

Posthumous Reproduction (PHR) in Israel: Policy Rationales Versus Lay People's Concerns, a Preliminary Study

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Abstract Israeli policy concerning PHR has been decided upon in an expertocratic manner, leaving the voice of the public unheard. Based on 26 semi-structured in-depth interviews with 13 Jewish-Israeli young couples, this preliminary study provides the first empirical data regarding lay attitudes toward PHR in Israel. Findings suggest major dissimilarities between the policy and lay people's wishes and rationales. While policy is built on the "presumed wish" assumption, supposing all men living in a loving relationship wish to have their partner carry their child post-mortem, this was empirically unsupported. However, the findings suggest that many interviewees were willing to defer to their surviving spouse's wishes to have their post-mortem child, sometimes even against their own wish, indicating a support for presumed consent. Respecting the wishes of the dead, a dominant argument in the bioethical discussion in Israel and beyond, was mainly irrelevant to informants, whereas interviewees considered the future child's welfare, a concern overlooked by Israeli policy. Likewise, while posthumous grandparenthood is on the rise in Israel, it clearly contradicts the wishes of the majority of this study's informants. Nonetheless, existing policy is not expected to raise any opposition, due to the extreme liberalism of the participants and their support of reproductive autonomy.

Keywords Posthumous reproduction · Israel · Informed wish/consent of the deceased · Posthumous grandparenthood · Policy

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Introduction

Nowadays, being biological means being suspendable, interruptible, storable, and freezable, as cryobiology allows for freezing of living things such that they are still alive when thawed. These practices, now standard in contemporary biotechnology, assume and exploit a certain plasticity of organisms, namely their ability to go on living and reproducing, despite catastrophic interference in their constitution, environment, or form (Landecker 2005). Posthumous reproduction (hereafter PHR) overcomes the ultimate catastrophe of death and exceeds both the borders of the end of life and of a person's coming into being, pushing fertility beyond death and making it possible to be born years after a genetic parent's death.

A few scenarios make PHR possible: it can potentially take place after the death of a genetic father, a genetic mother or both. However, the most common situation involves a deceased genetic father whose sperm was retrieved while in a coma, in a vegetative state, brain dead, or post-mortem, due to sudden injury or death, or sperm retrieved and frozen during his life (Hans and Yelland 2013). While living, men may freeze sperm for various reasons, such as cancer treatments, risky occupations/hobbies, or fertility treatments. A woman can be impregnated with sperm from all these sources through artificial insemination or IVF.

A quite novel egg-freezing technique, known as vitrification (fast freezing), now makes it possible to also freeze women's oocytes for long periods of time (Shkedi and Hashiloni-Dolev 2011). Women may freeze eggs for fertility preservation at an older age or, like men, due to cancer treatments or life-threatening occupations/hobbies. In case of death of the potential genetic mother, it is possible to fertilize the egg in the laboratory with male sperm and then implant the pre-embryo in the body of a "surrogate" mother. However, I have not come across cases in which such a procedure was requested or performed. Theoretically, pre-embryos frozen at the fertility clinic could also be used post-mortem of both genetic parents—by relatives or through some form of adoption. To the best of my knowledge, this has not yet occurred either. However, in one known case throughout the world, an Israeli man whose wife died of cancer used their frozen pre-embryos to create a child (Cohen 2013b). Since the procedure was illegal in Israel, he used the services of an American surrogate mother. Other cases of PHR from a deceased mother have not been reported, but are likely to multiply due to the advancement of relevant techniques. At any rate, because posthumous utilization of sperm is far more common than that of eggs or pre-embryos, throughout the paper I refer to it as the prototype scenario.

The ethical discussion on PHR is vast and cannot be fully covered within the confines of this paper. Moreover, positions vary according to a diversity of situations. Scenarios raising minimal objections are those in which sex gametes were retrieved during the man's life and the deceased left clear evidence of his post-mortem wishes—for example, by signing a "biological will," indicating explicit consent for PHR (Bahadur 2004; Barton et al. 2012; Nakhuda et al. 2011). A restrictive agenda holds that, in all other cases, the wishes of the deceased should not be presumed by an intimate partner, his parents, or the courts. As the majority of

cases in which PHR is requested are the result of sudden death, in which the dead had never contemplated this matter, any demand for some sort of informed consent severely limits PHR. Other arguments in favor of restricting PHR include respect for the integrity of the deceased's body (Landau 1999; Shalev 2002); concern for the psychological wellbeing of the future child, who was planned as an orphan (Bahadur 2004; Landau 1999; Samani et al. 2008) and may serve as a "memorial" for his/her late father; and feminist concerns regarding pressures placed upon bereaved female partners to continue the name/sperm/genes of the deceased (Bahadur 1996, 2004; Landau 1999; Shalev 2002).

