their future children? If so, is the responsibility causal, moral, or both? To what extent should parents *take responsibility* in this arena? Would doing so involve shouldering a burden, admitting blame, taking preemptive action, or something else? Many different questions of this kind now arise.

In this paper, we isolate the charge of acting irresponsibly from the other questions. Isolating it is more possible than one might think. "Acting irresponsibly," for instance, is not the simple negation of "acting responsibly." Just as there is a conceptual space between liking and disliking someone, so there is a space between acting responsibly and acting irresponsibly. Just as it takes more than "I don't dislike him" to establish that "I like him," it takes more than "she didn't act irresponsibly" to establish that "she acted responsibly." One can imagine, for instance, a conscientious contract killer, who chooses her time and place carefully so

that she is sure to be successful, and so that no one other than her target is endangered. One might say that she did not act irresponsibly. It would not follow that her action was responsible. Many more moral tests would have to be passed for that judgment to be supported.

It is thus conceptually possible to isolate “irresponsibility” from the cluster of related concepts. We believe it is important to do so, because the charge is a serious one, increasingly commonly made, whose gravity is not self-evident. It is not just an evaluation of an action, but an attack on a person, on someone’s character and moral competence. The charge of “irresponsible” is thus insulting in a way that a charge of wrongdoing is not. When it is made too easily it subverts rather than enhances good public discussion.

Legal scholar Linda McClain highlights one way in which that is happening in a domain close to the one with which we are concerned. She points to a certain cultural phenomenon, an increasingly shrill call “for reversing the rise in irresponsibility in American society” (McClain 1996, p. 340). The call (which she criticizes) is for more in the way of personal responsibility and less in the way of unfettered individual rights, and for a corresponding shift in law and public policy. A major target of this cultural campaign, she believes, is procreative “irresponsibility.” “In the rhetoric of irresponsibility, reproductive behaviors and choices which are deemed irresponsible serve as an indicator of moral decline, social breakdown, and pathology” (McClain 1996, p. 341).

For those who use this rhetoric, McClain writes, there are three paradigmatic models of irresponsibility: the single mother, the welfare mother, and the teen mother (p. 342). The model of responsible reproduction is childbearing that takes place (1) within the family, (2) by individuals who have the resources to meet the material needs of the children they bear, and (3) who themselves have the maturity and psychological resources to raise their children appropriately. McClain critically assesses this rhetoric of irresponsibility; for our purposes, her crucial point is that the rhetoric ignores reasonable alternate loci—especially social ones—for allocating responsibility. Many critics of teenage mothers, for instance, are also critics of sex education and of the dissemination of contraceptive material that would permit more responsible procreative decisions to be made.

In short, McClain argues that these judgments of irresponsibility reflect no more than a certain ideological perspective. This point of view, if acted on, may lead to violations of well-founded norms of justice or other basic rights of individuals. Her analysis suggests the power of the lan-

guage of irresponsibility and the need for a more restrained and self-critical use of it (see also, McClain 1994). We will develop that suggestion, particularly in the domain of genetic reproductive decisions.

In the following three sections, we look at the logic of the charge of irresponsibility—its moral grammar, if you will, the set of assumptions implicit in its use. We then turn in the final sections to the practical implications of this grammar within the domain of genetic choice.

THE LOGIC OF “IRRESPONSIBILITY”

It is helpful to begin with a few examples, borrowed and expanded from some presented by Susan Anderson (1995) in a related context. (Because her project is not exactly ours, we will refer to her substantive discussion only superficially.) Imagine a bank cashier confronted by an armed robber. The teller hands over her money in order to minimize danger to others in the room. Anderson would say that the woman acted responsibly, and we have no reason to disagree. If, however, the teller had hidden a revolver beneath her cash drawer (against bank policy) and managed to stop the robbery, we would—in spite of her success—conclude that she had acted irresponsibly. If in some sense she is a hero, she is an accidental one. Things too easily could have turned out tragically. The point here is that one can be irresponsible even if one’s choices do not turn out badly.

