

'Making Babies': Religion and Moral Diversity in Views on Abortion and Human Genetic Engineering

Terri Laws, W. Duncan Wadsworth, Michael O. Emerson

June 19, 2013



Table of Contents

Table of Contents..... 1

Executive Summary 2

Report 3

Bibliography 13

Executive Summary

This white paper using *PALS* data discusses how race, gender, and frequency of attendance at worship services can impact attitudes about the morality of abortion, the use of genetic engineering to guide child characteristics as well as the basis for moral views. The majority of whites and Hispanics say they base their moral views on their personal conscience. The majority of African Americans, however, say that they base their moral views on God's law. Attitudes about the morality of abortion are influenced by frequency of religious worship. Respondents who said they attend worship services two or more times per month are most likely to believe that abortion ought to be restricted. Women were more likely than men to say that using human engineering to make a smarter baby is "always wrong." This paper suggests that moral diversity and diverse moral messaging remain important aspects of American life. Furthermore, for some communities, religious messaging has a clear impact on their attitudes about the use of medical technologies. These influences are important to take into account in public policy debates such as accessibility to and funding for medical research.

Report

INTRODUCTION

The *Portraits of American Life Study (PALS)* provides insight into American moral attitudes on a broad range of issues, including race, politics, and the ethical use of health related technologies such as elective genetics-based prenatal decisions and abortion. The *PALS* survey asks a random sample of Americans whether they base their overall moral perspective on their personal conscience, societal views, or God’s Law. This white paper reports results from the moral attitudes and health technologies section of the *PALS* data, including how these attitudes differ among selected demographic groups.

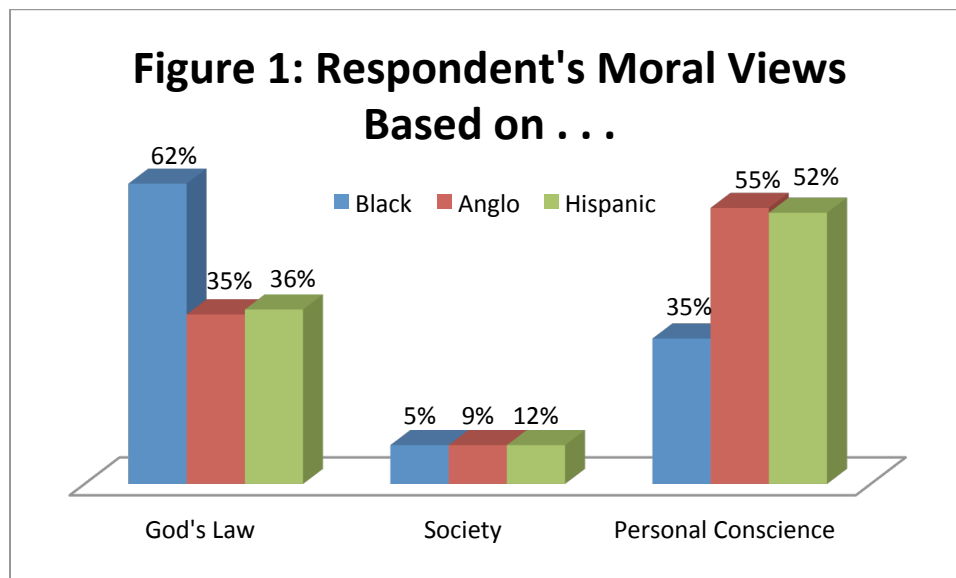
AMERICANS’ MORAL GROUNDING

Moral discourse — deliberation and discussion among individuals and society for identifying a means of evaluating values and right actions — is a daily part of political, economic, social and cultural debates in American life (DeMarco). Moral values are often embedded in private and public discussions about the development and uses of medical technology, the beneficial and responsible use of public funds, and the deployment of drones.