Supporters of PHR claim that the widow/partner cannot be denied use of the sperm due to her procreative liberty (Simpson 2001). Further, from the future child's perspective, it is impossible to argue that non-existence is preferable to being an orphan or to any other sort of existence (Bahadur 2004), especially in a society in which anonymous sperm donation is common practice.

Israeli Regulation

PHR has been regulated in several nations. There are restrictive policies banning it in Germany, Sweden, Italy, France, Canada (except for British Columbia), Hungary, Slovenia, Norway, Malaysia, and Taiwan. Other countries, such as England, Belgium, Australia, and some U.S. states, allow the procedure only if the deceased had clearly stated his wishes prior to death (Ahluwalia and Arora 2011). Numerous other countries have not regulated this issue (Dostal et al. 2005).

Israel has particularly permissive regulations in this respect. In 2003, the Israeli Attorney General (hereafter IAG) issued formal regulations allowing PHR for deceased men. The regulations outline a two-step procedure (Landau 2004): retrieval of sperm from a dying or deceased man at the request of his female partner, whether married or not; and court authorization to use the sperm, determined on a case-by-case basis, taking into consideration the deceased man's dignity and presumed wishes. Recently, the Mor-Yosef National Committee (2012), which was appointed to propose recommendations for unified legislation regarding assisted reproduction, recommended that PHR is to be permitted in cases of deceased women as well. No law exists as yet.

The IAG regulations (2003) are based on the assumption of "presumed wish," namely, that a man who lived in a loving relationship with a woman would wish to have her carry his child after his death (Ravitsky 2004). The Attorney General justifies his position by referring to the biblical practice of levirate marriage, according to which, when a man dies childless, his brother is obliged to marry his widow and their first child is to carry the name of the deceased and be his heir (IAG 2003). The traditional justification for this abandoned practice has to do with inheritance laws, as well as with the continuity of the man who dies childless, so that his name will be carried on and his "seed will be raised" (Lavi, forthcoming). Leaving the world without offspring was a concern among ancient Israelites (Lavi, forthcoming) and seems to still guide contemporary policy, which promotes the desire for genetic continuity and for existence after death by leaving offspring.

Other arguments supportive of the “presumed wish” legal solution raise evolutionary or instinct-based justifications, assuming that all men, dead or alive, are interested in the spread and continuation of their sperm and that all couples wish to procreate (Landau 1999; Shalev 2002).

Counter-arguments, ignored by the guidelines, contend that wanting to become a father while alive says nothing about the wish for post-mortem fathering (Bahadur 2004; Pastuszak et al. 2013; Shalev 2002). Furthermore, not all couples wish to become parents while alive, as evidenced by declining fertility rates (Dye 2008) and a rise in childless, or rather childfree, families (Abama and Martinez 2006).

A related issue—posthumous grandparenthood (hereafter PHG)—is in debate among policy makers and executors in Israel. According to IAG (2003) regulations, parents have no legal standing regarding the sperm of their deceased child. This position is similar to European and American professional guidelines. According to the European Society of Human Reproduction and Embryology (ESHRE), parents of the deceased or other family members “have no say in this matter” (Penning et al. 2006, p. 3051), nor, according to the American Society of Reproductive Medicine “do the desires of the parents give them any ethical claim to their child’s gametes” (ASRM 2013, p. 1844). In the U.S., parents of the deceased enter the policy debate about PHR mainly via the potential conflict between them and an intimate partner, as they can try to block the partner’s request for the retrieval or use of gametes (Hans and Frey 2013).

Notwithstanding IAG regulations (2003), more than ten requests have been presented in Israeli family courts over the past decade by parents seeking permission to use their deceased son’s sperm to create genetic grandchildren, based on an agreement between them and a single woman who did not know their son and who wishes to use his sperm and become the mother of their future grandchild (Rimon-Greenspan and Ravitsky 2013). Contracts between the future mother and grandparents have been signed and children were born, with the support of an NGO called the “New Family Organization.” This organization claims that the Israeli state must respect the parents’ wish to pay tribute to their deceased son by allowing them to create his next generation, as they are trusted to be the best representatives of his wishes (Sherwood 2011). Accordingly, the family courts argued that, in certain cases, parents are best positioned to know and express their son’s “true wishes” and that this solution was a “harmonious coming together of the interests of all parties involved” (Rimon-Greenspan and Ravitsky 2013, p. 1). Contrary to this permissive approach, the above-mentioned report of the Mor-Yosef National Committee (2012) took a conservative approach and, in line with IAG regulations (2003), precluded parents from the posthumous use of their son’s sperm.