Consider another variant: Suppose that the bank teller keeps a gun in her purse by her feet. Relying on years of experience as a markswoman, and waiting coolly for the moment when the robber is well clear of innocent bystanders, she takes careful aim and shoots him in the leg, thwarting his escape. The bank has a policy forbidding tellers to bring guns to work and has instructed all of them to surrender money in a robbery without resistance. Anderson would say that the teller “failed to meet her responsibilities” with respect to these duties, and again we have no reason to disagree. But would we say she acted irresponsibly? The answer here is much less obvious. She took care, acting with deliberation and concern for others. On speaking with her, she may tell us that she thought about the bank rules but decided that in the circumstances an exception to them was warranted. The more we speak with her, the more we recognize that she did not act wantonly or capriciously, but with deliberation—and the more we recognize this, the less apt the accusation of irresponsibility becomes. Note, however, that we may remain convinced that she did the wrong thing. Thus, someone may act wrongly and yet still not act *irresponsibly*.

The converse is also true: One can act irresponsibly without acting wrongly. Take the now beleaguered bank teller again. Facing her third robbery this month, she has become bored with the whole business. She gives no thought to the bank’s check list for deciding whether to place exploding dye packs in the money handed over; she simply does not bother to include the packs. That turns out to be the right choice: the checklist says, let us suppose, that when the robbers are moving slowly and seem jittery, the packs should not be included. (Perhaps the rationale is to avoid having dye packs explode while the robbery is in progress, since it might cause the perpetrators to panic and shoot wildly, endangering everyone around.) So the teller did the right thing, but only because she was lucky. Her judgment was still irresponsibly made.

Thus irresponsibility is different from wrongness, and almost completely separable from the actual results of what one does. Acting irresponsibly involves the manner in which one makes a decision, considered in the light of possible outcomes of that decision, but not determined by what actually happens.

Irresponsibility is crucially a matter of one’s stance toward the consequences of one’s actions. An illustration of a different kind will demonstrate this point. Mr. Smith is a competent and cautious driver. It is winter, nighttime, and a rural area; the roads are mostly dry. He is driving below the legal speed limit. Suddenly he hits a patch of black ice and skids into the side of an oncoming car, causing it to careen into a bridge support. Seized by panic and confusion he quickly drives off. Understandable as it may be, his driving away is irresponsible: indeed it’s almost a paradigm of irresponsibility. He should have determined whether someone in the other car had been seriously injured and needed help. His obligation to do so is compounded by the fact that the accident took place in a rural area at night. His leaving the scene was morally irresponsible, even though he had done nothing wrong before that point. An important facet of this judgment is the fact that he may have caused serious injury.

Like any moral judgment, that of moral irresponsibility is defeasible. If Smith was taking a hemorrhaging child to the hospital, and saw that the other driver was removing his seatbelt and leaving the car, we would be very likely to withdraw the charge.

A Schematic Definition of Moral Irresponsibility

With the preceding scenarios in mind, we are ready to offer a more formal definition of what it means to act in a morally irresponsible manner. Before doing so, however, we need to make a few points about defini-

tions. Few words in a natural language can be defined with the precision that words in an artificial language can. Native speakers of natural languages have internalized a large and complex set of rules for the appropriate use of words; dictionaries and philosophy can capture only some of that. Thus,

“P acted in a morally irresponsible way” implies most of the following, in a way that cannot be put into a simple formula:

(a) *P, who is capable of taking forethought and exerting effort, did so insufficiently.* This is a necessary condition for acting irresponsibly. But the failure has moral weight only in certain circumstances, which we spell out as follows:

(b) *As a result, P*

(1) *risked creating or allowing avoidable harm, injury, or suffering* (as in the second bank teller example); or

(2) *risked creating burdens that P cannot bear herself and others will have to bear instead* (a common ground used in criticizing reproductive choice: someone will have to help you with the resulting child); or

(3) *did not bear burdens resulting from her actions that she had a duty to bear* (as in the hit-and-run example).

(c) *She did so in a domain where it is morally permissible to exercise control*

(d) *and in circumstances where she had an obligation to do otherwise, which arose from a role or contractual responsibility, or simply from the general responsibility of adults to see, and to consider their own liability for, the results of what they do—even the unforeseen results.*

Unpacking the Definition

Condition (a): “P, (who is capable of taking forethought and exerting effort, did so insufficiently. . .”—First, the parenthetical qualifier: toddlers, and others without capacity, are not *irresponsible*. They are *aresponsible* or *nonresponsible*.

