
1. Introduction.
First of all, in this paper, I would like to explain the motivation that led me to research categories in bioethics through feminist thought. Different and diverse reasons do exist, but essentially I can outline one main motivation. The political passion for women’s issues is fundamental; women’s politics is the topic that brings us together and links us through all our life and since we were born.

Being a women is a way of living and a way of world experiencing. It’s a different way of ‘doing politics’, because you do it with women’s rights activism, with academic and scientific research, with voting and eligibility for election.

Being able to choose how, when and whether to engage in political action, is similar to being able to choose how, when and whether to reproduce. Both choices involve a diverse set of moral, juridical and social issues and have in common the opportunity to choose.

Being able to choose to do politics or not doing it, to have a child or not having it, means that women have to have cultural, legislative, social and economical tools to make a choice.

2. Bioethics and feminism.
Bioethics’ existence is felt by feminists as a new science which fixes morality and ethics in women’s personal choices: bioethics’ entry in the scientific system has been interpreted by feminism with suspicion, because for a long time women’s have seen everyone taking over their bodies. Instead, bioethics has borrowed ideas from feminist thought.

These ideas don’t always come from exact scientific studies’ sector, but from other arenas, such as: psychoanalysis, psychology, law, and social science. Actually when we talk about abortion and contraception we talk about freedom of reproduction and, with regards to new sexual reproductive technologies we talk about right to reproduction.

Bioethics as a new research field, deals with human intervention in sexual reproduction’s system, women’s freedom and female responsibility on life process. It defines conditions and limits until which exact science and biomedical technologies can push.

Scientific changes set ethical and moral questions. Feminism ha interpreted sexual technologies as a way of liberation, but also as an instrument of oppression by which men can control women’s procreation.

The real problem around reproduction’s freedom and sexual and reproductive rights concerns women’s health.

No one can bound and limit women’s freedom of generating or not. No one can limit access to rights using futile motivations, or inappropriate ones and non-responsive to interests and necessities of the person requiring it. The Italian Bill in Parliament on artificial insemination forbids to have insemination by a donator. The legislator justify the prohibition saying that the sperm of the husband is ‘more natural, than the one of a donator. Anyway we have to protect women’s health in both situations, as she would like to procreate or not.

To ensure that women’s health is taken into consideration, we have to demand an effective transparency in the scientific research; and an exhaustive information and a scientific control on the results are needed as well. We need to have knowledge on real and concrete risks on utilization and application of scientific techniques on woman’s body and on her physical and psychical equilibrium.

New reproductive technologies have influenced women in the contemporary society, but feminine requests on procreation and on sexuality have, as well, being relevant for women’s liberation process.
Techniques of intervention on human reproduction and power rebalance between women and men in private and public sphere of society, are transformations that depend one from each other. Law and the State gave political recognition to the specific relation of individuals with their bodies. New technological improvements in human reproduction have changed the relationship between women and their bodies and laws and States have given political recognition to this particular relationship. Such events have helped rebalance the power between men and women in private and public life. At the same time, women searching for different approaches to sexuality and reproduction may demand the improvement of reproductive technologies, State policies and laws. In the 1970s, while feminism was gaining recognition and visibility through women’s actions, bioethics was redefining the lines of human life. In the past century, feminists have analyzed women’s relationships while trying to find answers to questions related to the power of women’s bodies in patriarchal societies. This has led to women’s liberation. State policies often seek to limit the power of women’s bodies. Bioethics opposes such policies and legislation especially if they try to repress abortion and artificial insemination as bioethics promotes the self-determination of women and the power of women to make decisions about their own bodies.

It’s difficult to determine how much new technologies together with power rebalance process between men and women, have influenced the specific relation of women and their bodies; but it is useful to underline that woman’s body has been used but she has always been active in the evolution process to change the subjectivity she was submitted to.

Redefinition of social roles through new technologies influences symbolic and affective roles. This reflects on real-life of women and on her body. The meaning of body reflects the one of private and public life as an inaccessible location to social, law and economy. Women’s relation with her body has reflection in private and public sphere of society. So, while feminism gains recognition and visibility through women’s activism, bioethics redefines bounds of human life. During the 1970’s bioethics has become a place were philosophical, juridical, anthropological and exact scientific disciplines could meet. Bioethics is defined as ‘the systematic study of human behavior in the area of life science and health care, when that behavior is examined through moral values and principles’ (Warren T. Reich, Encyclopedia of Bioethics, The Free Press, New York, 1978; second edition Mac Millan, New York, 1995).