The debate is not yet over. In 2013, the New Family Organization reported on its website that the current IAG does not oppose a legal plea for PHG, in contrast to his predecessor (Cohen 2013a). However, no formal document has been published concerning this matter. Additionally, at the end of 2014, parents of a young deceased man, together with a woman who wished to be impregnated with their son’s sperm, were given a court permission to use the sperm, with no need to testify about the wishes of the dead, which were unknown. (Cohen-Friedman 2014).

Which of the opposing approaches regarding PHG better represents what young Israelis wish would happen with their own gametes, in case of their unexpected death, is among the questions this study seeks to answer. Discussion of PHR has been intense in the ethical and legal literature, but only a few studies have looked at the matter from a social science perspective, asking about perceptions of the general public (Barton et al. 2012; Hans 2008; Hans and Frey 2013; Hans and Yelland 2013; Hans 2014); or inquiring about attitudes to PHR held by fertility patients (Nakhuda et al. 2011) or by men who bank their sperm (Pastuszak et al. 2013).

Located in the emerging tradition of looking into lay people's ethical evaluations (Scully et al. 2006), the present study provides the first empirical data regarding lay attitudes toward PHR in Israel. Israeli policy concerning PHR has been decided upon in an expertocratic manner (Schicktanz et al. 2011), consulting medical, legal, bioethics, and Jewish law experts (Ravitsky 2004), but leaving the voice of the public unheard. Nevertheless, in justifying the policy, very strong assumptions are made about young men's presumed wishes. The study aims at capturing the yet unheard voices of those potentially affected by Israeli PHR policy, in hopes of enhancing the congruency between those who decide and those who might be affected by the policy (Schicktanz et al. 2011) by comparing rationales.

Methodology

The study is based on 26 semi-structured in-depth interviews of 13 as yet childless newlywed or cohabitating Jewish-Israeli couples (ages 21–33; median = 27), who declared themselves to be in a committed relationship and wishing to eventually have children together. This profile is characteristic of those requesting PHR after a sudden death and for whom Israeli policy has been designed. Interviewees were recruited through snowballing techniques. Non-Jews (mainly Arabs) were not included for two main reasons. First, to the best of my knowledge, PHR has not been practiced or requested by non-Jewish-Israeli citizens. Second, major differences between the communities place the non-Jewish population beyond the scope of this research (on Muslim attitudes to PHR, see Harrison 2014). For similar reasons, no ultra-orthodox Jewish couples were interviewed (and only a single religious couple participated). The more religious the couple, the less likely cohabitation is to take place, and having children usually quickly follows marriage. Hence, couples in the stage of life I was targeting hardly exist in these populations.

All participants lived in central Israel were primarily of middle-class upbringing and had diverse levels of education. Of the 26 interviewees, 5 held a master's degree, 16 held a bachelor's degree, 4 had a high school education, and 1 had 9 years of schooling. Most were born and raised in Israel, 1 was born in the U.S., 2 in Argentina, 1 in Russia, and 1 in Uzbekistan. In terms of ethnicity, informants identified themselves as of Eastern European (8), Mediterranean (13), or mixed (5) descent. Being all Jewish, their religiosity ranged from secular (14) to traditional (10), with the exception of one religious couple (2).

Interviews were held during the first few months of 2014. Ten were conducted by the author; the remaining 16 were carried out by a research assistant. Aside from

one interview, which took place in a café, all others were held in the homes of the couples. Each one lasted 45–60 min. Interviews were carried out in Hebrew, and all quotes were translated to English by the author. Male and female partners were interviewed separately, in order to allow for the study of their knowledge of each other's wishes.

Informants were asked about their gut reaction to PHR, about their personal preferences in case of a tragic death of their partner or themselves, whether they wished to become post-mortem parents or use their dead partners' gametes, and for what reasons. They were also asked to guesstimate their partners' preferences, to design their preferred policy regarding the use of sperm and eggs post-mortem, and to articulate what they did or did not know about existing policy. Furthermore, they were requested to convey their attitudes about the idea of allowing parents of the deceased to become posthumous grandparents (PHGs) by using his/her sex gametes. Posthumous motherhood, although still very rare, was equally discussed, but is largely beyond the scope of the present paper and so is only lightly touched upon here. The discussions that ensued during the interviews suggested that participants were well informed. Although many had not been very familiar with the topic formerly, the in-depth interviews allowed them time to dwell on the matter.