Although “insufficient thought” is obviously a context-sensitive notion, there often are reasonably clear social understandings of what counts as sufficient thought. (We discuss the moral weight of such social understandings in more detail in the following sections). Thought can be insufficient in various ways: it can be too brief or superficial; it can be illogical or emotionally distorted; it can be ideologically rigid. But thought alone is never sufficient: one must also make the effort to put thought into

practice. Cowardice, laziness, indifference, and other faults may prevent one from doing so.

Condition (b): “As a result, P (1) risked creating or allowing avoidable harm, injury, or suffering; or (2) risked creating burdens that P cannot herself bear and others will have to bear instead; or (3) did not bear burdens resulting from her actions that she had a duty to bear”— Unless there is a risk of harm or burden, lighthearted or even thoughtless action cannot be labeled irresponsible. The bank teller in the second example, untrained in firearms, risked hurting people. The ready criticism of single mothers often implies that they are burdening others (like the state). The hit-and-run driver did not stop to help deal with a situation he had brought about.

Condition (c) “. . . in a domain where it is morally permissible to exercise control”—This highlights an often overlooked presupposition of charges of irresponsibility. The bank teller’s supervisor presumably “failed” to check the purses of her employees daily—but she had no right to do so, and thus does not share the teller’s “irresponsibility.”

Condition (d) “. . . in circumstances where she had an obligation to do otherwise. Such obligations may arise from a role or contractual responsibility or simply from the general responsibility of adults to see, and to consider their own liability for, the results of what they do—even the unforeseen results.—This distinguishes situations in which it is morally desirable to behave in a certain way from situations in which one has a duty to do so. Only in the latter can judgments of irresponsibility be appropriate. Thus, one’s failure to think about sending help to famine-stricken peoples may be wrong without being irresponsible. But the same inattention in a relief worker would be irresponsible. For a more extended discussion of the nature of role-specific responsibilities, see Andre (1991). In many cases, simply being the cause of something generates a responsibility to deal with the consequences. For example, if my car hits someone, even entirely accidentally, I must try to help.

“Irresponsibility,” then, is a serious and substantial charge. It calls into question, as the last condition suggests, something central to adulthood as we understand it. It is also a complex charge, entailing a number of specific claims and moral commitments that may be less than obvious and, once noticed, quite debatable. As a result, accusations of irresponsibility can be not only condescending and insulting, but also distracting,

drawing attention away from what is really at stake: often questions about role-related responsibilities and about the degree to which human beings should try to shape the world in which we find ourselves.

A final note: Our analysis resembles legal discussions of the tort of negligence. There are a number of small differences, however, the most fundamental of which is that no tort is committed unless harm is done. In contrast one can be irresponsible even if, through luck, no harm is actually done.

REPRODUCTIVE IRRESPONSIBILITY: AN ANALYSIS

We now apply the foregoing definition to a range of genetic reproductive decisions. We can frame this enterprise by contrasting it with the work of Lois Shepherd, who denies that any charge of reproductive irresponsibility is ever valid. She is reacting, perhaps, to the cultural phenomenon that alarms McClain, the ideological heaping of blame on “deviant” individuals. But Shepherd’s reaction is very strong. Positing what she calls “the right to familial attachment,” she believes that having a child with genetic anomalies, no matter how severely disabling and no matter how avoidable the conception or birth, should not be subject to moral criticism of any kind (Shepherd 1995, p. 769). Her most concise argument for this position is: “When values, risk tolerance, faith, love, fear, and biological impulse naturally and necessarily factor into a decision, it is impossible to say whether a decision is reasonable or unreasonable” (p.806). These factors enter our discussion as well, but they lead us to caution rather than to abdication in moral appraisal; we argue for deepening the discussion rather than abandoning it.

In general, our definition highlights the need to examine the following elements when considering charges of genetic irresponsibility. Condition (a) leads us to consider what degree of forethought and effort should be counted as adequate. Condition (c) directs our attention to current radical disagreements about the moral legitimacy of controlling genetic inheritance. Condition (d) requires that we acknowledge the extent to which the obligations attached to parenthood are socially constructed—and the fact that, in the realm of genetics, construction has only just begun.