Actual society principles have been remodelled by technical and scientific innovations and by medical and biological development. These have been completed and ex novo rebuild taking into consideration female subjectivity. The issues that concern women’s body, in light of new reproductive technologies, are numerous and diverse: artificial insemination, surrogate motherhood, abortion, resources allocation for medical research, prevention and experimentation.

Since a long time Italian jurisprudence has already sentenced on determined issues to avoid the gap of lack statute law. Diverse themes compose bioethics and they are not new, but anyway, they have to be seen in a different way than before, because new technologies so require. We have to analyze technological evolution in relation with the people that uses new techniques, without any debate limitation, or access negation to new medical technique. We have to avoid not taking into consideration women’s choice. Unfortunately until now categories in bioethics, apparently neutral and asexual, have been used to outline the normal development of moral judgement, and have been achieved through research and analysis made by men and on men. All these have led to strong opposition of women; women required more attention to their personal life by legislator and, to achieve it, women created new and diverse instruments to affirm their subjectivity.

3. Women’s rights.
The debate on women’s sexual and reproductive rights is still relevant: women’s rights have been defined in international conventions has human rights and universal rights. Therefore no religious believe or cultural and religious extremism can justify violation of women’s rights. Thanks to women’s effort equality between men and women is seen as ‘the way’ to gain development and peace and not only as a purpose of achievement.
Women’s rights - such as: women’s right to self-determination, women’s rebellion against institutions’ interference on their bodies, right to abortion, to access to RU486 pill and to contraception - are in danger. Debate on women’s rights – such as legal access pregnancy voluntary interruption - forbids abortion rights. Law modification to make it illegal it is a political negation of women’s human rights.

Women’s body constitutes a political matter and men control on the procreative capacity of women it’s always a threat. This year from the 4th to the 16th of March at the 47th session of the Commission on the Status of Women, Government discussed about women’s human rights, such as, sexual and reproductive rights, trafficking, sexual exploitation, abortion and contraception. Government delegations didn’t find an agreement and the document was not approved.

Government couldn’t find any agreement to the most important matter that concern woman. They were not able to condemn violence against women made by States through perpetration of harmful and religious traditions. And therefore they authorized violation of internationals norms, like Convention on the Elimination of Discrimination Against Women (CEDAW).

Some States wanted to debate again women’s rights and partially eliminate the recognition to women of sovereignty over their own body, sexuality and sexual and reproductive health.

Having no document in an international meeting of the Commission on the Status of Women is very serious. In fact this is the first time that something like this happens since the Commission was established in 1946, to promote women’s rights in political, economical, civil, social and educative fields.

This episode reflects symptoms of a very worrying situation: conservative policy are expanding through single States into the United Nation, which is considered internationally a place of protection of women’s rights globally.

It is also a political and macroeconomic matter that regards transversal alliance of States against women’s life improvement.

Women from developing countries are the most in danger, because they have economics contribution thanks to internationals norms and financial provisions.

This is, as well, a signal: any meeting that women would officially organize after Mexico city 1975, Copenhagen 1980, Nairobi 1985, Beijing 1995, could led to a discussion on the acquired rights with retrocession danger and lost of what we have achieved and negotiated until now.

States want to control women’s self determination and what women do with their bodies. There are different ways to control women’s use of their bodies. It can be done also by surveillance through health treatment supply and medical services. States control financial budget and insurance benefits and target services that only women can require – like access to public services contraception, abortion, RU486 pill, artificial insemination, in vitro insemination, surrogate motherhood. As well, State control women’s body by refusing juridical recognition to specific health practice. Or even with a political intervention of family planning.

State interference in woman’s personal life can come also through biographic control, when women request determined health services. States utilize their women’s personal data, with violation of privacy rights. In particular moments of our history we have seen on local newspaper names’ publication of women that had access to abortion.

