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Elizabeth A. Dedrick
University of South Florida

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The Politics of Being an Egg “Donor” and Shifting Notions of Reproductive Freedom

by

Elizabeth A. Dedrick

A thesis submitted in partial fulfillment
of the requirements for the degree of
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Major Professor: Carolyn DiPalma, Ph.D.
Marilyn Myerson, Ph.D.
Cheryl Rodriguez, Ph.D.

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ABSTRACT

As an Assisted Reproductive Technology (ART) that has been available for over twenty years, the transfer of healthy eggs from a presumably fertile woman into the womb of a woman diagnosed as infertile has become a common part of the landscape of human reproduction in the United States. Yet the general societal acceptance of this practice commonly known as “egg donation” oversimplifies the complex medical, ethical, and societal issues ignited by its use. In light of the limited critical discussions presently occurring about egg transfer, I will interrogate some of the silences and more ambiguous issues invoked by its practice. By giving particular attention to the often ignored experiences of egg “donors,” I will analyze the popularly used discourses around this ART. In doing so, I will investigate the ways in which egg donation complicates notions of altruism, autonomy, and exploitation as well as what consequences this has for women’s reproductive freedoms as envisioned by many U.S. feminists.

Prologue

I have been keeping a secret for the past year. I realize that such a confession is not a typical beginning for a thesis. Yet as a feminist researcher and scholar, I am conscious of the significance of my own experiences and beliefs to the directions and content of my scholarship, and thus feel that now is the time to bring this secret to light. To divulge this secret outright, I have discovered that I can pay my way through graduate school by participating in a highly profitable marketing scheme in which my body serves as the merchandise. While this prospect may seem offensive to many in U.S. society – perhaps even those who are fiercely capitalistic – disclosing this fact as a feminist is certain to raise even more critical eyebrows among my colleagues and peers, because of the central role the body has played in feminist struggles throughout history.

And isn't this prospect of profiting from the use of women's bodies directly illustrative of the many dilemmas with which feminists, and women in general are typically confronted? The female body – as the target of violence and rape, the sexualized object of male fantasy and fetishization, an incubator for breeding slave or labor forces, or the object of numerous other abuses throughout the past and present – has, and continues to be simultaneously a main source, and site of women's oppression. With such a legacy of manipulation, abuse, and degradation of female bodies, I could not help but feel that my willing participation in practices which involved my procurement of

financial gain through the use of my body would be seen as unacceptable and purely unfeminist by many of my peers.

Some points of clarification are certainly necessary here, as our society has concocted numerous ways in which women can profit from the use of our bodies – not all of which are objected to by all feminists. These lucrative uses of women’s bodies may be based on aspects ranging from our appearance, to our sexuality, to our reproductive capabilities.¹ The last category is the one on which I will focus because the marketing scheme with which I involved myself is an Assisted Reproductive Technology (ART) typically referred to as egg “donation”² – or as I will refer to it, egg transfer. The practices of egg transfer raise many technological, ethical, and moral issues for any society in which they are used.

Through my exploration of this topic of egg transfer, I will focus specifically on the issues of altruism, exploitation, “choice” (as understood within feminist frameworks of reproduction), and their significance within the contexts of ART for contemporary women’s reproductive freedom. Obviously, numerous other concerns and questions arise in relation to these issues, including: what does it mean to have “a child of one’s own” and why has our society placed so much value on families that are based on biological and/or genetic relationships? What consequences could egg transfer have on a donor’s health in the distant future – particularly in light of the fact that this has not been studied yet? Who should have access to egg transfer and should it be covered by health insurance? How might egg transfer be forwarding a eugenic agenda? What role are racist, classist, and heterocentric stereotypes playing in structuring access to egg transfer and other ARTs? How does a lesbian’s use of her partner’s egg subvert legislation in

many U.S. states that make it difficult or impossible for same-sex parents to have joint custody of their children? And most fundamentally, are researchers, practitioners, and user of ARTs conscionably justified in spending billions of dollars on improving and employing such “high tech” methods of reproduction when countless women all over the world cannot gain access to even “low tech” resources such as condoms and contraceptives, or adequate pre-natal care?

This broad range of inquiries offers merely a sampling of questions that are sparked by egg transfer, and other ARTs. Therefore a thorough study of this topic would require the exploration of a wide range of topics spanning from our changing notions and definitions of family, kinship, and motherhood, to the ways in which egg transfer and ARTs in general perpetuate the conflation of womanhood with motherhood. My hope is that my examination of altruism, exploitation, and “choice” as they relate to egg transfer may offer new perspectives on these broader related issues.

Considering the issues of egg transfer in relation to both the donor and recipient expands this field of inquiry exponentially. However, a preliminary glance at the pool of information available on egg transfer shows that the experiences and concerns of infertile women who utilize donated eggs have already been the focus of extensive research, political debate, and social policy, while the experiences of egg donors have been largely ignored. Thus, I believe the situation of egg donors deserves much greater attention.³

My opinion on the need to consider donors’ experiences is significantly based on my own association with this ART, as well as my observations of contemporary representations of egg donors. To explain further my own involvement with the practices of egg transfer, there was a time during which I found several aspects of the egg transfer

process (i.e. the financial compensation, the prospect of helping women suffering from infertility, and the opportunity to pass on some genes that I have experienced as being rather good) to be quite appealing. At that time, these attractive components of being an egg donor prompted me to consider it seriously enough to undergo some of the initial screening phases for becoming an egg donor at two local infertility clinics.

Ultimately, I chose not to offer my eggs to these or any donor programs, mainly because I could not reconcile several of the tensions that will be addressed in the following chapters. While I have never been an egg donor, my interactions with the staff of donor programs, as well as serious contemplation of how my participation in this process might impact my life, is what largely sparked my intrigue in this research topic. Thus, questions about the egg transfer process within my own experiences are significantly responsible for my research into the implications of this ART for women donating their eggs and our society as a whole.⁴

Without question, the issue of egg transfer is monumentally significant to both donors and recipients, as it inevitably has serious and long-lasting effects on both women's bodies, psyches, and emotional selves. My objective in focusing on the experiences of egg donors is not meant to disparage or demonize the women using those eggs – they obviously are driven by a wide range of social and personal motivations which largely reflect the painful personal and social burdens that accompany infertility (see Becker, 2000).