Demographically, one group of *PALS* respondents stands out in their reporting of the grounding for their moral views. African Americans who participated in the *PALS* survey are most likely to say that their attitudes about right and wrong flows from God’s law. Nearly two thirds (62%) of African American respondents say that they base their moral attitudes on “God’s law.” Comparatively, substantially fewer white

PALS respondents say that they base their moral attitudes on “God’s law,” only about one third (36%). Respondents who identified as white tend to view what is morally right as dictated by societal preferences or their personal conscience. Among respondents identifying as Hispanic, 35% say that they base their moral beliefs on “God’s law,” a figure strikingly similar to Anglos.

In the overall survey, only 117 of 1,400 persons, or 8% of the sample, said that they base their moral views on society’s rules instead of “God’s law” or “personal conscience.” That said we can deduce that whites and Hispanics in this survey overwhelmingly see their personal conscience as the basis for their moral views.



MORAL GROUNDING AND HEALTH TECHNOLOGIES

Do the individuals’ moral groundings impact their views about whether the use of particular health and medical technologies is right or wrong? The *PALS*

data provides a view of two areas of health and medical technologies: abortion and the use of genetic engineering to create a smarter baby.

During the 2012 election cycle the subject of abortion figured prominently in speculation as to how particular Senate seats might influence the balance of power between Republicans and Democrats. The subject of abortion also figured prominently in the debates of that moment as to what it might indicate about the role of conservatives within the national Republican Party. In the end, statements by conservative Republican candidates linking their personal moral views to the general moral correctness of abortion to terminate a pregnancy even in the case of rape were seen by some as influential in helping their Democratic opponents to secure Senate seats in Missouri and Indiana.

Since the current Congress was sworn in on January 3, 2013, at least twenty-six bills have been introduced with some provision pertaining to abortion.¹ Added to this, more than 621 bills including the term “abortion” have been introduced in state legislatures since 2011 (govtrack.us). The *PALS* data suggests ways to understand and interpret why politicians are drawing up so many of these types of laws: regardless of their stance, citizens are likely to have an opinion on the subject. Politicians who propose any sort of legislation on abortion are guaranteed to have a natural constituency. Nearly 97% of *PALS* respondents provided an opinion about whether abortion is right or wrong. Although *PALS* respondents are not necessarily the same as likely voters, they are a representative sample of the general public. The *PALS* survey data was

designed to gather various attitudes from the adult U.S. population, and individuals were recruited for the study using standard sampling techniques. Stratification was considered for gender, race, and household size.

Here are 2012 *PALS* responses, regarding the morality of legal abortion:

The vast majority of *PALS* respondents want some level of restrictions on abortion. One question in the survey provided respondents the opportunity to choose to varying degrees whether abortions should be legal. Just 17% of *PALS* respondents believe abortion should be legal under “almost all circumstances.” The largest numbers of respondents, 26%, answered that abortion should be available in “some circumstances,” closely followed by 25.5% who say that abortion should be available only “in extreme circumstances.” It should be noted that, statistically, the difference between these two responses is indistinguishable. In the middle, 14% of respondents said that they believe that abortion should be legal under “most circumstances.”

Combining respondents who selected “most” or “almost all circumstances” makes up 31% of respondents in the survey. The demographic groups most likely to believe that abortion should almost never be legal were Hispanic women, African American men, and African American women. Respectively, 53%, 46%, and 44% of these respondents said that abortion should be legal under “only extreme circumstances” and “under no circumstances.”

The *PALS* data does not provide the ability to analyze the particular circumstances under which respondents want abortion restricted. However, the

fact that large percentages of respondents want some level of restrictions suggests that politicians can propose legislation opposing abortion on a broad variety of fronts. This is bearing out in state houses across the country as well as in the numerous bills already proposed in the current Congress. Interestingly, for politicians who might want to be able to make gestures to the broadest set of constituents, they can propose legislation that sets abortion limits while retaining that abortion remains constitutionally available. This is the manner of two-sided perceptual politics and moral discourse revealed in the *PALS* data.