Some States’ institution have regret benefits allocation to women that deserved them because of their personal choice consisted on having an abortion. In some other States women have been imprisoned and in others they lost their life.

We have to remember that access to abortion, as a medical technique is not legal in many countries. This medical operation is disciplined by in Italy by law n. 194 of 1978 and has been confirmed by a 1981 referendum. Woman can interrupt pregnancy during the first trimester when the prosecution of it can be dangerous for her physical and psychical health; after the first trimester women can interrupt pregnancy only in the case of threat to women’s life or heavy anomaly and malformation to the unborn child.

Everyday this law is directly and indirectly attacked. In fact the pro life national and international groups ask for it modification and support a bill in Parliament on artificial insemination that would deprive abortion law of its legal status taking away the value of women’s life and health care, and legally institute embryo’s rights.

Access to abortion means granting every woman the freedom to decide how, when and if to procreate. We have to consider that some women sometimes could think that it’s more respectful to have an abortion than to have a child that will never be able to develop all the capabilities that he/she should have. Or in other circumstances that maternity is a right that can be achieved even through sexual reproduction techniques.

In both cases we are in front of a relation where the full participation of women is fundamental and for this reason we have to listen to free women’s choice. The product of conception will never develop if a woman
doesn’t welcome it; this welcome has to be understand not only physically, but also by imagination and fantasy.

4. Feminist thought.
Feminists’ thoughts have revolutionized bioethics fundamental principles. Feminists theories have wide the scientific approach of the three fundamental principle on which bioethics is based. These principle are formulated looking at criteria that justify moral believes. The principles are autonomy, utility and responsibility. The principle of autonomy is inspired by privacy right seen as the right of deciding on all the matters concerning body and individuals without any State’s intervention. Principle of utility for individuals and society is seen as fundamental for human action, and is based on the concept of happiness regarding costs and benefits’ theory. Principle of responsibility is utilized to avoid damage to others and is linked to the concept of prudence and dignity, in relation to action that can produce consequences.

Feminists’ philosophers have theorized women’s freedom and have criticized these categories. Feminist philosophers have rethought the fundamental categories of bioethics underling that the principles of autonomy, utility and responsibility have to be considered as a result of personal relations and of individual’s social contests. Moral problems characterize bioethics regarding individual life’s choices and relatives’ life. Feminism considers personal relation has inspiration’s models for life and for making personal choices. Feminist thought suggests creating different categories in bioethics, through a diverse approach to traditional ethics. In fact it criticize in deep and original way the debate on medical ethic and on bioethics, with promising contributes and with respect of gender diversities and different moral voices.

Women’s ‘self-identity’ in relationship is very important: traditional bioethics, instead, prefers abstract and general rules, while feminists oppose this general line. Besides that root’s research of oppression and other forms of injustice are relevant for social, economical and inequality structure.

The consciousness of the existence of numerous and different Feminisms, makes Rosemarie Tong, in *Feminist approaches to bioethics*, in Westview Press, Boulde, Colorado, 1997, reconstruct two main different feminist approach in bioethics. One is based on care and the other one is based on power. Even if feminist ethics are so various, through her writing, she was also able to individuate a common methodology. Different and variegated feminist theories and representatives compose feminism’s thought. Therefore feminist ethics and Ethic of care don’t coincide.

As well, ethic discussion has diverse perspectives and feminists’ proposals. Feminist different approach doesn’t have a common voice or a unique canon elaboration. Therefore I cannot analyze all of them but I can synthesize some of them. As such, I will be able in this paper to have a panorama on some different voices in feminist bioethics.

Shulamite Fireston, in *The Dialectic of Sex*, Bantom Books, New York, 1970, elaborates theory by which technological development carry freedom values for women; this believes makes her expressing that science and technologies will modify that science and technologies will modify science and natural aspects. Rebalance of women’s position in society will be done through new sexual and reproduction technologies, that will relief women from delivery. Therefore women will be able to access to male dominated space. Rebalance of female and male position affects the realization of justice and gives positive value to technologies and to artificial balance over natural one.

At the same time sexual reproductive technologies have transformed and redefined sexual relations. This has led to a new cultural and ideological dimension of feminist thought: “feminist stand point theory”. Body and sexuality values are seen as women’s specifically. Maternity’s revaluation is the most important result and it determines feminism’s affirmation over patriarchal culture.