Yet as Haraway (1997) argues, continuing to examine situations such as egg transfer from the privileged perspectives of egg recipients constructs a very exclusionary portrayal of these scenarios. In speaking about reproductive freedom more widely,

Haraway states, “Working uncritically from the viewpoint of the ‘standard’ group is the best way to come up with a particularly parochial and limited analysis of technoscientific knowledge or policy, which then masquerades as a general account that stands a good chance of reinforcing unequal privilege” (p.197). In the interests of contesting such situations of unequal privilege and broadening the current discussion on women’s reproductive freedom, I will examine the implications of altruism, exploitation, and “choice” by bringing forth the typically marginalized interests and concerns of egg donors.

¹ I see it as no coincidence that each of the realms in which women’s bodies are typically marketed fit within one of the two gendered scenarios that have defined women’s existence throughout much of Western history, i.e. the (virgin) Mother or the whore.

² The large majority of medical, infertility, and popular literature unproblematically refer to the practices I am discussing as egg “donation.” I however, find this terminology to be a misnomer in many of the instances of its use because monetary exchange or other means of compensation are awarded to the egg “donor” (i.e. the woman who produces the eggs). While I would ideally prefer to refer to the process as “egg transfer” throughout this paper as Shanley (2001) does, I think such efforts would seriously hinder the clarity of my discussion by frequently resulting in excessive wordiness. Where possible, I will substitute the terminology of “egg transfer,” but I ask that my readers remain conscious of my objections to the terms of egg “donors” and the process of egg “donation,” even as I utilize them in my vocabulary.

³ Any discussion of the experiences of egg donors obviously invokes consideration of the male process of gamete donation known as sperm donation. Because egg and sperm donation both involve the contribution of one’s gametes to a child that the donor does not intend to parent, many people are tempted to compare these practices. Although contrasting the perceptions of these two practices can be useful in examining their gendered contexts, I find that the differing levels of participation and consequences for each type of donor, as well as the different expectations of each type of donor (based on gender norms), make it problematic to assume that egg and sperm donation can simply be paralleled. See Haines (1993) for an expanded version of this argument.

⁴ I offer my apologies to any of my readers who feel deceived by the initial disclosure of “my secret.” The intentional vagueness I applied in terms of having “discovered that I can pay my way through graduate school” with egg donation is not meant to be misleading purely for the sake of trickery. The following discussion is intended to challenge and disrupt many of the presumptions about women, bodies, and reproduction that are harbored by much of American society. Thus, I felt that it would be important for my readers to consider what assumptions about egg donation they are carrying into their reading of this paper.

Introduction

In order to examine the many medical and societal intricacies involved in egg transfer in any depth, I think establishing some background information on the processes of egg transfer, and their contexts within ARTs more generally, is necessary. Thus, I will begin with a brief explanation of how egg donors are matched with recipients and the medical procedures involved.¹

The Practices of Egg Transfer

Egg transfer is the retrieval of anywhere from fifteen to twenty² presumably healthy eggs³ from one woman to be fertilized and implanted into another woman, with the hopes and intentions of resolving infertility⁴ (Shanley, 2001; Borrero, 2001). The development of egg transfer, first successfully conducted in 1983,⁵ was enabled by the innovation of in vitro fertilization (IVF) technologies five years earlier in 1978. Following the emergence of IVF, a whole string of new biotechnologies, including egg transfer, rapidly emerged to transform the practices of human reproduction by offering people opportunities they had never had before to treat their infertility (Lindheim, 1998; Davis, 2003).

Egg transfer begins with a diagnosis of infertility because without such conditions, the need for procuring healthy eggs would be obviated. Once an infertile person or couple decides to use egg transfer, they must be coordinated with a woman who

is willing to provide her eggs, which typically is arranged in one of two ways. In some instances, this process may take place within a family or among friends, in which case it is referred to as “known donor.”

The alternative arrangement is known as “anonymous donation” in which infertility clinics or egg donor programs recruit women – often through advertisements in community or college newspapers, billboards, or word of mouth – to provide their eggs (Borrero, 2001; Gorrill, 1998). In these instances, donors frequently receive financial compensation for their “time and inconvenience,” usually ranging in amount from \$1,500 to \$5,000⁶ (Macklin, 1996; Merrick & Blank, 2003). Some instances have been documented in which people independently seeking donor eggs (i.e. not through a clinic or egg donor program) have placed advertisements for donors whom they wish to possess very select and elite characteristics.⁷ Such solicitation ads have been quoted to involve compensatory donor fees running as high as \$100,000 (Gurmankin, 2001).

Anonymous donation may also occur in situations of egg sharing in which women undergoing infertility treatment agree to give half of their retrieved eggs to another infertile woman in exchange for a reduction in the costs of their own infertility treatment. As Gorrill (1998) indicates, the frequency of egg sharing has greatly reduced since recent technologies enabled cryopreservation of fertilized embryos to be used at a later time.

Whether egg transfer involves known or anonymous donation, both the infertile individual or couple, and the egg donor must submit to extensive medical and psychological screening to determine their physical and emotional fitness for undergoing this process (Gorrill, 1998). In cases of anonymous donation, the medical and psychological history and status of potential donors is included in a profile compiled by

donor programs that also generally includes physical descriptions of the women, information on their sexual and reproductive history, details of their family relationships, and descriptions of their interests. These profiles are then scrutinized by potential egg recipients as they search for the donor who best meets their criteria (Blacksher, 2000).

When a willing donor has been matched with a recipient, the medical aspects of the egg transfer process may begin. The transfer of eggs from the donor to recipient is initiated by the suppression of the ovaries of both parties by daily self-injection of gonadotropin-releasing hormone (GnRH). These injections, which typically produce menopause-like symptoms such as hot flashes and insomnia, are used to synchronize the menstrual cycles of the donor and recipient so that the maturation and readiness for fertilization of the donor's eggs will match the recipient's period of endometrial receptivity⁸ (Shanley, 2001; Buster, 1998).