Interviewees were guaranteed anonymity (hence the use of pseudonyms below) and told they could withdraw from the interview or skip any question they felt uncomfortable answering. They could also ask whatever they liked, and were promised they would receive an answer at the end of the interview. None withdrew or refused to answer any question, and almost all were eager to learn more about existing policy and their own partner's opinion. We explained policy to them, but asked them to talk to their partners directly. All interviews were recorded with the consent of informants and transcribed verbatim. Data were analyzed in keeping with the grounded theory tradition (Glaser and Strauss 1967). The empirical material was systematically organized in dialog with themes in the bioethical and policy literature.

Given the large size of the population of cohabiting and/or married couples without children in Israel, and the diversity of interview responses, a sample of 26 interviewees (13 couples) is methodologically limited. In consequence, this is a preliminary study offering the first empirical qualitative data regarding lay attitudes concerning PHR in Israel, rather than a fully realized study.

Findings

For the majority of interviewees, the subject matter was relatively new. Although they might have read or watched some news items about PHR, most of them had never considered it in depth or imagined themselves in this tragic situation. PHR is a novel technology which could cause people to express the “yuck factor” (Kass 1997), as it goes against the traditional social/moral order and its basic organizing categories of life/death. Aversion responses, such as “it gives me the chills” or “how creepy,” were common among respondents. Yet some reacted to it as a comforting scenario. At any rate, it was not the violation of organizing categories

that troubled most informants, but rather the request to imagine their own or their partner's sudden death, which raised much anxiety among some of them. This anxiety, combined with the complexity and novelty of the discussed matter, resulted in multidimensional interviews in which respondents' attitudes shifted and they occasionally contradicted themselves over the course of the conversation. Nonetheless, some general trends were clearly discernible from their responses.

Presumed Wish/Consent

As mentioned earlier, Israeli policy is built upon the assumption of "presumed wish," namely that a man who lived in an intimate relationship with a woman would wish to have her carry his child after his death. Informants were asked what they wished would happen if they died. Of the 13 men interviewed, only three expressed an unambiguous wish to have a child post-mortem and two were indecisive, leaning toward this position.

Continuity of oneself as the reason underlying this wish was most clearly articulated by Yosef, a 21-year-old married man studying electronics and machinery, who was the most religious interviewee:

I would very much want to be continued in this world, and continuation of my existence is through kids. So yes, I would want [PHR]. If I had no children, I would very much want... a person who has no kids is as good as dead. I am considered dead. Be fruitful and multiply is to have a son and a daughter, and some also say a grandchild or granddaughter, although this is in dispute. A person wants to leave a trace in this world....

Continuity was also important to Raz, a traditional, married 26-year-old high school teacher who grew up in a religious family and declared himself to have moved away from a strictly religious way of life. Remarkably, he understood PHR to be a sort of futuristic miracle he would want to take advantage of, since he is an up-to-date young man:

I would go for it. I have no objections. When you introduced the topic it sounded strange, but I don't oppose it...the next generation, having the next generation, I don't want to use the word lineage, but for the family...there will be kids, offspring, for the wife, continuity.... It is very modern. Maybe even ahead of its time.... It sounds like a beautiful futuristic idea.

For the majority of men interviewed, however, their own continuity after death did not matter. They stated they would not wish to become post-mortem fathers, mainly because they would want their partners to rehabilitate and start a new life. At the same time, most also said it was not up to them to decide. If it were their partner's wish to have their child post-mortem, they would consent to her doing so. Thus, a differentiation should be made between presumed wish, and presumed consent. Similar to the findings of Hans (2014), our interviewees were willing to defer to their surviving spouse's wishes, but this did not mean they had a personal wish to

have a post-mortem offspring. For example, Uri, a 33-year-old secular married man, with an MBA, said:

If I were to die, I would not care [to have a child], but I would do it for my partner. If I knew it was important to her. Ultimately, it's her decision, not mine. I leave it for her to decide. If she wants, she can have my child...she would be the one who would have to live this life of a single mother, or a widow, or whatever.