What about Condition (b)? A recent philosophical challenge suggests that, in the domain of genetic choice, the requirement that one be risking the creation of avoidable harms, suffering, or burdens can never be met. If this is true, then the rest of our analysis would be pointless. Therefore we turn to that challenge first.

Can Genetic Choices Ever Be Irresponsible?

David Heyd (1992) (following Derek Parfit (1984, pp. 366-417)) calls this challenge the “genesis problem.” It is best understood by illustration, so we will start with a case like those presented by Heyd and Parfit, as well as Dan Brock (1995) and others. A couple is told by their physician that they should delay becoming pregnant because the woman has taken medication that almost certainly will result in the child’s being moderately physically handicapped (with a foreshortened limb, for example). They merely need to wait a month before conceiving, in order for the medication to clear her system, but they are anxious to begin a family. They conceive immediately, and she later gives birth to a child with one foreshortened arm. Have they acted wrongly? *Prima facie* they have, since their decision not to wait results in harm to another person. Because of the genesis problem, however, this judgment cannot be made so easily.

The basic difficulty is this: If the couple had chosen to postpone pregnancy, the result would have been the conception of *a different* child, produced by the union of different ovum and sperm. The child they actually produced would never have existed at all. The difficulty, according to Heyd, is that genesis problems concern possible persons, whereas standard moral frameworks are intended to provide guidance for behavior that affects actual persons.

If the couple were to have beaten their child, inflicting injuries that required a limb to be amputated, it would be clear that they had wronged the child. It once had had the possibility of a life with normal limbs, and now that possibility has been destroyed. But this is precisely the sort of thing one cannot say about the original case. That child does not have (and never could have had) the option of not being disabled. The only options available (so to speak) to that child are nonexistence or existence as a physically handicapped person. We have no reason to believe that existence with a foreshortened limb is worse than no life at all (though nonexistence might be preferable to some other kinds of suffering-filled lives). Hence, if this physically handicapped individual prefers life to not having been born at all, we have no rational basis for claiming that s/he has been harmed or wronged.

We will assume that this argument is convincing, that under the circumstances described the child has not been wronged. Does it follow that no attribution of irresponsibility can be made? If so, most such attributions in the genetic arena would fail, because so many genetic choices,

like this one, amount to choices about which child will be conceived rather than harm to one who is.

But condition (b) of our definition refers to the risk of avoidable harm or burden, not to having wronged an identifiable person. In the present case, such a risk clearly was run. The genesis problem, then, does not render questions of genetic irresponsibility moot. Imagine in the case just described that the couple gave little thought to the consequences of their decision, dismissed the judgment of the physician (“doctors are wrong all the time”), and gave no thought to their capacities to care for a handicapped child. In such a case, it seems reasonable to conclude that they have acted in a morally irresponsible manner. This judgment is warranted even if they turn out to be reasonably caring and competent parents, and even if the child has a reasonably decent life; indeed, even if the child were miraculously to be born without disability. The couple, by failing to take thought, failed to conscientiously consider their general duty not to bring suffering to the world, as well as their duty not to create burdens with which they may not be able to cope.

Key Features of Genetic Irresponsibility

Now that we have safeguarded the possibility that genetic choices can be made irresponsibly despite the genesis problem, let us illustrate some key features of our analysis.

The Need for Rich Description

One of the first points to notice is how difficult it is to make any warranted charge of irresponsibility when all one has to consider is a bare description of the act and its consequences. Imagine a case described like this:

A couple knows on the basis of family history that each of them might be a carrier of a cystic fibrosis gene. Their family practitioner reminds them that they are at serious risk of conceiving a child with cystic fibrosis. The doctor advises them to consider genetic testing, but they ignore her advice.

This information may be enough to launch a moral analysis of the rightness or wrongness of what was done. But it is not enough to sustain any evaluation of whether the couple’s action was taken irresponsibly, because such a judgment must involve an evaluation of *how* the choice was made. Much more detailed and specific information about the deliberation process is required.