Following about three weeks of GnRH injection, the donor switches to injections of follicle stimulating hormones (FSH) to hyperstimulate her ovaries, causing them to mature an unusually large number of eggs. While the donor injects FSH, the recipient takes an "exogenous hormonal regiment" that simulates "the pattern of hormone secretion occurring in the natural menstrual cycle" (Borrero, 2001, p. 170) to prepare her uterine wall for implantation of the fertilized egg. After the donor's egg-containing follicles have had time to mature, she takes human chorionic gonadotropic (hCG) to prompt ovulation.

Between thirty-four and thirty-six hours after this final injection, the donor is sedated intravenously with a local anesthetic and a doctor retrieves the eggs by transvaginal oocyte aspiration. This procedure involves the doctor locating the egg

follicles via ultrasound, inserting a needle through the vaginal wall, and capturing the eggs by sucking them into the needle. If the eggs are to be fertilized in vitro (as opposed to in the recipient's body), they are placed in a culture dish with the sperm.

After about twenty-four hours, the eggs and sperm that have fertilized are placed in an incubator for an additional day, after which, the strongest three or four embryos are introduced into the uterus of the recipient via a small catheter. In most instances, the recipient must continue taking additional hormonal injections for a short period following the transfer in order to facilitate the implantation of the embryo in the endometrial wall (Shanley, 2001; Borrero, 2001; Buster, 1998).

During the twenty years of its use, the processes of egg transfer have increased in sophistication and effectiveness to the point that procedures using fresh (i.e. not cryopreserved) donor eggs have the highest rates of all ARTs in terms of both pregnancy and live births, at 51% and 44 %, respectively (Wright, Schieve, Reynolds, & Jeng, 2003). Yet despite these notable success rates, most infertile people typically decide to utilize "donated" eggs only after several years of failed attempts with other ART treatments (Becker, 2000)⁹.

Even in light of the apparent hesitancy of people to resort to egg transfer, the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) offers specific figures indicating that the egg transfer process affects the lives of many Americans. According to the NCCDPHP (2003) report, "donor eggs or embryos were used in slightly more than 10% of all ART cycles carried out [in the U.S.] in 2000, or 10,389 cycles." Based on recent trends, figures indicating even higher uses of donor eggs over the past four years have been anticipated.

Contextualizing Current Perceptions of Egg Transfer

With upwards of 10,000 cycles of egg transfer occurring each year, there surely must be thousands of women, if not more, who have provided their eggs to other women dealing with infertility. In returning to the confession I made at the beginning of this thesis, such contexts may lead my readers to wonder why I felt so compelled to keep my consideration of becoming an egg donor a secret.

Granted, a willingness to donate, and the act of aiding others in their quest for parenthood is certainly a noble undertaking. The goodness of egg donors inherent within this willingness to aide people they may not even know, has been widely emphasized through heightened attention to the apparent altruistic nature of women's participation as donors. Additionally, women's ability to control their own bodies and make free choices about the use of their bodies (as some feminists argue egg donation is) can be viewed positively as a form of women's empowerment. Furthermore, in an era when the first American generation to include individuals whose conception occurred in a Petri dish – rather than their biological mother's body – are now adults, our society certainly is familiar with the transformation of practices and perceptions of reproduction prompted by ARTs. Yet many of the dynamics involved in the egg transfer process – particularly those that may pertain to feminist conceptions of reproductive freedom – make the admirability of egg donation much more ambiguous.

Unequivocally asserting a well-defined set of feminist beliefs about reproductive freedom or reproductive rights is impossible. Just as feminist theories and beliefs vary by groups and individuals and across time, so too do visions of what counts as, and is encompassed by the concept of reproductive freedom. Despite the variety of feminist

standpoints, I think it is safe to contend that reproductive freedom in general, is grounded in feminists' belief that women should be able to choose to have or not have children in contexts that are free from coercion and exploitation.

In reflecting back upon my own experiences, I think I felt the ambiguity of egg donation's admirability very intensely due to my commitment to feminist ideologies. I believe that my desire to keep the use of my eggs for financial gain hidden from my feminist cohort is due to my fear that it would be perceived as a disregard, or even assault on some of the beliefs that have been most fiercely defended by feminists throughout U.S. history. Namely, as a woman, the act of profiting financially from the use of one's body could be viewed as counteracting centuries of feminist efforts aimed at enabling women to control their own bodies and freeing them from situations of bodily exploitation in all of its forms (Tong, 1996; Petchesky, 1995). Such a position presents an obvious contradiction to my earlier comments – that egg donations is seen by some feminists as a form of women's empowerment. This contradiction begins to illustrate the wide variety of feminist perspectives on reproductive freedom.

Within current contexts of egg transfer in the U.S., the component of financial compensation for donors and the risks they undertake present the greatest points of debate in terms of applying feminist notions of reproductive freedom to this ART. In defense of the practices involved in egg transfer, the argument can be, and frequently is made that women are not being exploited through the use of their bodies (or parts of their bodies) in this way (Dickens, 2001, Dill, 2001). At no point are women forced or coerced into participation, as there are numerous other ways in which graduate students (such as myself, for example) or other financially strapped women can procure needed

funds including employment, loans, grants, etc. In fact, could women's decision to donate their eggs actually reflect the gains won by feminism, in that women make the choice on their own to use their bodies in whatever manner they wish? As some feminists contend, might this be just one more way in which feminist battles for reproductive freedom have empowered women?

Such questions concerning the status of women's reproductive freedom within the contexts of egg transfer prompt the interrogation of issues such as women's bodily autonomy and the potential for exploitation of donors. As a result, debates over the utilization of egg transfer – held both within and outside of feminist contexts are shifting our societal views of contemporary women's reproductive freedom.

In considering the weight of women's motives to become donors as well as the personal and social consequences of their participation, the arguments made both for and against the practices of egg donation present several confounding points of tension to feminists' theoretical and practical efforts to protect and empower women. Thus, I contend that the time is ripe for a close examination of this topic and the complex dynamics it entails in order to confront the implications it has for the ways we think about women and their bodies, as well as the reproduction of our species and society.