Maternity new meaning is a source of women’s power: female reproduction consciousness, is seen as something that unite and associate all women and is linked to reproduction’s freedom and rights. Maternity recognize also one essential female’s role as an important and unique character of woman. Men are envious of women’s power of generating and therefore they desire to dominate women. Likewise ecofeminism wants to build ‘social commitment ethics’ through valorization of mother’s consciousness. Maternity gives special capabilities to women, such as protecting life and nature. These values are constantly menaced by patriarchal society.

The scientist Vandana Shiva, in *Sopravvivere allo sviluppo*, Torino, 1990, criticize patriarchal dominance and models on which industrialized culture have based their relation with environment and structured men and women relations. Governments consider nature without any value if it is not utilizable for economic and commercial scope, and women as well.
Refusing centrality of the economic market is an alternative to patriarchal thought. Rescue of relational female principles can help to recover ecological consciousness and transform it in practical policy to be able to build humanity in harmony with nature.

Diverse feminists approaches outline feminist vision of refusing an androcentric point of view of the world. Feminism tries to change paradigm denouncing male culture used as a universal parameter. As science has always reflected male ideology based on men control over nature, so patriarchy has always tried to control women’s body.

Feminism has demystified scientific discourse’s neutrality and researched knowledge’s epistemological criticism basing it on sexual differences. Alternative models to patriarchal ones propose a cultural change taking into consideration female peculiarity seen as a patrimony of humanity and therefore universal.

Feminist thought has led to a strong debate on different subjectivity’s changes with regard to female specificity. And it also led to critic reflection on science and technology and to the social impact of male-female role’s redefinition.

5. Ethic of care and relational autonomy.

Ethic of care wants to define attitudes involved by the solicitude’s concept towards individuals with hum we hare in relations. Ethic of care is an alternative category in bioethics and completes moral principle of bioethics. Carol Gilligan, In a different voice, New York, 1987, starts from the analysis of moral development of male child and female child in relation with the mother, to realize the existence of two different models of moral thoughts; one is male ethics and the other is the female ones. The author diversify male discontinuity in respecting rules from female’s emphatic approach of caring for others and female’s responsibility in interpersonal relations.

Male and female voices are different. Different is judging and action in conflict situation and in choosing morally and ethically. Male through individuation and separation process, elaborate fundamental morals based on the idea of consent between equal, following the individual freedom ethics on which is based the society of rights. Female gain judgement capabilities in connection to consciousness and gender identity, in relation with other and creating a collective responsibility ethics.

Morality is seen as care for others, and puts to the center of moral development responsibility’s comprehension and relations, while instead if we consider morality as equity right, norms will prevail. Ethic of care is based on caring for other human being, and it is built on more appropriate consciousness of reality and of daily needs and experiences of people. This category is utilized in bioethics also looking at relationship between patient and physician, trying to rebalance the asymmetric relation that characterizes this relationship, and trying to avoid paternalism and to give autonomy to patients.

The idea of interdependency between physician and patient is part of Ethic of care, and becomes symbol of categories in bioethics. Feminist culture is based on Ethic of care; while modality of specific women’s way of reasoning has been recuperated from Ethic of care, bioethics has given value to the notion of taking care, redefining the sense of medical profession on a moral base.

Ethic of care can’t be taken into consideration only to justify more attention of physicians to patients’ needs and looking at the relation between them. In fact Ethic of care looks up to ‘matters of life’ through a holistic approach and concerns both individuals’ and nature’s health.

So Ethic of care is shareable in spite of gender relation and it is universal. Some feminist thinkers see maternity as an essential element of gender identity, from which derive properly female values and knowledge.

We cannot superimpose the figure of biological mother on maternal practice; taking care of a new born is not implicit in the fact of giving birth.

Female ethics find new references and new categories based on different way and values than patriarchal society.

The explosive value of mother’s care paradigm became a new ethic paradigm and replace the contract one’s. Virginia Held, in Etica femminista, Trasformazioni della coscienza e della famiglia post patriarcale, Milano, 1997, underlines that mother’s cures are an ethical paradigm both for men and women through sharing.