PRENATAL GENETIC ENGINEERING

In addition to their moral attitudes about abortion, Americans also expressed their opinion about the use of genetic engineering. A massive majority (81%) of *PALS* respondents believe it is “always,” “usually,” or “sometimes” wrong to use “genetic engineering to make a smarter baby.” Just 16% believe that the prenatal use of genetic technology is “never wrong” or that is “not a moral issue.” Women were more likely than men to say that this elective use of genetic engineering is “always wrong.” Fifty-seven percent (57%) of women responded that using prenatal genetic engineering to make a smarter baby is “always wrong;” while only 47% of men said that this was their view.

Respondents’ stated level of religious importance appears to have a direct impact on their moral view of the use of genetic engineering to make a smarter baby. *PALS* respondents who attend religious services most often are also most likely to believe it is “always wrong” to use genetic technology prenatally to make a

smarter baby. 44% of respondents who attend worship two times per month or more believe this type of baby characteristic engineering is *always* wrong. Correspondingly, only 21 % of respondents who state that they “never” attend worship services view this prenatal use of genetic engineering as “always wrong.” In the middle, 34% of respondents who report that they attend worship from “once or twice a year” to “once a month” view the prenatal use of genetic engineering to make a smarter baby as “always wrong.”

CONCLUSIONS ABOUT RELIGION, MORAL VIEWS, AND HEALTH TECHNOLOGIES

The moral attitudes and health and medical technologies section of the *PALS* data provides an opportunity to consider how Americans connect their personal moral systems to selected uses of medical capabilities. In this set of questions, respondents’ reported religious importance, as measured by frequency of worship attendance, provides the best link to moral salience even though most respondents in the survey said that their sense of morality is rooted in their personal conscience rather than God’s law. In this sense, this section of the *PALS* survey demonstrates one aspect of lived religion. On the face of it, Americans’ attitudes about what grounds their moral system appears unconnected to their views of health technologies. However, comparing their stated frequency of institutional religious participation to their attitudes about health technologies, a different story emerges.

The realm of health decisions is universal human experience since life, death, and various health challenges in between are unavoidable. The underlying questions

in debates about the moral use of health technologies shape policy and societal ideals as well as the relationship between these concepts and the advancement or protection of individual rights and freedoms. In American society, this relationship is culturally foundational (Simmons).

The *PALS* data suggest unique academic and practical opportunities for religiously based moral arguments in spite of reports about the rising numbers of Americans known as “Nones” who say that they do not have a religious affiliation. The *PALS* data confirms that there is a rising percentage of the American population that fits this description. However, this increase does not necessarily point to a direct correlation to reduced religious moral salience when it comes to attitudes about the use of health technologies. And some parts of the population are more likely to have retained a religiously based moral system. For one group, the *PALS* outcomes suggests that health researchers should continue to attempt to reach African Americans through religious communities, especially as a venue to provide health education to leaders and congregants. Furthermore, the data provides additional support for the emerging field of African American religion and health which studies the ways that religious thought and experience intersects with health care, health behaviors, and patients’ decision making about specific processes and technologies in the institutionalized clinical setting and beyond.

Philosopher Tristram Engelhardt argues that it is impossible to satisfactorily devise ethical content that meets the pluralistic value systems present in American society. He writes, “Moral diversity is real. It is real in fact and in principle. Bioethics

and health care policy have yet to take this diversity seriously” (Engelhardt). Using various sets of language, as a society, Americans have determined that this moral diversity is a unique, continuing experiment of its founding principles. Furthermore, the role of protecting the individual freedoms associated with moral diversity shall be contended in public and private spaces such as courtrooms, classrooms, media channels, and in relationships between equals. These are the locales of moral discourse.