In the following chapters, I will specifically attend to the impacts of egg transfer on feminist frameworks about reproductive freedom. In order to accomplish this, I will examine how the discourses around egg transfer and the representations they produce complicate notions of altruism, autonomy, exploitation, and "choice." Chapter 1, "Lost in the Transfer: Disappearing risks through the idealization of altruism" will provide a framework for this discussion by identifying the ways in which representations of egg

transfer construct narratives that highlight the altruistic motives of donors and minimize the risks and consequences they face. More specifically, the emphasis on altruism is magnified and the attention to risks disappears in the translation of professional egg transfer literature for lay members of society. In considering the gaps between these representations, I will explore the contributions of ART practitioners to cultural perspectives of egg transfer and their impact on the experiences of donors.

Chapter 2, “Analyzing the ‘Choice’ and Gendered Assumptions behind Donation” will conduct a more in-depth analysis of the consequences that emerge from the hyper-emphasis placed on altruism as a donor motive in representations of egg donation. Specifically, I will examine the ways in which the notion of bodily autonomy is foundational in making the representations of donor altruism plausible. The connection between the premises of altruism and autonomy will be woven to include their influence in reifying normative gender expectations through hidden discourses of self-sacrifice and maternal giving. Furthermore, the issues of informed consent and the appropriation of pro-choice rhetoric perpetuated by assumptions of altruism will be challenged.

Chapter 3, “Deciphering Donor Fees: The dynamics of commodifying and exploiting egg donors” will build off of the first two chapters which function to pull financial incentive as a donor motive out from under the conveniently prominent guise of altruism as the only factor motivating donors. By considering egg transfer as a means of commodifying bodies, or parts of bodies, I will discuss the degree to which this results in situations of donor exploitation, as well as how this may be shaping contemporary perspectives of women.

To integrate the discussions of altruism and autonomy with that of the potential for exploitation, chapter 4, “Re-conceiving Reproductive Freedom,” will attempt to assess the ways in which these three concepts operate simultaneously within the representations of egg donation. In doing so, I will explain how current representations of egg transfer reflect discourses that equate women’s reproductive freedom with stewardship. Because such notions are a shift from earlier perspectives of reproductive freedom, this concluding chapter will use the concepts of altruism and donors’ freedom from exploitation explored in prior chapters to consider the ways in which the development and increasing use of ARTs such as egg transfer are impacting common perceptions of women’s bodies and rights.

¹ While the medical procedures involved in egg transfer are the same for most cases within the U.S. and in other parts of the world, the social and political dynamics around this ART certainly vary within different societies. Unless otherwise indicated, my discussion is regarding egg transfer only in the U.S.

² The number of retrieved eggs can of course be lower, but some reports indicate that upwards of 45 eggs have been obtained from single retrieval cycles (Kalfoglou & Geller, 2000).

³ Medical and scientific literature also refers to eggs as oocytes and ova.

⁴ Generally, infertility refers to an inability to conceive after one year of unprotected heterosexual intercourse (Becker, 2000). In cases involving egg transfer, the causes of infertility include early onset and physiologic menopause, surgical sterilization, as well as ovarian failure due to such experiences as radiation, chemotherapy, or increasing age (Lindheim, 1998). Cases eligible for egg transfer may also result from “women carrying transmittable genetic abnormalities which could affect their offspring” (Davis, 2003). I also recognize that other uses of egg transfer are emerging as its use is becoming more commonplace. For instance, a fertile woman may be implanted with a fertilized embryo (not using her own egg) for the purposes of surrogacy, or joint “biological” motherhood within a lesbian couple. While these scenarios certainly raise many important issues, my discussion of egg transfer will exclude situations involving surrogacy and shared biological motherhood because I can not do justice to the significance of these issues within the contexts of this paper.

⁵ Although the first successful human egg transfer procedures occurred in 1983, the first births from the initial uses were not reported until early 1984 (Buster, 1998).

⁶ The provision of financial compensation to egg donors is the practice that, by and large, differentiates uses of egg transfer in the U.S. from all other countries that utilize this practice (Sauer, 2001; Mead, 1999).

⁷ The elite characteristics that tend to be sought after by such advertisements include high intelligence (usually as measured by SAT scores), fair skin, tall, light colored hair and eyes, as well as athletic and

musical talents (Mead, 1999; Wilding, 1999). The potential impact of such selection criteria has been criticized for contributing to a “new eugenics” kind of thinking that risks the promotion of some societal characteristics at the cost of eliminating others which are viewed as less desirable (Becker, 2000; subRosa, 2002)

⁸ If the recipient has already undergone menopause or does not have ovarian function for another reason, the hormonal injections are unnecessary for her. Also, if the recipient intends to freeze the fertilized egg for later use, the injection of hormones to synchronize her cycle with the donor’s cycles is again unnecessary.

⁹ Becker (2000) indicates that the resistance to immediately utilizing the more successful practices of egg transfer is due in large part to people’s desire to have “a child of one’s own” (i.e. one conceived from the gametes of the people who wish to be parents). These same feelings are used to explain why many people ultimately choose to use egg transfer rather than adopt a child that will be biologically unrelated to the parents that intend to raise the child.

Chapter 1

Lost in the Transfer: Disappearing risks through the idealization of altruism

Donors are as much our patients as the recipients we so eagerly serve. They too need our best efforts and professional talents to safely guide them through a complicated and potentially dangerous therapy (Sauer, 2001).

The above quotation by Mark Sauer, a renowned Reproductive Endocrinologist and leading scholar in the field of egg transfer, seems to be the mantra of ART practitioners in their professional literature on the topic of egg donation. In devoted adherence to the principles of the Hippocratic Oath, practitioners of egg transfer have committed themselves to ensuring the ethical soundness and medical safety of donors' treatment. Or so they apparently like to tell one another. While professional ART literature may encourage such conduct, the representations of egg transfer produced by ART practitioners for mass consumption can be read in a somewhat different way.

A significant disparity between how practitioners professionally and popularly portray egg donation is apparent through an examination of the ways in which the details of egg transfer are (or are not) presented to potential egg donors, recipients, and general members of the public. Specifically, the risks associated with egg transfer for donor women and representations of their perceived motives are emphasized differently between information created by ART professionals for their colleagues as opposed to that geared toward lay people.