Children care is accessible both to men and to women. Parent’s intimacy with their children comes from daily care, and this is behind gender differences. But the giving birth difference remains and it influences care responsibility over children. Rethink delivery as a
culture, ethic and society event can led to analyze it as unique and personal moment for women: creation’s capability becomes responsibility and care’s engagement.

Women’s point of view is fundamental in reflecting on the birth’s issues. In past years women’s abortion have diminished thanks to the new maternity concept and Ethic of care’s influences.

Through Ethic of care and relational autonomy principles, we can justify abortion because it grants a privilege to the specific role of woman and to the relation between woman and embryo. The relational dimension of pregnancy authorize to see self-determination and responsible autonomy as central part of the discussion, and to see that they are evident and not abstract concept, such as the hypothetical conflict between woman and the fetus.

It’s also undeniable that mother’s wellbeing positively influences the development of pregnancy and consequently the unborn.

Woman’s full participation, with her capabilities, in accepting pregnancy is fundamental because the product of conception will not develop if the woman will not welcome it.

Boccia, in Un crimale difficile: i corpi nella politica, la politica sui corpi, Sofia, Roma, 1997, expresses that welcome and care cannot only be interpreted in physical terms but also by imagination and fantasy.

Autonomy in traditional bioethics reflects liberal theories of individualism, and individuals are seen as ‘separated’, ‘independent’, and ‘rational’, ‘far away from what ever surrounds them’.

The centrality and the respect for autonomy reflects the respect for dignity and caring about people, and therefore autonomy has to develop relationally: feminist stated that self-determination and choices’ autonomy could be realized only where social condition and relationships with others allows them.

Relational autonomy is a kind of autonomy. It realizes that real autonomous choices don’t exist or they are very difficult to exist. People’s external and internal influences in a formal and substantial way are numerous and diverse. They can impress choices’ path and their content.

The relationship with the external environment constitutes something objectively relevant for the will of people. This way the environment in which we live in, the class to hum we belong, the kind of social and cultural role in society we have, but also other characteristic such as age, gender, ethnicity, race, sexual orientation, etc… are relevant for personal and interpersonal relationships of the person that has to make a choice.

To exert autonomy it requests the acquisition of power and education to responsibility.

Susan Sherwin, in No Longer Patient, Feminist Ethics and Health Care, Temple University Press, Philadelphia, 1992, supports the idea of people’s improvement decisional capabilities. Restriction and conditioning could compromise personal autonomy, making identifying the autonomous behavior with an apparent rational action.

Bioethics and traditional ethic have been influenced from north Americans’ freedom concept, constituted on male subjectivity, individualistic and rational: but since the beginning bioethics has underlined the conflict between patient’s autonomy and physician’s paternalism. Conflict exist also between the principle of autonomy and the principle of beneficency.

It’s important to realize that we gain autonomy through relations: autonomy is a conquest and implies individual’s responsibility regards health’s choices.

Communication, information, comprehension and empathy helps to gain capability that will help to make the right choice.

Relational autonomy’s attention is on women and on physicians, but it is also on social contest that influence woman’s subjectivity. Relational autonomy debates about oppressive society and life’s condition. It deconstructs old moral concept that impede decisional autonomy.

Relational autonomy and Ethic of care are pillars of new principles of justice, but feminists ethics are numerous and different and we cannot define them only as Ethic of care or power ethics.

Democratization of bioethics can be done through opening the debate to everyone and supporting consciousness of women’s choices through removing oppression, social injustice, marginalization, systemic discrimination and power asymmetries.

Seeing bioethics through feminist’s perspective enriches bioethics’ discourse, brings to a revision of biomedical practice, and suggests new issues to criticize the criteria of moral values.

