The Challenges of Infertility: A Biblical Framework for Responding Appropriately

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There are as many as 2.5 million infertile couples in America--that's about the same size as the population of Phoenix. At the same time, there are at least 38 ways to make a baby, if you consider all the possible configurations and therapies. Infertile couples are confronted with an alphabet soup of options including AIH, AID, GIFT, ZIFT, IVF, surrogacy, and others. With so many couples desiring children, and with so many options, making decisions about reproductive technologies can be extraordinarily difficult.

It is important at the outset to understand exactly what constitutes infertility. The diagnosis of infertility is made when a couple fails to achieve pregnancy after 12 months of unprotected sexual intercourse. Even under the best of circumstances there is only a 15% to 20% likelihood of pregnancy for "normal" couples having sex regularly. In young women, the chance for pregnancy with unprotected intercourse is estimated at 20% each month, while for women above the age of 40, the chances are probably less than 5% each month.

The growing number of reproductive technologies raises an equal number of ethical concerns. Only those technologies that pass ethical muster should be used. Some of the concerns to be considered include the sanctity of human life and the biblical ideal of the family.

Sanctity of Human Life

An important biblical reality is the sanctity of every human life. At the moment human egg and sperm unite, a unique genetic individual is created. Individuals receive half their genetic identity from their biological mother and half from their biological father. Every human individual is created in God's image (Genesis 1:27) and is vested by God with inestimable value.
Some high-tech reproductive technologies do not by themselves violate the sanctity of human life. For example, IVF (in vitro fertilization), AIH (artificial insemination using the husband's sperm), GIFT (gamete intrafallopian transfer), and ZIFT (zygote intrafallopian transfer) do not require that embryos be destroyed. They can, however, place embryos at risk, especially if combined with embryo freezing. Also, any time more than two or three embryos are implanted in a woman’s uterus, there is a substantially higher likelihood that one or more of those embryos will be put at risk of dying.

A further problem with creating extra embryos has to do with the impossibility of couples knowing what might happen between the time the embryos are created and the time they are implanted. Some will recall the famous legal battle Davis v Davis. The Davises tried to use IVF and embryo freezing to achieve pregnancy. Before Mrs. Davis could get pregnant, the couple divorced. Mr. and Mrs. Davis disagreed vehemently about what should happen to the frozen embryos. After several very lengthy court battles going all the way to the Tennessee Supreme Court, the embryos were destroyed.

This case also highlights how important it is for couples to consider all the possible scenarios they might experience in the course of assisted reproduction. Couples should be encouraged to discuss their religious and moral commitments with their doctor before they begin therapy. Once embryos are created they cannot be uncreated.

**Idea of the Family in the Bible**

Just as procreation is part of the biblical ideal for the family, so too is monogamous marriage. The apostle Paul was being completely consistent with this ideal when he cited Genesis in his instructions on the family in the book of Ephesians: "For this reason a man will leave his father and mother and be united to his wife, and the two will become one flesh." (Ephesians 5:31). God's ideal for the family is one man, one woman, in a one-flesh kind of union, for life. We all know from painful experience personally, in our families, or those around us how traumatic it is when this ideal is violated by adultery, divorce, or even death. This ideal is to be preserved and practiced for the well-being of the family, including when considering reproductive technologies.

A number of the reproductive technologies violate God's ideal for the family and are, therefore, rife with difficulties. For instance, surrogate motherhood, one of the more controversial of the reproductive technologies, is contrary to the "nuclear" structure of the family. When a third party is intrudes on the procreative relationship the divinely instituted structure of the family is altered.

Commercial surrogacy--where a woman is paid to carry a couple’s child to term--is the most objectionable form of surrogacy. The practice reduces children and childbearing to a form of barter. This practice makes reproduction little more than a commercial relationship and the surrogate little more than a womb for rent.

Even altruistic surrogacy, where no money changes hands, is problematic. Surrogacy works best when the surrogate mother is emotionally detached from the child she is carrying in her body. Yet, a child is better off when a mother is invested emotionally in her child and in her pregnancy. The conflict of interest works against the best-interest of the child even in the case where a family
member serves as a surrogate.

Furthermore, laws governing surrogacy arrangements are still evolving in many states. This fact makes surrogate motherhood far from ideal. Children need the very best environment for nurture, even in utero. Surrogacy fails to meet important criteria for compassionate child rearing. One possible exception to this is so-called "rescue surrogacy." In this arrangement, a woman agrees to carry and adopt an unwanted embryo who was frozen in a fertility clinic. At least one embryo adoption agency has been established to facilitate embryo adoptions (see www.snowflakes.org). Rescue surrogacy should not, however, be thought of as merely another form of reproductive technology. The practice would no longer be necessary once the unwanted embryos were all adopted.