To attend to these inconsistent representations of egg transfer, this chapter will provide an analysis of both professional ART literature, and the websites created to

support infertile people and recruit donors. In doing so, I will highlight some of the discourses and ideologies that are prevalent within each type of text. By dissecting these differing representations and the related discourses of egg transfer I will establish the groundwork for my later analysis of the significance that concepts of altruism and exploitation have for egg transfer and women's reproductive decisions in general. Furthermore, I will show how the treatment of these topics in texts about egg transfer eclipse concerns around the risks and consequences for women's bodies and health.

During the twenty-year period of the existence of egg transfer, ART practitioners have compiled an abundant quantity of internet resources as well as a wealth of literature on the topic. Fully addressing such a great magnitude of sources in a single chapter is obviously impossible. Therefore, my objective is not to provide a complete overview of this copious collection of sources. Instead, I wish to bring forth several key examples that will demonstrate the attitudes and beliefs that generally support the uses of egg transfer.

The representations of different aspects of egg donation by ART practitioners requires examination because – through their words and cyber representations – these individuals play a highly significant role in shaping both our cultural ideas about these practices as well as women's likelihood as potential donors to participate. But an equally important reason for interrogating the work of ART practitioners is because they are the people who determine and administer the treatment and care given to egg donors during the actual procedures of egg transfer. Thus, the attitudes of ART practitioners that are expressed in their literature will largely determine the quality of egg donors' experiences.

The vast majority of individuals producing information on egg donation – whether it is designed for public and professional consumption, or the designation of restrictions on practitioners’ behaviors and practices – clearly are interested in increasing the accessibility and breadth of knowledge about this practice to other professionals and people who may utilize ARTs. Yet the professional esteem and personal financial profit that authors of these materials are set to gain through promotion of this practice cannot be denied. As such, ART practitioners undoubtedly have a vested interest in maximizing positive perceptions of egg transfer. My analysis will proceed with awareness of this bias.

Analysis of Professional ART Literature on Egg Transfer

Although the self-interest of ART practitioners undoubtedly plays a role in the representations of egg transfer that they provide to others, the quotation that opens this chapter expresses a sentiment that seems to permeate much of the professional literature on this topic.¹ Throughout the majority of these texts, ART practitioners seemingly express concern for protecting both recipients and donors from physical and psychological harm. The most apparent evidence of practitioners’ concern for donors is exhibited by the establishment and regular update of guidelines for the practices of egg transfer by The American Society of Reproductive Medicine (ASRM).

In the absence of any national legislation or regulation of the practices of egg transfer ASRM, an organization composed of medical practitioners, has laid out a set of guidelines for ensuring the safe and ethical practice of egg transfer (see American Society of Reproductive Medicine, 2002). Many of the guidelines that ASRM establish relate to indications for using egg transfer, medical and psychological screening of recipients, and

the screening and selection of potential donors. Clauses of the ASRM guidelines that are geared specifically toward protecting donors, and thus those that are most relevant to the present discussion include the necessity of informed consent and regulation of monetary compensation.

Demanding and defining informed consent

According to the ASRM guidelines, informed consent is a necessary component of the egg transfer process. Specifically, they state, “All individuals involved in ovum donation should be explicitly advised of the risks and adverse effects of ovarian stimulation and retrieval, and this process should be documented by informed consent” (American Society of Reproductive Medicine, 2003). Related to the issue of informed consent, the ASRM also contends that donors should be assured of confidentiality according to local statutes, should contractually establish their rights, limits, and duties toward any resulting children, and should be advised to seek legal counsel if their concerns are not addressed.

The professional ART literature produced by practitioners provides elaboration on the ASRM descriptions of informed consent, by identifying what information must be communicated to, and clearly understood by the donor women in order to adhere to ethical standards for egg transfer. According to Gorrill (1998), the information presented to donors during the screening process should include:

types of infertility problems treated with egg donation and chances for success, rationale and steps involved with ovulation induction/monitoring, side effects of medications and anticipated discomfort, details and risks of egg retrieval, type of anesthesia used, and risks of ovarian hyperstimulation syndrome (OHSS). Emphasis on use of effective contraception beginning in the cycle in which the GnRH agonist is started is important. The unknown long-term effects of egg donation and the unknown risk of ovarian cancer associated with the use of ovulation induction agents is discussed (p.46).²

Other topics that Gorrill (1998) indicates are discussed with donors are the distribution and/or storage of retrieved eggs, monetary compensation including partial compensation for incomplete cycles, the handling of donor medical complications, and how the anonymity of donors is maintained. In addition to demanding the full disclosure of all potential risks and effects to donors, most professional literature also indicates that this information must be explained in ways that are fully comprehensible to the donors, which may require taking the donor's level of education into consideration (Gorrill, 1998).

Obviously, there is a lot of information that needs to be clearly and thoroughly communicated to potential donors to ensure that they have a complete opportunity to consider the complex implications of their decision to donate. Within their professional literature, the willingness of ART practitioners to openly discuss the risks donors face as well as the ethical challenges introduced by egg donation illustrate an apparent commitment to ensuring that donors' choice to participate in egg transfer is made with an awareness of all the relevant conditions and procedures.

Monitoring monetary compensation

The second issue particularly pertaining to egg donors within the ASRM guidelines regards the use of monetary compensation for donors' participation in the egg transfer process. In relation to this issue, ASRM asserts the following procedures:

- A. Compensation to the donor should be in compliance with the ASRM Ethics Committee Report [*Fertil Steril* 2000; 74:216-20].³
- B. Monetary compensation of the donor should reflect the time, inconvenience, and physical and emotional demands and risks associated with oocyte donation and should be at a level that minimizes the possibility of undue inducement of donors and the suggestion that payment is for the oocytes themselves.
- C. Financial obligations and responsibilities in the event of complications or medical expenses of a donor should be contractually agreed upon prior to initiation of a stimulation cycle.

- D. Payment may be prorated based on the number of steps completed in the procedure.
- E. Payment should not be predicated on clinical outcome.