6. Artificial insemination.

The reproductive field has been rethought and reinterpreted by women in different perspective: artificial sexual reproduction is one of the techniques that can help to have a child without a sexual intercourse, and it
interests women. Artificial reproduction can be *in vivo*, that means that fertilization is done inside woman’s body or *in vitro*, outside woman’s body in test-tube with following transfer. It’s not a cure but this technique helps those women that wouldn’t otherwise being able to have children. It can be a remedy to female, male or couple sterility. Can be homologous with gametes of the couple, or eterologous with gametes of a donator. In practice we have different kind of persons that would like to access to artificial insemination. There are women that want to have child without a sexual relationship because of sexual orientation or lack of male partner, there are others that want to have a child but cannot deliver it, or even women who’s living partner is sterile or her partner is death, but thanks to gametes’ cryoconservation they can be fertilized. Specifically surrogate motherhood is the most obstruct than the other techniques. Surrogate motherhood is based on an agreement made by women or between a couple and a woman. A woman will give birth to the new born without claiming any right on it. It is considered as an affection relationship between women and an extreme form of donation. Shalev, in *Nascere per contratto*, Milano 1992, considers surrogate motherhood as contract relation on the same grounds of the one that concerns male gametes. Procreative freedom becomes a positive liberty and it is different from reproductive rights’ concept that is a negative liberty: Lecaldano, in *Bioetica. Le scelte morali*, Roma, 1999, points out that the first one is a liberty of choosing modalities and times of procreation or access to contraception systems, while the second is build on recognizing the realization of maternity desire to women and having States’ obligation to create institutions and allocate resources for that. There are theories that pay attention to sexual and biological specificity of women’s body and see sexual reproduction techniques as an instrument of liberation; but also there are other theories that see sexual reproduction techniques as an instrument of constriction for women. The last theory exists because women’s body is utilized by biotechnology. Therefore woman could become a container of scientific development. Artificial insemination, crooconservation and womb implantation could be utilized to control woman’s fertility. Pateman, in *The sexual contract. Il contratto sessuale*, Roma, 1997, states that female’s self-determination in procreation policies has advantaged women through contraceptive systems, but authorize men to exploit sexual reproduction and to exploit women’s body production of oocyte and ovule for artificial insemination. It’s anyway relevant to see the different perspective, posing attention to women’s choices, and to men’s control on woman’s body and at women’s relations. Using and diffusing new sexual reproductive technologies consent to verify is these give power to women and if there are eventual repercussions and risks on women’s life, health and body.

7. Gender and power
Historical considerations made by Michelle Perrot, in *Donne in lotta per i diritti del proprio corpo, Corpi e Storia*, Roma, 2002 are relevant to understand that woman’s body is seen as an instrument of reproduction and it is central in parental and power’s systems. Women’s definition as an autonomous person is linked to the availability for her of her own body and to freedom of reproduction and contraception. This freedom is available also thanks to scientific progresses, but mostly thanks to women’s fights; but it has been achieved unequally in the world. State try to resist to women’s self-determination because it imply symbolic significance and for male dominance it is not tolerable. Therefore it is important to underline that bioethics regards mostly women. Woman’s body control can be done in different ways and can be possible also thanks to new technologies if they are used without women’s consent, choice and autonomy. Examples of lack of consent and information are evident in our society. There is lack of resources allocation for prevention of typical female illness. As well there are research done on women with wrong information – as the one on estrogenic hormone or progesterone’s quantity inside the contraception pill and inside the hormones given in substitutive therapy of menopause and oral contraception. Multinational pharmaceutical industries exploit women’s body. Women’s freedom is a revolution and its conquest is revolutionary. It is the biggest modern revolution and interacts with scientific progress and creates radical social and cultural changes in family and public relations. It’s a revolution in traditions and in laws.
Women’s body is autonomous: many factors have contributed to it, like scientific – with the discovery of non-natural contraception; political – with modernization of social and sexual relationships; demographic – with family planning and birth control.

Conservative representatives constantly want to debate on women’s rights because they think that they have the function of tutor of moral order and morality.

Male and female participation in activism to defend women’s rights is still important to achieve and to develop policy and cultural reflection and elaboration.

In order to analyze bioethics through feminist thought, it is fundamental to realize how valuable ‘women’s studies’ have been for theoretical and practical approaches to bioethics.

Feminist thought has created an important field of studies through debate and research in academic and non-academic arenas. Nevertheless, the field of ‘women’s studies’ is often far away from women’s activism and the fighting for self-determination and human rights. Re-thinking ‘women studies’ requires involving civil society as one way of empowering young women. Filling the gap between academic and non-academic life is a political matter. It requires knowing that women outside the University have as much importance as the ones inside.