New instances in the nexus of morality and the use of health technologies arise daily, and the current U.S. administration has consistently expressed a stated commitment to medical research funding. An additional \$10 billion dollars was earmarked for the National Institutes of Health (NIH) in the 2009 American Recovery and Reinvestment Act. (Even so, the agency is responsible for cutting \$1.6 billion dollars from its budget as part of the across the board cuts in sequestration.) More recently, President Barack Obama announced his support for the Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative, a \$100 million FY 2014 budget request to fund efforts to map the functions of various regions of the human brain in much the same way that the Human Genome Project has mapped the structure of human genetic material (whitehouse.gov). The availability of health and medical information gained through scientific research brings with it moral considerations for the use of these innovations and enhancements. Another recent news story involving the elective use of drugs to enhance intellectual competitiveness provides an example of moral considerations.

The continuing development of pharmacological therapies for varieties of medical and psychological diagnoses presents moral challenges for some American families who want to provide the best future opportunities for their children. The *PALS* data did not include survey questions related to pharmacological treatments as one of the health and medical technologies. However, it represents another case where morality and medicine intersect. This is especially true when it is considered as an example where parents are attempting to decide a best course of action. The use of medicine for “best course of action” underlies the questions that *were* included in the *PALS* data - abortion and elective genetic engineering. This concept of the use of medicine for “best course of action” is also present in another recent morality and medicine “discovery.”

A number of news agencies have recently reported on Centers for Disease Control data that observes a rise in diagnosing children with Attention Deficit Hyperactivity Disorder (ADHD).² One therapy has been the prescriptive use of drugs known by brand names including Ritalin and Adderall. These news accounts questioned the causes of the increased assignment of the diagnosis and is closely related to a news story which preceded it. A few weeks before the ADHD news, a study published in the March 13, 2013 on-line edition of the medical journal *Neurology* as a position paper indicates reasons for concern about the potentially elective use of neuropsychotropic drugs to enhance academic high school students’ performance. Neurologists who conducted the study and the members of their professional organization who subsequently it as a position paper were drawing

attention an issue that is already emerging in societal experience. Besides particular health and medical technologies, the *PALS* data suggests the opportunity to reflect upon this question: Besides neurologists, who is responsible for questioning parents about their attempts to medicate their children in order to give them an advantage in intellectual competitiveness? And broadly, how is the general public being prepared to make decisions which are consistent with their efforts to gain or sustain optimal health as well as with their moral sensibilities for themselves and their society?

Bibliography

- Collins, Francis and Arati Prabhakar. "BRAIN Initiative Challenges Researchers to Unlock Mysteries of Human Mind." 2 April 2013. *whitehouse.gov*. Web. 21 May 2013.
- DeMarco, Joseph P. *Moral Theory: A Contemporary Overview*. Boston: Jones and Bartlett, 1996.
- Engelhardt, Jr., H. Tristram. *The Foundations of Bioethics*. Second Edition. New York: Oxford University Press, 1996.
- Govtrack.us*. n.d. Web. 8 April 2013.
- Govtrack.us*. n.d. Web. 11 April 2013.
- Graf, William D., et al. "Pediatric neuroenhancement: Ethical, legal, social, and neurodevelopmental implications." *Neurology* (2013): 1251-1260. Web.
- Simmons, Paul D. *Faith and Health: Religion, Science, and Public Policy*. Macon, GA: Mercer University Press, 2008.

1. This is the number of bills that includes the term "abortion" as reported by a search of the term on the website govtrack.us. Proposed legislation that includes the term covers a range of topics from conscience clause protections for various types of medical providers to the funding support or denial of abortions.

2. See Graf, William D. Interview conducted by Ira Flatow. "Tracking a Rise in ADHD Diagnosis." *Talk of the Nation*. npr.org. April 5, 2013. Web. April 15, 2013. See also Jen Christensen, "Paper: Doctors have 'moral obligation' to prevent misuse of study drugs" *cnn.com*. March 13, 2013. Web. June 12, 2013.