(2002, p.S8)

Specifically in light of the ASRM's provisions for informed consent, these suggested regulations for monetary compensation indicate that ASRM members wish to eliminate, or at the very least minimize the potential for financially exploiting donors and commodifying their eggs.

Yet the absence of *specificity* on any of these guidelines leaves much room for interpretation in actual practice. For instance, at what rate should donors in incomplete cycles be prorated? How far into the cycle must they go before receiving any level of compensation? Even if responsibility for the donor's medical costs are predetermined in a contract, would it be acceptable for the stipulation to place the financial obligation on the donor? At what level of monetary compensation does the financial incentive become "undue inducement"? Could undue inducement be measured differently for donors who are in dissimilar life situations?

Many of the issues raised in the above questions are those that ART practitioners attempt to philosophically address in their professional literature, but their core concerns seem to most emphasize the issues of compensating donors appropriately and preventing undue pressure to donate from financial incentives. McGee, Anchor, & Caplan (1998) summarize the issues discussed by most practitioners nicely in stating, "the donor of reproductive material must be compensated both at a level and in a manner consistent with the real risks involved in particular procedures, respect for the dignity of the donor, and in financial amounts that are reasonable for the expected use of the materials" (p.225). These authors thus assert the commonly held practitioner assumption that egg

donors' willingness to undertake the "significant inconvenience as well as discomfort and risks" (American Society for Reproductive Medicine, 2003, p.56) that accompany participation as an egg donor necessitates some sort of appropriate financial reward.

At the same time, McGee, Anchor, & Caplan's statement hints at the potential for the coercive impact of donor fees if they overcompensate for the attendant risks. In reference to this latter concern, Gorrill (1998) indicates that potential donors who appear to be overly persuaded to donate by the prospect of financial gain are typically eliminated from consideration. She writes, "All ovum donors, whether anonymous or known, are screened for voluntariness. In the case of anonymous donation, financial coercion is a major concern. The donor's financial status and legal history, including filing of bankruptcy, are explored to ensure that donation is not done as an act of desperation" (p.45). This apparent practitioner sensitivity to awarding donors an adequate but not exorbitant amount of compensation suggests that this aspect of donation requires a delicate balance.

On another interesting, and rather telling note, in almost all of the professional ART texts I examined, the discussion of monetary compensation, and by default donor's financial motives, inevitably initiated from, or devolved into a discussion of donor's altruistic motives. For instance, Rosenthal (1998) claimed that, "while initially attracted by the financial remuneration, other motivations, including a feeling of altruism or identification with the infertile, became *more primary*" (p. 189, my emphasis).

Similarly, Gorrill (1998) begins her discussion of "Screening for Motivation and Voluntariness" by saying, "Most women who want to become an oocyte donor express an altruistic desire to help another woman as an important part of their motivation" (p.45).

Clearly, these statements, organized by societal notions of gender, indicate practitioners' desire to represent altruistic motivations as the *prima facie* reason for a woman to donate her eggs. By positioning altruistic motives of donors in this way, practitioners are able to both preemptively deny the undue influence of donor fees and provide evidence that financial gain is not acting as the predominant influence in donors' decisions.

Regulating egg transfer in theory and practice

Based on the concerns expressed by practitioners of egg transfer in their self-determined ASRM guidelines, and through the dominant topics of their professional literature, it seems as though the underlying concerns for donors' safety center on the risks they encounter and their motives for taking on these risks. By focusing their discussions and debates around the practices of financial compensation and informed consent, ART practitioners can supposedly ensure that they are taking measures to safeguard donors' informed decision-making abilities, so their choices to become donors are not coerced or manipulated by outside forces. In other words, by attending to the risks and potential for donor exploitation, while simultaneously identifying mechanisms (e.g. monetary caps, psychological counseling) and regulations they have enacted to avert the negative consequences of egg transfer for donors, professional ART texts demonstrate practitioners' commitment to maintaining the ethical and safe involvement of donors.

While the ASRM guidelines and practitioners' debates of them attempt to make egg transfer as safe and ethical as possible for all involved, several critics of egg transfer and some practitioners themselves acknowledge that adherence to the ASRM guidelines for egg donation is not policed or monitored in any fashion. Sauer (2001) concedes that the problems arising from the absence of practitioner accountability materialize because

practitioners' self-regulation is assumed. He states, "it remains unclear whether physicians heed such tenets (as those established by ASRM), because policing is nonexistent and sanctions have never been levied against violators" (p. 1). Furthermore, some critics of egg transfer have expressed skepticism about ART practitioners' ability to determine the acceptability of their own practices (Kalfoglou & Geller, 2000).⁴ Many critiques of egg transfer identify an inevitable conflict of interest in this situation.

Although these shortcomings of the ASRM guidelines that I have identified are not plainly visible within professional texts on egg transfer, the absence of enforcement for the regulations, and conflicts of interest embedded within these guidelines becomes much more apparent when the professional texts are compared to the information provided to the general public (including egg donors and recipients). In particular, practitioners' concerns about informed consent and the potential impacts of financial compensation seem to get lost in the transfer from professional readership to its general public audience. And as a side effect of this disappearance of practitioners' reservations about egg transfer, the attention to the health risks and bodily consequences faced by donors is also diverted. To more fully illustrate the disappearance of risks and attention to financial compensation, I will now turn to an examination of how representations of egg transfer prepared for lay people fail to exhibit the same standards that are expressed in the professional literature.

Analysis of Egg Donor Program Websites

In order to consider the representations of egg donation provided to the general public by ART practitioners, I will analyze the websites of two egg donor programs: "Egg Donation, Inc.," and "The Egg Donor Program and The Surrogacy Program."

These particular sites were chosen because they incorporate several of the components that seem to be common to many infertility clinic and donor program websites. The fact that the donor program websites are designed for a different audience than the professional literature does not negate the fact that the information they provide is basically produced by the same parties. In some instances, the websites created to assist infertile people and potential donors are maintained by clinics run by the same practitioners who are contributing to professional literature. Several sites, many of which are for donor programs in particular, may not be maintained specifically by medical ART practitioners, but they are fashioned by people who work very closely with practitioners, and thus are an integral part of their success.