Egg donation and artificial insemination using donor sperm also violate God's ideal for the family by creating a child who results from the union of the husband or wife and another person outside of the marriage. Unlike adoption--which "redeems" a child who would otherwise not have a family--these arrangements create a situation where the parents are not equally related to a child they bring into the world for just such purposes. They also expose children and adults to intensely traumatic challenges, both legal and otherwise.

**A Theology of Infertility**

When making procreative decisions, Christians have more than technological questions to ask. Reproductive technologies are not value-neutral. That is, just because these technologies are available does not mean that they ought to be used or that they pass ethical muster. Like other decisions, decisions concerning reproductive technology should be informed by a Christian worldview. What does the Bible say about infertility?

First, bearing children is good and parenthood when possible is to be celebrated. From the beginning, God blessed procreation. In Genesis 1:28, God said: "Be fruitful and increase in number; fill the earth and subdue it." Similarly, the psalmist says: "Behold, children are an heritage from the Lord. The fruit of the womb is his reward. Like arrows in the hand of the warrior, so are the children of one's youth. Happy is the man who has his quiver full of them . . ." (Psalm 127:3-5a). Not insignificantly, "God sent his Son, born of a woman, born under law, to redeem those under law, that we might receive the full rights of sons" (Galatians 4:4). That is, God chose to use the procreative process to bring his Son into the world, albeit through the virgin giving birth. Not only that, but children occupied a special place in Jesus's ministry (see Matthew 18:1-6; Mark 10:13-16). Furthermore, the believer's relationship to God is defined as a parent-child relationship: "The Spirit himself testifies with our spirit that we are God's children. Now if we are children, then we are heirs--heirs of God and co-heirs with Christ . . ." (Romans 8:16-17).

Second, it is equally clear that the sovereign Lord is the one who opens and shuts the womb (1 Samuel 1:5-6). While children are clearly a blessing from God, the ability to bear them is subject to the mystery of his providence. In fact, the apostle James warns Christians not to be presumptuous about their lives. Rather than brazenly following our own desires, we are taught, "Instead . . . to say, 'If it is the Lord's will, we will live and do this or that'" (James 4:15).

God's providence should not be a dark and foreboding reality for believers. As our Father, he
always has his own glory and our best interest at heart—and there is never any conflict between
the two. While we ought not cite the verse flippantly to people who are suffering, it is nonetheless
true that "we know that in all things God works for the good of those who love him, who have
been called according to his purpose" (Romans 8:28). God is able to work good through our
tragedies and traumas. One of the most assuring realities of the Christian faith is the
purposefulness of God. He never makes mistakes, commits errors of judgment, or acts
capriciously.

In some cases, it may not be God's will for a couple to have children. Infertile couples should not
be made to feel like second-class humans because they cannot conceive. God may well have
other good and gracious purposes for them. Sadly, many couples assume that infertility is always
a sign of God's disfavor or a means of punishment. That is not necessarily the case. On the other
hand, God's will may be to bring a couple through the experience of infertility before they
conceive. Of one thing we can be certain, God has promised never to place more of a burden on
us than we can bear (1 Corinthians 10:13).

Finally, trials, including infertility, are sometimes brought into believers' lives as an
encouragement to pray. 1 Samuel 1 is a powerful reminder that prayer is often God's appointed
means of fulfilling his purposes for us. Hannah was an infertile woman who desperately wanted a
child. She was extremely depressed over her inability to conceive. She prayed so intensely that
the priest thought she might be drunk (1 Samuel 1:11-15). Hannah responded to his allegation by
saying: "I am a woman who is deeply troubled. I have not been drinking wine or beer; I was
pouring out my soul to the Lord." In time, Hannah conceived. She had a son she named Samuel
("heard of God" in Hebrew). God answered Hannah's prayers just as he answers all his children's
prayers, by accomplishing his loving purposes in their lives.

**Conclusion**

Infertility can be very traumatic for couples. The array of reproductive technologies offered can be
confusing. Decisions about which technologies to use take a great deal of mental, emotional, and
spiritual effort. There are several important ways family and friends can help couples deal with
infertility.

**Be informed.** Learn the facts about infertility. Infertility is not necessarily a life-long condition.
Some couples may experience years of infertility before having children. Do not give unsolicited
advice or repeat old fables. Stories about a family member or friend who was infertile but recently
had a baby may not bring comfort to couples in the throes of dealing with their own infertility.
There are a number of groups that specialize in helping infertile couples. Hannah's Prayer is a
Christian support network for infertile couples. Stepping Stones Ministry in Wichita, Kansas
publishes a newsletter for infertile couples.

**Be sensitive.** Special occasions, like Mother's Day, may be very difficult for infertile couples.
Understand why they might not feel comfortable participating on those occasions. When you
learn that a couple is experiencing infertility, do not ask "Whose fault is it?" Sometimes couples
feel guilty about infertility in the first place. Additional feelings of guilt—either real or imagined—are
unlikely to help.
Be supportive. Support infertile couples by praying for them, pointing them to good resources, and just bearing their sense of burden with them as they seek help for their infertility.


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