Others stressed their wish to be active fathers and expressed indifference regarding continuation of their name or family lineage, the dominant cultural theme of the policy that was familiar to all interviewees but ignored by some. In the words of Ido, a 29-year-old married, secular, motion designer:

Kids, it's more important for me to raise them and live with them and continue life with them and educate them and give them of myself, than that they be the sons of someone who got killed. This is what's important to me with kids...it's not my family name or lineage. It's being a father, raising the child. That's what's important.

Among the women interviewees, five out of 13 expressed a wish to have their partner's child, if he were to die, as a way of fulfilling their loving relationship. Dana, a secular, married 29-year-old kindergarten teacher, said:

If, God forbid, something would happen to him, I would want something of him to stay with me forever. It's awful to discuss...but thinking of what I feel towards him today, he is my chosen one, the love of my life, and I also don't see myself with anyone else. So I would want his child.

Similarly, Ravit, a married 21-year-old Secular Woman, who was unemployed, stated:

"I would want it, yes. I see marriage as holy. I chose this person to stay with till death do us part, and to have children together."

For four other women, a major factor determining their decision was their age. All four said that if death of their partner occurred while they were still young and able to start a new family, they would prefer to do so. However, if their chances of starting over were getting slimmer and their fertility were to decline, they would consider using the sperm of the deceased. For example, secular 26-year-old Galia, who was studying toward a master's in medical psychology and had been cohabitating with her partner for 4 years, said:

It depends on my age. If it happens now, I think I can find someone else. Maybe not with such great genes [laughs]. But later on, when the [marriage] market gets tough, I think I would go for it, for this option [of having his child]. I would want to.

Reut, a 29-year-old secular art teacher, who had been cohabitating with her boyfriend for 3 years, explicitly compared PHR to anonymous sperm donation:

I don't know what to say. It really depends on how old the woman is, because she has to find a new partner. And if she doesn't, she'll take a sperm donation and then what's the point? If the child has no father anyway? At my age I'm not sure I would do it [have his child], at my age I would wait.

Concerning the yet less realistic idea of becoming post-mortem mothers, by having their partner use their eggs and his sperm to create an embryo which would be carried by a surrogate mother and raised by him, only one woman expressed a strong wish for her husband to do so. Being the sole female religious interviewee, this is how 21-year-old Sarah, who worked in a nursery school, reasoned:

It doesn't matter that I'm no longer here. My husband gives me the opportunity to leave something of me behind. For me it's wow! I obeyed the commandment [to be fruitful and multiply].... It's our continuity; it's not just the mental and physical connection alone. It's not enough until you have something [a child] together.

Six women were absolutely opposed to becoming posthumous mothers, mainly because of how they perceived the best interest of the child (see below). Another important argument many women raised referred to their perception of parenting. Sarit, a traditional married 29-year-old graphic designer, answered as follows:

No! 100 % no. If I have a child, I want to be here. If I'm not here, I won't have a child. It's simple. Your parent is not necessarily your biological parent, but the one who raises you, and gives you the tools for life.

Similarly, Orit, a traditional 24-year-old behavioral science student who had been cohabitating with her partner for 2 years, spoke in terms of parental responsibility:

"I oppose it since I have a responsibility. It's the fruit of my body, and I have to make sure it's treated well, since it's my responsibility."

Other women were indecisive. Two said they did not like the idea, but if it were important to their partner, they would not stop him. Esther, a 27-year-old married social sciences student, said she would want her husband to have her child post-mortem only if they already had children together, since having a biological sibling was very important to her. Liat, a secular 31-year-old assistant film director with a steady boyfriend, said she would not want her genetic child to grow up motherless. She would allow the use of her eggs only if her partner had a new girlfriend who was infertile. In that case, she would be happy to have them use her eggs. Two other women were not only attracted by the idea of their own continuity, but also aware of the many moral and emotional problems, such as feeling jealousy and practicing exploitation, involved in having to include a surrogate mother in the procedure and in not having a mother to raise the child.

Partner's Presumed Wish

By interviewing couples, it was possible to examine what partners know of each other's wishes about PHR. In the study of Nakhuda et al. (2011) among 106 couples seeking fertility treatments, individuals predicted their partners' attitudes regarding

PHR about 75 % of the time. The prediction rates in the current research were lower, as just eight out of the 13 couples (61.5 %) expressed concordant attitudes and consequently correctly guesstimated each other's wishes. In four of the couples, partners had dissimilar wishes and thus erred in their predictions of each other's wishes. One case was unclear, as the woman could not make up her mind about her own wishes. These numbers suggest it is erroneous to assume that partners are good representatives of their spouse's wishes, as wrong predictions are not a rarity.