The case of William “Bill” Handel offers just one example of how intricately involved ART practitioners are in the simultaneous production of professional literature and the representations of egg transfer provided for mass consumption. As a co-author of one of the chapters in Mark Sauer’s edited textbook, *Principles of Oocyte and Embryo Donation* (1998), William Handel clearly holds a position of respect and authority as a practitioner in the field of egg transfer. Although I was not aware of the connection before selecting the websites I will be analyzing, Bill Handel coincidentally is also the founding director of Egg Donation, Inc.⁵ In this latter position, Handel certainly has significant influence over the character and content of Egg Donation, Inc.’s website.

Surely Bill here is not the only instance of overlap between these sources of information. Yet even if producers of professional literature and more popularized representations of egg donation are not produced by the self-same people, it still seems fair to assume that they share, and are working for the same interests. Given this

connection, it seems somewhat peculiar that these two sources of representations of egg transfer tell somewhat different stories of the use of this ART.

To support this assertion, I will offer some of my observations on the popularized representations of egg donation as illustrated on the donor program websites. In particular, I will examine the ways in which donor motives and the risks they encounter – the two concerns that composed the underlying issues throughout most of the professional literature – are portrayed (or not). In doing so, I will demonstrate how ART practitioners have failed to maintain their commitment to ethics and donor safety when their theories are translated into information for egg donors and recipients.

Minimizing risks to donors

The first website, <http://www.eggdonation.com>, is a production of The Egg Donor Program and The Surrogacy Program (EDP)⁶ based out of Los Angeles, California. The second website at <http://www.eggdonor.com> is for Egg Donation, Inc. – another donor program based out of Encino, California. Both of these websites mainly serve clients who reside near their clinics, but they are willing to accommodate recipients and donors from international locations as well as from other locations within the U.S. Currently, Egg Donation, Inc. maintains clinics on both the east and west coasts of the United States.

To a great extent, the imagery found on these web pages – including headshots of gorgeous sample donors, cuddly cartoon babies, relics of idealistic childhood, and Judeo-Christian imagery of the creation of Adam – comes off as blatant propaganda which maximizes the admirability, benefits, and desirability of egg transfer, while making its detrimental aspects almost entirely invisible. This imagery is certainly not benign as it

serves as a visual accompaniment to the, at times, almost romanticized description of the processes of egg transfer.⁷

Neither EDP nor Egg Donation, Inc. really differs from professional literature in their apparent intent to ensure the safety and welfare of all people involved in the egg transfer processes. EDP repeatedly emphasizes this commitment in stating that they work with clinics staffed only by doctors who “meet (the program’s) stringent requirements for care, safety, ethics and kindness.” Yet this commitment to safety and ethics is left rather ambiguous because EDP never elaborates on the substance of these “stringent requirements”. This lack of specificity by itself could be viewed as just a careless omission, but a general sense of vagueness or the absence of details about the practices of egg transfer throughout these websites seems to undermine practitioners’ alleged commitment to safety and ethics.

A more obvious and less excusable instance of this charge is evident in the failure of the EDP and Egg Donation, Inc. websites to openly and fully address the risks women undertake in becoming donors. Although the dual objective of EDP’s website seems to be the recruitment of both egg donors and people seeking eggs, the website makes virtually no mention of the challenges or risks that a potential donor may face. In fact, the only part of the website which bears any information about negative consequences of donation is in a section of the site designated for letters between donors and recipients. As one supposed donor wrote to her eggs’ recipients, “The things that I must endure in this process are a mere speck of sand in comparison to what the both of you have had to go through physically and mentally”⁸ (Egg Donation Program and Surrogacy Program, 2004). As the only indication of any negative aspects of being a donor on the EDP

website, this minimization of the risks donors do take on by referring to them as merely “things” which must be tolerated, clearly offers a misleading image of the egg transfer processes.

In comparison to the extensive discussion on risks within professional ART literature and ASRM guidelines dictating the necessity of full disclosure, the omission of risk information on the EDP website seems particularly detrimental to potential donors who may visit the site. Even if EDP intends to disclose the risks and other components necessary for informed consent later in the process, the failure to make any mention at all of even the existence of the risks involved could mislead some potential donors about what their involvement might entail (Gurmankin, 2001).

The Egg Donation, Inc. website provides a much more detailed description of the donor and recipient matching, screening, and medical processes than does EDP. Even still, the Egg Donation, Inc. site does not really acknowledge the risks donors may face. In describing the medical procedures of transfer, this website acknowledges donors’ use of hormones, the occurrence of a clinical procedure to retrieve the eggs, and possibility of donors’ disappointment if the egg transfer does not result in a successful pregnancy. However, these aspects of egg transfer are presented in relatively neutral terms which seem to avoid acknowledging the potential for negative outcomes or effects. For instance, omitting information on the side-effects that typically result from the use of fertility hormones, or saying that the egg retrieval is performed “under sedation” rather than under anesthesia, may make the processes seem much less consequential to donors than they actually are.

As further evidence of their disinclination to identify any negative outcomes of egg donation, in their “Medical Overview” section, Egg Donation, Inc. claims, “Perhaps a preface to this guide should be a reminder that fertility and achieving a pregnancy is not an exact science. There are so many unknown factors influencing fertility, that even with all the advances in reproductive technology, conception remains as much an art as a science” (Egg Donation, Inc., 2004). As refreshing as it may be to hear medical practitioners admit that they do not have all the answers, this preface seems to function as a disclaimer. The implications of this caveat enable Egg Donation, Inc. to avoid a discussion on their website of the risks and health concerns – for both donors and recipients – that accompany egg donation and its success as measured by pregnancy.

EDP and Egg Donation, Inc.’s avoidance of any serious mention of the risks involved in being a donor on their websites clearly is a breach of the guidelines established by ASRM and supported by ART practitioners in their professional literature. In addition, both websites fail to acknowledge the possible coercive influence of financial compensation for donors, which yet again subverts the process of informed consent. Whereas the professional literature written by ART practitioners openly confronts and mollifies claims that paying egg donors’ results in their commodification and the potential for exploiting them, the donor program websites take a more subtle approach to silencing these critiques of egg donation.