Weak Link Between Wrongfulness and Irresponsibility

The foregoing example illustrates another feature of our analysis as well—the weakness of the link between claims about the wrongfulness of an action or choice and assertions of irresponsibility in the making of it. One might argue that given the tenuousness of the evidence regarding this couple’s risk of conceiving a child with CF, they had no duty to undergo genetic screening. If so, they did not act wrongly in refusing it. It does not follow, however, that they did not act irresponsibly in making this decision, because they may have paid no heed at all to their more general duty to take care in making choices that pose a risk to the welfare of others.

The link between wrongfulness and irresponsibility is weak in both directions. Even when we might claim with some confidence that someone has acted wrongly, we need to be careful in drawing any inference about their irresponsibility. Consider the couple in the following case.

A couple knows that each of them is a carrier for the gene that causes Tay-Sachs disease. There is a 25 percent chance that any child they produce will have the disease. They ignore their physician’s advice not to conceive. They are deeply religious, and understand their religious beliefs to forbid interfering with the genetic endowment of the children they hope to conceive. They might explain their decision in words like these: “We have thought about this for a long time. Given our religious beliefs, we believe it is wrong, in fact it is the worst sort of arrogance and impiety, to ‘play God’ by trying to change the genetic endowment of our children. God has a plan for them, if in fact He gives us children, and we must not interfere with that plan. All human life is precious, and we all must die. We just do not know when we will die.”

The medical facts in this situation are radically different from those in the earlier case of cystic fibrosis, and these differences seem ethically relevant. With Tay-Sachs, neurologic deterioration begins at the age of one year and continues until death by the age of five or earlier. The process is prolonged and grim. There are few compensations in the child’s short life for the suffering that it will endure. The parents cannot foster in the child the religious faith or coping capacities that might make a meaningful life possible in spite of the horrors of disease; the disease itself precludes this, because faith and other forms of coping require a cognitive development that will not happen. Thus, a decision to risk having a child with Tay-Sachs looks like one in which the consequences are virtually unalloyed

evils, and this fact places a heavy burden of proof on those who would defend the decision as morally right.

Parents' appeal to the tenets of their religious faith is often not a persuasive defense for the moral *rightness* of their choice. Parents themselves have the right to endure whatever suffering they wish for the sake of family, religion, or culture. But they do not have the right to permit their child's suffering or death just for the sake of protecting values central to their culture or religion or family. We do not allow the parents of Jehovah's Witness children to make martyrs of them by refusing the blood transfusions needed to save their lives. And we intervene because those children have not been given the opportunity to decide for themselves whether they wish to embrace that religious belief system, and make those great personal sacrifices. Parents' religious convictions, then, are not always a convincing defense against an accusation of wrongdoing.

But even if we are all persuaded that the couple in the Tay-Sachs example has made the morally wrong choice, it does not follow that they are rightly accused of being *irresponsible*. The Jehovah's Witness parents are not acting within their legal or moral rights, but we would not for that reason alone conclude that they were irresponsible. It is likely that such parents reached their decision conscientiously, perhaps with painful consideration of the possibility that their child might die as a consequence. And something similar could be said of the parents carrying the Tay-Sachs gene.

They might well have understood the odds of their having a child with the disease. Perhaps they spoke with their physician about the sorts of medical problems that such a child would have. They may have met with other parents who had suffered the misfortune of having a child with Tay-Sachs and caring for that child until it died. They may have thought carefully about the demands that such care would make upon them as parents, as marriage partners, as individuals with demanding careers, and so on. And they could have recognized they would be called upon to make substantial sacrifices in all these areas because they would be morally obligated to provide the much greater level of care required by such a child. But they felt, on reflection, that they could meet these challenges, and that this was in keeping with their religious commitments to the value of every life no matter how short or burdened it might be. This description portrays a couple who have thought carefully and conscientiously about their decision, and so do not satisfy condition (a) of our definition. An accusation of irresponsibility misses the heart of the matter: rather,

they differ with us about the domains of life over which it is morally acceptable to exercise control, condition (c) of our definition.

The difference is one of principle rather than of moral incapacity or indifference. People should be able to disagree at this level without hurling (or being subject to) charges of irresponsibility. This suggests caution in drawing conclusions from some contemporary work on related ethical concepts. A number of authors recently have presented arguments about parental responsibility in the genetic domain (Davis 1997; Steinbock and McClamrock 1994). Typically they argue that parental responsibility requires decisions in accord with substantive moral principles, often Joel Feinberg’s (1980) “right of a child to an open future.” If these writers are correct, parents who violate this principle fail in parental responsibility. They have chosen wrongly. It does not follow, however, that they have acted irresponsibly.

