## Ectogestation for men: Why aren't we talking about it?

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## Abstract:

Andrea Bidoli argues that ectogestation could be seen as an emancipatory intervention for women. Specifically, she claims that ectogestation would create unique conditions to reevaluate one's reproductive preference, address certain specific negative social implications of gestation and childbirth, and that it is unfair to hold ectogestation to a higher standard than other innovations such as modern contraceptives and non-medical egg freezing. In this commentary, I claim that Bidoli—like so many others—unjustly bypasses men and their reproductive desires. For a long time, the discussion of the ethics of ectogenesis has focused on women and their reproductive liberation. However, since in many countries, an increasing number of men in reproductive age face difficulties in finding a partner and lack access to other forms of assisted reproduction, it is men who need ectogestation the most.

Andrea Bidoli argues that ectogestation could be seen as an emancipatory intervention for women.<sup>1</sup> She claims that ectogestation would create unique conditions to reevaluate one's reproductive preference, address certain specific negative social implications of gestation and childbirth. She also claims that it is unfair to hold ectogestation to a higher standard than other innovations such as modern contraceptives and non-medical egg freezing.

I agree, but sometimes what is important is not what is said but what is not said. While Bidoli makes important and plausible claims, I believe she unjustly bypasses men in her analysis. Men, I claim, are the ones who need ectogestation the most.

One way to have children is to have (unprotected) sex with someone of the opposite sex. In recent years, however, there has been an increasing number of men in reproductive age without a romantic or sexual partner.<sup>2,3</sup> For instance, Pew Research Center reports that in the U.S., 63 percent of adult males under the age of 30 are single, while only 34 percent of women

of the same age are single.<sup>4</sup> Yet, more young men who are single than women would like to have a partner.<sup>5</sup> Arguably, this is a public health problem.<sup>6</sup> Women, on the other hand, are more often single voluntarily than men are.<sup>5</sup> They also cite the inability to find a partner who meets their own expectations as a reason for being without a partner more often than men do.<sup>5</sup> So, men are worse off (compared to women) when it comes to having children by means of non-artificial reproduction.

Another way to have children is by using artificial (or assisted) reproduction, such as in-vitro fertilization with donated gametes. In countries where surrogacy remains illegal (for example, in Finland), only women have access to assisted reproduction methods, thus unjustly excluding men from assisted reproduction schemes. While it might not be unjust that men do not have a uterus, it is unjust if men's wishes to have children are ignored in public policy, legislation, and bioethical discussions. It is especially concerning if ethicists are considering how we could have even more ways for single women and lesbian women to have children without men, while simultaneously ignoring the reproductive reality men face.

Ectogestation could help men who are without a partner to have children. But are bioethicists discussing the possibility of men having children without women? No. Strangely, much of the ethical literature on ectogenesis is focused on women and sexual and gender minorities while excluding men and their needs. So far, only a few papers discuss how ectogestation might affect men's reproductive rights.<sup>7</sup>

When such discussions are raised, they are often met with antagonism. The possibility that men could use ectogestation as a way to have children without women is often seen as negative (or a 'bad scenario' as two scholars framed it)<sup>8</sup>, even though a similar possibility for women is seen as positive.<sup>9</sup> In a just society, access to reproduction should be offered in a non-discriminatory way.<sup>10</sup>

I suggest that bioethicists and medical ethicists should pay more attention to the potential of ectogestation in increasing the currently limited reproductive options for men. Bidoli's paper does well in its focus on the reproductive rights of women, and it is an important and well-argued scholarly work in that context. However, it is time to change the focus of the discussion. We should finally start discussing the reproductive problems of men.

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