The Wish of the Deceased: “Whoever is Dead, is Dead”

Whenever the deceased wishes are known, most ethical and legal opinions support PHR (Penning et al. 2006; ASRM 2013). Likewise, in Hans and Yelland's (2013) study of American attitudes, the strongest predictor for support of PHR was the deceased's wishes. Yet, as most deaths leading to requests for PHR are unanticipated, the patient typically has not given prior written or verbal consent for the procedure.

All of the interviewees in the current study were deeply respectful of the deceased's wishes. However, concurrently, many informants used the Hebrew saying, “Whoever is dead, is dead,” meaning that what really matters is how the living relatives feel and what they want to do. Many also said that their own opinion should not be taken into consideration post-mortem, as they will be dead. They explained that all they really care about is the good of their living partner and family, as after their death their wish will no longer exist and thus matter. Some, in fact, explicitly said they would allow their loved ones to act against their will. For example, Gadi, a secular 29-year-old married software engineer, stated:

I want to experience it [parenthood] myself, and not unknowingly to bring into the world someone who will not have a biological parent. If I could convince my partner and parents not to use my sperm, that it's a bad idea, I would do so.... I think a child deserves two parents, a mother and a father, preferably biological ones...and I prefer for my partner to start a new life.

Q: So, you would forbid them to use your sperm?

A: No. If it was very important for them, no. I would allow it.

Others, like Netanel, a Traditional, cohabiting, 30-year-old career military man, objected to the idea that the will of the deceased should matter at all. He said:

I really don't care [what happens with my sperm postmortem]. It's totally the decision of whoever is left behind. It's not about me.... I don't see why someone who is dead could force his opinion on others. I don't understand it.

Like Netanel, Dana, a married, secular 29-year-old woman working as a kindergarten teacher, said:

I think it's complicated, but I don't think it's really important what the deceased had wished for, because he's gone. My opinion is that whoever is dead is simply dead. But he has a family, parents, and brothers and sisters.... I think his wife should consider them more than the one who's already gone.

The Best Interest of the Child

Considerations of the future child's welfare are overlooked in IAG (2003) regulations on PHR. In contrast, most interviewees discussed this matter, which split them into two camps. The larger camp (15 informants) naturalized PHR, saying there was really nothing special about it, since nowadays children grow up in all sorts of families, and as long as they are wanted and loved, that is quite enough. When confronted with the allegation that PHR creates planned orphans, Dana the kindergarten teacher disagreed, placing PHR in a normalizing context:

A child can lose his parent in the middle of life, many people get divorced, people use IVF, women use sperm donation.... I have some friends who did it and I adore them.... It's not the end of the world.

Similarly, Haim, a secular, cohabiting, 27-year-old student of economics, said:

Every child is born into a complex situation. If a child grows up in a warm and loving family, with a father and a mother, only with a father, only with a mother, with grandparents who raise him, with two parents or one that really really loves the child, and takes care of him and educates him, he will grow up just fine...he can be born with two screwed-up parents, as we see happening all the time, and then what?.... If someone wants to have a child, it's his right, and hopefully it's a good person who wants it.

For the other smaller camp (8 informants), dominated by women (6 out of the 8), the traditional family still serves as the main reference point, and PHR cannot be naturalized or seen as just another form of a contemporary family. Interviewees belonging to this camp were deeply concerned about the wellbeing of the child, who will come into the world as an orphan. These informants depicted not having a father and even more so, a mother, as a major loss which should be avoided. For instance, Shimrit, a cohabiting 25-year-old traditional woman who works for the army as a software engineer, expressed strong opposition to PHR:

It's just a procedure that should not happen, because the child should not suffer. A child should have a mother and a father...and the child should be the only consideration here.

Michal, a 27-year-old secular married bookkeeper, also thought the child's needs override other considerations:

It's hard for me to think that I could die without having children. But I'm thinking of the children, too, what they would feel without a mother.... It doesn't make sense to me. If my partner wants children [and I am gone], he should look for someone else and have children with her.