Practice and theory cannot be seen as disjoined one from the other. Women’s activism has to melt together with university or post-degree studies on feminist theories - like women’s or gender studies - to gain power and visibility.

While non-governmental organizations of women, feminist collectives, and cultural associations have been developing feminist theories and practical approaches to society, women’s studies tried to stay away from social activism and active feminism.

Nowadays it is desirable not to have any division from theory to practice on feminism, hoping that activists will keep doing theory and theorists will melt together with the real world to defend women’s rights and to redefine the political approach on gender issues.

8. Historical background.

Law and women have a relationship, and law has always been relevant for women’s life. In Roman law, women were juridical incapable to represent herself and someone else on trial. She was not allowed to inherit and to be a citizen. The female infirmitas is the legal source of her actual lack of rights; in Medieval time, woman was used as an exchange of goods by which through marriage would circulate blood, name, property and noble title. The French revolution created civil rights also for women, such as inheritance rights, divorce, and her personal consent to marriage, without anyway recognizing political rights. Instead, Napoleon Code re-established family patriarchal order with father’s absolute power over children and wife. Husband’s power was over the surname, the administration of family money and goods, conjugal domicile, children’s education, right of correction and family abuses. It was tolerated husband’s adultery and wife’s adultery was punished with jail reclusion.

A total subjection to marital custody.

Women’s body was of the husband that could pretend ‘marital duties’, like procreation. He was allowed by law to blame the unfertile wife, to repudiate and abandon her and prove his fertility in another bed.

Until the first half of the twentieth century, physicians thought that infertility was always woman’s fault. In fact, anyway physicians still tend to experiment on women any kind of invasive and hormonal intervention, and afterward they verify that the reproductive anomaly is not depending on wives but on the seminal liquid of husbands.

During fascist time, procreation and breast-feeding were the only relevant aspect of women. It was prohibited to have any propaganda on contraception and abortion was considered a crime for the women and for the physician.

During Nazism women’s body was utilized to racial selection: woman’s body belonged to family, to the nation and to race and biopower was used on the mother-dominated body.

Women didn’t have any rights and was subjected to family rules; sometimes men’s power over women’s body was done through sexual violence. Unfortunately, this crime is still not punished because it is the women that has to prove it with her wounds, her resistance and her lack of consent. Normally common opinion thinks that: ‘it is impossible for a man alone to rape a women if she really opposes and resist to him’. Than having a gynecological visit is humiliating as to have to speak about your own intimacy in public.

Feminist approach can explain bioethics more completely. It has, as well, specialized approaches to include diverse models of interaction and can welcome diverse complexity of human relations.

A change of paradigm is needed in bioethics, because we have to change the ones that used male as a referent for our society. We have to exceed the cultural, social, economical, juridical and political male supremacy on female, looking at new models and ways of being.

We need to provide space to human emotions and incorporate this emotions to political matters and issues engagement. Moral theory must accept diverse experiential criteria and model judgments taking into consideration feeling and sensitivity. Without taking away values to general principles, we have to take into consideration the value of each individual life.

Feminist bioethics analyzes diverse issues approached by traditional ethic and bioethics and by medical models. It rereads bioethics in a different perspective; it criticizes abstractness of traditional moral theory and of impartial and universal principle; it puts attention to social and family justice; it opposes to theory of neutrality of science and to individual liberalism of autonomy; it gives relevance to relations based on empathy, emotions, and care’s virtues in moral field.

Feminist bioethics takes into consideration already used principle and paradigm and reinterprets them with the above considerations, trying to interact the diverse perspective and to find common paths and methodologies.

Ethic of care involves public and private sphere of society and it is used to rethink ethics and politics, posing doubts on fragmentation between private and public world and on the consequent double moral.

The project of humanization of medicine starts also from here, with demystification of the neutral moral subjectivity.

Feminism considers unjust the power relation between man and woman and tries to discover roots and causes of gender oppression and ways to get over it with a divers ontological - trough a new self-conception –, epistemological – through a new theory of knowledge -, and political foundation – through a rebalance of social roles -.

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