Presumptive Genetic Irresponsibility?

The charge of moral irresponsibility is especially hard to support in the arena of genetic choices. The reason for this can be highlighted by contrasting genetic choice with those made in other spheres, with respect to what we will call “presumptive irresponsibility.”

We have been emphasizing that the charge of irresponsibility is directed against the process of moral reflection rather than its outcome. This distinction might be taken to suggest that a judgment about the wrongfulness of someone’s choice or action never by itself warrants a judgment about irresponsibility. “Never” would be too strong a word, however.

Recall the driver described earlier who caused another car to careen into a bridge abutment and then fled the scene of the accident. Right away we are prepared to say that, in leaving the scene, he acted irresponsibly. The reason is that some egregious failure of moral reflection seems almost the only explanation available for such behavior. How could he have failed to notice what he had done to the other car? How could he have something more ethically important demanding his time, especially since his own causal role in the accident escalated the stringency of his duty to provide aid? Why would he flee the scene except for reasons of base self-interest? In a case like this, a presumptive judgment of irresponsibility is warranted without further knowledge of the individual’s deliberations.

Such a judgment is legitimate because in a case like this, the relevant moral considerations are widely-accepted, unambiguous, and, earlier reference to a hemorrhaging child notwithstanding, not commonly or plausibly mitigated by competing values, especially considering the potential severity of the consequences. Presumptive charges of “genetic irresponsibility” are less clear cut, however. So long as there are contending views about the duties of parents, the proper place for human rather than divine agency in reproductive choices, the value of life as a disabled person, and so on, there will be many alternative accounts of choices made responsibly, even if wrongly. One cannot say, simply on the basis of what was chosen, that any *kind* of genetic choice is *per se* “irresponsible,” even though particular genetic choices can be deemed “irresponsible” once one has a sufficiently rich account of them. Thus, at present, “presumptive irresponsibility” is out of place in the arena of genetic choices.

Due Consideration

This diversity of contending views also affects what counts as “due consideration” in assessing whether someone has been irresponsible.

Consider two variations of the earlier cystic fibrosis example, as well as the Tay-Sachs case already discussed.

(1) A couple knows from their family history they are at risk for having a child with cystic fibrosis. A genetic test then confirms that they are each carriers of a CF gene. Their family practitioner explains that they could employ artificial insemination or in vitro fertilization with a sperm donor known not to be a CF carrier. They refuse this option because they “want a child that is genetically their own.” They subsequently conceive and bear a child with CF.

(2) Another couple, both of whom carry the CF gene, is offered the option of preimplantation genetic diagnosis. Multiple ova would be “harvested” from the woman, fertilized in vitro and grown to the eight-cell stage. The embryos would be genetically analyzed, and only those without two copies of the CF gene would be transferred to the woman’s uterus. The couple rejects this option for financial reasons: the cost of a successful pregnancy via PGD would be about \$40,000, and there is a 75 percent chance that conception by ordinary, sexual, means will result in a normal child. They would rather use the money to finance the purchase of a yacht.

(3) A couple carrying the Tay-Sachs gene refuses any form of genetic selection because they believe that they should not “play God” in trying to control their children’s genetic endowment.

Many people would want to challenge the adequacy of the reason offered by the first couple. The question for our analysis is whether it is a reason so transparently inadequate that its use reveals a lack of due deliberation amounting to irresponsibility. We think not, at least for the present. Wanting a child that is genetically one’s own is a desire deeply implanted in many of us by our religious, cultural, and ethical traditions. It is not per se an unworthy impulse to be dismissed out of hand. The desperate pursuit by many people of treatment for their infertility is testimony to the power of this consideration. It is for these reasons that we would say this couple’s judgment about the relative value of this concern is not so aberrant that it reflects some defect in their capacities for moral reflection, however much we may think it is open to criticism.