Posthumous Grandparenthood (PHG)

Actively pursuing PHG is a unique Israeli phenomenon, in debate among policy makers. In contrast, attitudes toward PHG were quite decisive among study

participants, of whom 19 out of 26 were opposed to parents' use of their dead son's sperm. Two were indecisive, three said that what the grandparents (i.e., parents) want matters, and only two interviewees said they would undoubtedly allow their parents to take charge of their gametes and pursue grandparenthood. Many opponents of PHG talked about the difference they see between an intimate partners' wish for use of gametes, which is part of a natural desire for motherhood, and the parents' wish, which they understand as a desire to create some sort of living memorial for the deceased. Ben, a secular 28-year-old journalist, who had been cohabitating with his girlfriend for 4 years, said:

I would not allow parents [to use gametes], because parents have a different goal. Parents probably want a memorial of you [their son]. With all due respect, becoming grandparents is not a strong desire like motherhood, which I can far better understand. In most cases they want to continue their dynasty...and I don't think this is an acceptable reason. I think whoever is dead, is dead. End of story.... My partner, if she wants my sperm, it's probably because she's at the point in her life when she wants to become a mother. She wants the opportunity to get pregnant, with the sperm of someone she has known and trusted, whose genes are OK. That could be an acceptable act.... The parents want to cling to the past, while the partner wants to start anew.

PHG, more than PHR, was associated with the "yuck factor," as well as with some sense of abuse (even sexual abuse) of the deceased and with doing something unnatural. Sarit, a traditional 29-year-old married female graphic designer felt PHG was bizarre:

I would allow only the partner the use of the gametes, because they wanted to have a family together. This wish was there to begin with. He had thought of it one way or the other. Also, the wife probably knows what he would have wanted. Or at least she is the closest to know. Surely, more than the parents. I can't think of the parents wanting to do it. It's a difficult thought for me.... What if the child dies when he's 10 years old? Before he produces sperm? This is totally bizarre. It is not the right relationship with the parents. The child is not their property. If someone has a right over my sex gametes, it's only my partner.

Reut, a 29-year-old art teacher, used very harsh terms when discussing PHG:

On the one hand, I pity the parents...that's the only thing they have left. On the other hand, it's a bit, I don't want to say it, sick, it sounds awful, but it's a strange situation.... It's almost like raping the deceased without his knowledge.... It's also a horrible situation for the future child. I can't see how it seems right to anyone.

Others said they would allow parents use of the gametes only if the family lineage would otherwise end. For example, Yosef, a 21-year-old married religious man, said he would allow it only if he were an only child and thus his family's lineage would be cut off. Orit, a 24-year-old female behavioral science student, said if she were an only child, she would not be happy for her parents to use her eggs post-mortem, but

she would allow it for their family perpetuation. Liat, a secular 31-year-old female assistant film director, took the same stance.

PHR Policy

When informants were asked what they would do if they had to decide about PHR policy themselves, the most salient finding was the extreme liberalism of most. Although many had deep reservations about PHR, which they would not like themselves or their loved ones to pursue, positions about public policy were very permissive. Most interviewees said they would not like to be judgmental in such delicate matters, which were better dealt with case by case. The following examples discuss PHG, since this was the issue raising most personal opposition. The response of Ido, a 29-year-old secular married male motion designer, is typical of how many interviewees reasoned when asked to play legislators. On the matter of PHG, to which he was personally fiercely opposed, Ido stated:

Grandparents? I don't know...it seems like clinging to something which is gone.... But, God forbid, I'm not in their situation, I don't know, if I were, how I would feel, I don't know. But it doesn't seem right....

Despite feeling that it is wrong, Ido was not ready to judge other people's feelings or actions. When asked to convey his opinion about a preferred policy regarding PHG, he answered: "I really can't say anything black or white. It depends on many things. Maybe it should be dealt with case by case."

Michal, a 27-year-old secular married woman, a bookkeeper, was also very liberal:

Some people don't see things the way I do. Some really want grandchildren from their deceased daughter. So let them have the option. Why not?... I don't agree with it personally, I wouldn't do it myself, but it's possible that it will be done for others.

Even Reut, the 29-year-old secular art teacher who referred to PHG as "rape," "awful," "sick" on a personal level, felt differently when it came to policy:

I'm not sure the law should ban it. If everyone involved wants it, then OK. Go for it. Except for the child, who cannot decide for himself...and also the deceased. But the dead is dead. And the child, if everyone around him feels it's OK, I guess he will feel so, too.

Discussion

Only a minority of interviewees, not only men but also a few women, was interested in becoming post-mortem parents or worried about the possibility of dying without leaving offspring. Thus, the study findings provide no empirical support for the "presumed wish" legal construction. Among informants, wanting to continue ones' name/sperm/genes/lineage was associated with religiosity, although the sample

included far too few interviewees to generalize. Thus, further studies should focus on the religious population, whose attitudes might be more in line with that of existing Israeli policy, which is built on the assumption that all men living in intimate relationships want to have children post-mortem, a rationale supported by ancient religious texts. However, the findings suggest that many interviewees were willing to defer to their surviving spouse's wishes to have their post-mortem child, sometimes even against their own wish, thus indicating a stronger support for presumed consent to surviving partners requests.

