Readings


Class Business
Biopolitics, ideas of reproduction, gender, kinship, at a local level. Gender-kinship ideology, the local moral world. National identity, national security.
Who has access, who doesn’t?
To what extent does the availability of care affect access?
How do we define nature or nurture? What do we mean when we talk about the human?
What are the borders between species?
To what extent are those ideals able to be resisted? Are they means of reinforcing these existing stereotypes of gender?

Background reading of Stem Cell reading—chapters of science of stem cell research for next week

Student presentation
“Fertile Ground: Feminists Theorize Infertility.”
- Thompson works on pronatalist technology, in situ biological diversity conservation, infertility in the age of the perfect feminist text
- Infertility as a text—to read debates about gender, economics, law, race, etc., a black box that can be revealed much about culture.
- The medicalization of infertility, gender stratification, consumer-oriented business.
- Phase 1: burden of infertility vs perpetuating gender stratification and roles; feminists wrote about infertility as a crisis, rejecting masculinity… more later
- Feminists were worried about regulations not keeping up with technology and various NRT abuses, did not increase reproductive choice, potentially optimistic, to reduce class differences
“Just say no” tone—to what extent does availability of these technologies reinforce view that women’s identities are solely as mothers?

Feminists say that technologies reinforce existing gender division and power inequalities, reifying view that women should be mothers – that this role is natural, the way they should be.

Reform movement—provided patients with better information on their choice

Technologies only selectively increase choice for those with money

Phase 2: the paradox of infertility—provide treatment while reinforcing gender roles of women

Moral uncertainty of beliefs in feminism: women’s essential nature of motherhood; technology could be empowering, enabling to achieve essentialized role.

Page 65—experience of infertility, NRT, how society is stratified as well as the individual experience of infertility, privacy issues.

Relationship of mother and the fetus—do you think that the technology increases or decreases one’s subservience to technology?
  
  o Matter of context—clearly can be oppressive and reinforce these roles, but can also be used to break down stereotypes
  o Patriarchal vs feminist views are just as oppressive
  o Until Israeli’s women’s voices are heard, we don’t know how they feel about silencing their voices—how honest are people going to be in oppressive situations? Roberts talks about this in the 2nd chapter.
  o How much is culture oppressive? If culture is normative, thing beyond the norm will feel oppressed.

Valorizing the male model of living—the male standard as a pedestal, are you really solving anything?

Feminist writers wondered about the technological push. Society should hold off implementing the technology, if there are no legal means to supply it?
  
  o Policies are usually retrofit; can technology’s impact be predicted? Note chimera article.
  o Part of bioethics is trying to have some guidelines to evaluate these practices and guidelines?
  o Can the technology be moved from the West to Israel, wholesale? Oguz article on IRBs, trying to create them in Turkey

How do you think resources should best be spent? Preserving the medical commons—Hiatt would probably say no, the cost-benefit ratio is way off, but individuals would disagree with that. If you’re rich, you can have a certain tier of medical services. If you’re poor, tough luck. Massachusetts—IVF treatments covered by insurance by law, drives everyone’s premium up.

Does everyone have the right to get treatment? As long as they desire it—but it’s not feasible to get it. Is this a fundamental right?? IVF is unlimited up to two children in Israel only for residents (not Palestinians). Cost-benefit analysis—infertility treatment, a billion dollar business—what does society value? (say, vs adoption)

Infertility—promoting the fact that they are infertile—how society promotes this ideal of genetic parenthood
• What resources should be allocated and why?