As already discussed, a similar assessment holds for the third case. Religious convictions ordinarily are given great respect, since they express a person’s deepest commitments. Although they can be taken up thoughtlessly and held lightly, they refer to what is taken to be of ultimate significance. This moves the burden of proof to the person who would call such convictions irresponsible. We may, of course, continue to think that this couple is wrong, and to criticize the substance of their choice, and even their theology. They may in fact be irresponsible with respect to other aspects of their decision—e.g., making no preparations for their role as parents of a child with this disease. They may have been irresponsible in the way they reached their religious convictions. But that is a different question. The sincere use of religious terminology suggests a sense of gravity that ordinarily makes a charge of “irresponsibility” incongruous.

These considerations stand in contrast to the second scenario. Let us assume that the couple are not simply moral monsters, for whom a charge of “irresponsibility” is a pallid accusation indeed. On that assumption, their decision to give priority to maintaining their wealth over concern for the risks of genetic disease to their children shows a staggering lack of ordinary moral discernment. This demonstrates a failure of due deliberation on the consequences of their choices and on the relative stringency of their duties as parents. Thus, we would say that they chose irresponsibly in relying upon this reason.

The Moral Weight of Convention

It is noteworthy that what counts as adequate deliberation in assessments of irresponsibility is often benchmarked to some set of conventional moral norms, which determine what kind of considerations are

beyond the pale for any person with a decent set of moral capacities. Of course, what the norms are can be open to change. It is possible, for example, that under the pressure of social expectations to control children's genetic endowments, an argument like that made by the first couple will come to seem as outrageous as that offered by the second.

This does not make the criteria for due deliberation (and hence irresponsibility) simply a matter of convention. We are not arguing that one acts irresponsibly if and only if society says so. For one thing, the conventional norms themselves may be subject to criticism. But, we do think that conventions play a more legitimate role in determinations of irresponsibility than in judgments about the substantive rightness or wrongness of choices. There are several reasons for this assertion. One is that a society's "geography of responsibility," in Margaret Walker's (1997) phrase, is a way of assigning the burdens (of effort, time, and attention) that make social benefits possible. Benefitting from the energies of others, we are obliged to contribute our own, and conventions help us do so where it will be most useful, because expected and depended upon. Another is that societies differ greatly in their stance toward the world, and particularly toward the future: to what extent should we try to shape and control it? Recalling our definition, the charge of irresponsibility implies a domain where it is right and reasonable to exert control. Since it is unreasonable to expect the average person to see the world radically differently from the way those around her do, and since "irresponsible" is a judgment about a person's way of choosing rather than about the substance of what she chooses, conventions about what can and should be controlled form the backdrop of most such judgments. One morally desirable process for shaping such conventions would be rational democratic deliberation (Fleck 1999).

Finally, the teaching of morally responsible choice-making requires the existence of a set of boundaries, which in effect define the sorts of considerations a conscientious person entertains, boundaries that we attempt to capture in our analysis. All of us operate with the common understanding of "irresponsible" that this set of social expectations has provided to us. Especially since the charge of irresponsibility is an accusation against a person's character, it would be unfair to hold people to a standard that had never before been expected of them.

CONCLUSION

Our view of “genetic irresponsibility” is cautious and skeptical. An accusation of irresponsibility is always a more specific and often a more serious charge than one of wrongdoing. As such it requires a greater burden of proof. It is not enough simply to believe that someone has made an ethically wrong choice; one can choose the wrong thing responsibly, or the right thing irresponsibly. Irresponsibility signals a failure of moral deliberation; therefore one must know, in some depth, how a choice was made in order to conclude that its deliberation was inadequate. And in order to have acted irresponsibly, it must be ethically permissible to exert control over outcomes in the relevant domain. Since people are deeply divided over the appropriateness of controlling reproductive outcomes, it is especially difficult to make a charge of irresponsibility with regard to genetic choices.

It is no doubt true, in Philip Kitcher’s words (1996), that we have left the age of genetic innocence. We face decisions no earlier generation faced, decisions that demand attention and reflection. On our view, prospective parents who make these choices lightly may be acting irresponsibly. But if they make a conscientious decision not to control genetic outcomes they are *exercising* their responsibility, not evading it. In sum, we recommend that charges of irresponsibility be made infrequently, and charges of genetic irresponsibility only very rarely.

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