Rather than men, it was women in the study who considered having their partner's child if he were to die, more than their male partners wanted to become post-mortem fathers. Women deliberated this possibility as a means of fulfilling their love or marriage relationship, because they wanted to use PHR as insurance against becoming too old to have children with a new partner, or simply because it was biologically feasible for them.

Prediction of one's partner's presumed wish was pretty weak. Based on current findings, it would be wrong to assume that intimate partners can guesstimate correctly the wishes of their deceased lovers. However, in most cases, the interviewees felt that "Whoever is dead—is dead," i.e., what really mattered to them were the wishes of the remaining relatives and not the presumed wishes of the dead, who is believed to no longer have any wishes whatsoever. Most informants felt this to be the case even if it were they themselves who would pass away. Thus, respecting the wishes of the dead, which is a highly dominant argument in the bioethical and policy discussion in Israel and beyond, was found to be rather irrelevant to potentially affected parties among the Israeli public. Israeli society is often depicted as a rather traditional, family-oriented society, where individualism is less valued than in other Western democracies (Fogiel-Bijaoui 2002). Hence, in future studies, it would be interesting to compare this finding concerning a gap between the state policy, which builds on what is considered a global bioethical principle, namely respect for the individual wishes of the deceased, and local lay moralities, which were found to likewise value the possibly contradictory wishes of the surviving relatives, with lay attitudes in other cultures. It would thus become possible to examine how culturally specific is the dominant bioethical principle of respecting the wishes of the dead.

Another point of rupture between policy rationale and interviewees' opinions concerns the wellbeing of the child. While Israeli policy is pretty much silent about this matter, interviewees were more concerned. While more than half normalized PHR and did not think the child's future welfare should be a reason to personally avoid PHR or to publicly ban it, as children can grow up fine in all sorts of families, others resisted this practice on the personal level, primarily on the grounds of potential harm to the child, who will lack a parent.

Another clash between current trends in Israeli policy and the study findings is related to attitudes about PHG. Although IAG regulations (2003) and the Mor-Yosef National Committee's (2012) recommendations are not in favor of it, PHG seems to be on the rise due to family court decisions and a very active NGO. This clearly contradicts the wishes of the majority of the interviewees, who personally

disapproved of PHG, viewing it as overstepping the bounds of the accepted relationship between parents and their children.

However, despite the gaps between existing policy and what informants expressed as their own wishes, as well as between the policy rationale and interviewees' justifications for their opinions and attitudes, existing PHR policy is not expected to raise any opposition. This is due to the extreme liberalism of participants, who were diversified in their opinions regarding many matters, but almost univocal when it comes to public policy. Many interviewees who objected to PHR on a personal level were reluctant to formally restrict it. Thus, the permissiveness of current Israeli policy corresponds with the respondents' overall attitude, which strongly favors the idea of reproductive autonomy, and the common belief that "whoever is dead—is dead," and thus the wishes of the survivors are more important.

The present study is limited in a number of ways. Being a preliminary study based on a limited number of interviews, the status of its findings is provisional and consequently, the character of its conclusion is rather tentative. Furthermore, as qualitative research, findings may not generalize to the broader population in Israel or beyond. Hence, it is suggested that further studies should both examine the wider Israeli public and delve deeper into sub-groups unrepresented in this study, such as non-Jews, religious people, older people who might have a different view on PHG, and single women who may be interested in a non-anonymous sperm donation from the dead. Comparative cross-cultural studies could also be highly illuminating.

Furthermore, this study has asked for what people would wish to do in the tragic hypothetical scenario of their or their partners' death. Faced with the same situation in real life, their actions might be different, as what people do in reality is never fully predictable. The study could only glean informants' presumed wishes, which in themselves were often not entirely decisive.

The pool of respondents was heterosexuals wishing to eventually become parents together. It is possible that the way of life of such a population is biased in the direction of a traditional family structure, which may have affected their views. However, it must be noted that PHR does not easily fall into the dichotomy of traditional/alternative families, as it is both new and conservative simultaneously (Lavi, forthcoming). Thus, the direction of this bias is not easy to predict. Accordingly, further studies should broaden the scope to include additional family types.

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