**Heather Paxson: anthropologist from Stanford, now at MIT**

• Ethical relationships that engage self, body, others, and to an exploration on food
• Fertility technologies—IVF has on Athens Greece, how they are related to nature, the power of the woman, motherhood. In traditional Greek ideologies, the purpose of a woman’s body was to give birth. Now women entered the work field to establish gender differences.
• What it meant to be an adult versus an adult woman (1865). Expected to exercise reasonable decision making. Birth as completing motherhood.
• Page 1855: background on falling fertility rates; Turkey vs Greece does not bode well for national security.
• To what extent does the state’s concern for its own military and other economic security influence how these technologies are perceived?
• Nigeria article, last week, how the state was concerned, contraception, questions of modernization
• Dinka article, how women were encouraged to have children to replace the children lost in conflict
• Infertility treatments gave the women more power—that women do, that men agree. Women feel heroic, making a maternal sacrifice, the differences in USA view and Greek view. 1859—wrote that women taking charge of nature, naturalness of IVF; or intervention to correct damage done to them by nature. Different ideas of nature, artificial v assisted fertilization
• Viewed as patients or clients
• Emotional effects of hormonal treatment—stress reactions, pathologized/medicalized experience vs emotions seen as a social performance; very different ideas of embodiment, technology
• very different conception of anatomy, reproductive anatomy—because IVF occurring outside the body.
• How does social stigma apply? Childlessness—series of expectations in kinship or lineage system? Pressures on the individual, that they become parents.
• Covering up male infertility
• What is nature and what is natural? it is a contextual meaning? Unnatural because it’s… technological, it’s new?
• Why do people care so much about what is natural?
  • Why do people feel like they must hide, why is there a stigma? Society’s view of what a family really is? Italian or Greek culture is family-centered—is that genetic link or what?
  • Social vs biological relatedness
  • Psychological notions of kinship—motherhood bonding experience, in addition to social or biological
• Motherhood is a process of becoming a mother, not actually having the children—Paxson—depiction of women becoming adults through reproducing, constituted as an agent, an adult.
  • Having a child is like a ritual process
Could we see single Athenian women with children, to be a complete woman of status?

- The stigma—the un/natural idea—being different, accepted, what is normal.
  - Is infertility a disability, a disease?
- How does IVF affect gender relationships?
  - Infertile couples shifted to women’s power relationship; having IVF validates the woman. IVF can be a liberating or empowering tool
  - The woman wants to fulfill that social burden/responsibility; why women accept it so readily—

Culture is a normative process, defines who is good and bad. Who has the power to decide what is normative?

**Kahn. Anthropologist, Near Eastern, Judaic studies.**

- Culture is a normative process, defines who is good and bad. Who has the power to decide what is normative?
- Israel—unlimited IVF for up to 2 children, pronatalism, that people of Israel, to make up for loss of people in Palestinian, new state, against anti-semitism
- Ultraorthodox Jews make up 5% of population, isolated, speak Yiddish, wear different clothing, more unemployed, 3 times as many children.
- Highly regulated to ensure no mistakes
  - Artificial insemination, ovum donation—considered to be adultery, physical or biological?
  - Why did someone need overseeing the process? Illegitimate child, hereditary, kinship, spiritual ties with the Jewish family
  - What is legal, what is normal, what is religiously acceptable?
  - Question of adultery—adulterous union is stigmatized, etc.
  - What was eventually considered to be okay was if the sperm was non-Jew?
- Embracing of the technologies of what it can afford and do
- Pronatalist—women do not do so as atomized in free market; pro-natalist religious system.
- What are the challenges of implementing a new technology? How do we need an infrastructure? Who decides what is important or valued?
  - “Traditional” societies—welcome to new technologies? Reinforcing the legal order
  - Working with the law, getting around the law?
- Couples are taken case by case; morally legitimate—local moral world
  - What is a legitimate person?
- National agenda—issues of security, biopolitics
  - Traditional idea of a woman—hand to hand to fulfill social roles while fulfilling the state agenda
  - Economic status of ultraorthodox is low
- How do you think IVF affect Israeli kinship? Page 291—problem of husband’s status and selection of woman
• Refitting, promoting a conservative view of kinship structures, rather than reforming it
• Contraception—is there reproductive choice in this local moral world, if state, religion promotes only side—the full range? Is this a very Western question?
• Reproductive freedom—social standard to produce a lot of children
• The state following social ideas—do economic conditions shape what the state does? Does the statewide support affect perceptions of the technology, birth rates, or is the state a product of society?
• Should this be a private sphere or a public sphere? How much choice is there—questions of “choice”, autonomous individuals, or other—but what about other pictures? and the involvement of the state?