The first step these websites take to avert accusations of exploiting donors or coercing them to participate through financial incentive is to make almost no mention of the fee women will receive for providing their eggs. The EDP website makes just one brief mention of their \$5000 fee to donors at the very end of the “Information for

Donors” page. The Egg Donor, Inc. website appears to be even more elusive on the matter of donor fees. This site makes a few references to the donor fee, such as participation in the program guarantees compensation for the donor and that the medical procedures will not begin until the “couple”⁹ has deposited the donor fee. But throughout these references, Egg Donation, Inc. provides no specifics about the amount given for a completed cycle.

The potential for a different reading – one in which the minimal attention to donor fees on these sites is an attempt to minimize the manipulation of donors’ motives by the prospect of substantial monetary sums – certainly exists. Yet, the extensive emphasis these websites place on another donor motive, namely altruism, suggests that these websites may be attempting to offset, or even mask the influence of financial motives in donors’ decisions.¹⁰

Maximizing the admirability of donor altruism

Both EDP and Egg Donors, Inc. incessantly characterize the donors in their programs as “kind-hearted,” “giving and big-hearted” people, and “empathetic” women who invariably have “humanitarian” motives or reasons for wanting to donate, a “lovely spirit,” and an immense desire and “willingness to help people.” These websites also contain numerous references to the provision of one’s eggs as a “gift” or “precious gift” to the recipients. Representations such as these contribute to the portrayal of donors as self-sacrificing and unconditionally good-natured people.

The thinly veiled efforts of these websites to portray altruism as their donors’ primary (and perhaps only) motive for participating is epitomized by a list of the

“motivations to become an egg donor” on the “A Typical Egg Donor Profile” page of the Egg Donation, Inc. website. This list reads as follows:

- a. An opportunity to be of service and provide help
- b. Empathy for childless couples without having to carry a pregnancy for them
- c. Recognition of the importance of having children in their own lives
- d. Have a child that is intellectually gifted
- e. Pride in her genetic background and family looks
- f. An opportunity to make a unique contribution
- g. Financial gain for her family

Based on all of the other evidence on this website, the listing of “financial gain” as the last possible motive for a donor is not merely coincidental. Furthermore, in listing the financial benefits as a motive for donation because it would be a gain “for her family,” Egg Donation, Inc. has even converted monetary gain into an altruistic act by making it about her family’s needs rather than meeting her own needs!

In addition, much of the imagery on the websites (which I described earlier as nearly propaganda) perpetuates the notion of donors embodying the ideal of altruism. For instance, the logo on the EDP website, while somewhat difficult to decipher, appears to be an angel holding an infant. This logo also coincides nicely with a series of pictures of the programs’ supposed “angels” (a.k.a. supermodel-caliber donors) that appears on the opening page of the site. According to the sample donor profile provide on EDP’s general access website, the donors in their database are identified by their “Angel” number (e.g. Angel 9999).

Now take a moment to imagine if such images and descriptions were used to recruit and/or advertise sperm donors. What if the “empathetic” Angel number 1834 was compelled to donate *his* sperm for “financial gain” for *his* family? Alternatively, what if these supposed defining qualities were used in cases of people donating even more vital

organs such as kidneys? Within these other contexts, these representations used to portray egg donors seem almost ridiculous!

The gendered assumptions embedded in ideas of egg donors' altruism become evident when one acknowledges that kind-hearted, giving, and self-sacrificing are not characteristics typically used to describe sperm donors (Haimes, 1993).¹¹ While these terms may in fact be applied to donors of other organs, the propagandistic and blatantly gendered quality of the imagery and portrayals of egg transfer make them unsuited for other types of donation.

To place as much emphasis on altruistic donor motives as these websites do, there must be something more invested in maintaining the images of egg donors' more admirable motives – as opposed to their financial motives – than merely granting praise and acknowledgement to the good deeds of women donors. As one point of insight to this assertion, the pages of both websites that provide information specifically to potential donors explain that the “typical donor” has a sincere interest in helping infertile people. This element of deciding to donate may well be the case for many women donors, but the compulsion of these two websites and most others like them to remind potential donors of why they might want to donate seems almost prescriptive.¹² In light of such seemingly rigid doctrine, one must wonder what is at stake in believing that women might actually be indifferent enough to sell off pieces of their bodies, rather than donate their eggs out of some altruistic impulse.

Coinciding Representations of Maximized Altruism and Minimized Risk

Altruism may undoubtedly be one factor that contributes to women's decisions to donate their eggs. Yet my analysis of the content of the EDP and Egg Donation, Inc.

websites suggests that the exaggerated attention these sites devote to the goodness of donors and the purely altruistic motives of their donation – specifically within contexts which ignore the risks of donation and the impact of substantial financial compensation – operates to eliminate any thought of these women being exploited. When placing this analysis alongside of an examination of ART professional texts on egg transfer, it becomes clear that the anticipated audience largely dictates the level of ART practitioners’ disclosure about the risks donors face in terms of both the transfer procedures and the potential for being exploited.

With the fact that these incongruent representations of egg transfer – between the professional literature and donor program websites – are both created by ART practitioners, the purpose of the variation in representations must certainly be questioned. Ultimately, even though the disparity in representation of egg transfer may seem incongruous, the tendency of both types of representations is to offer practitioners and those who participate in egg transfer justification for its use. Yet even this acknowledgement does not fully consider the complexity of the various representations of egg transfer and the intentions of all the people involved.

This chapter revealed the ways in which acknowledgement of the risks and complicating factors of egg transfer disappear between the discussions of egg transfer professionally and the representations fed to the general populace. My observations and analyses of some ART professional texts on egg donation and two egg donor program websites offer some speculation and explanation of the particular functions served by the variation in representations of egg donation provided to the general public. In scrutinizing these representations of egg transfer, I have somewhat unraveled

practitioners' claims of working in the best interest of egg donors. In the following chapters, I will interrogate more deeply the implications of the altruistic motives and financial compensation for donors, while keeping in mind these practitioner-produced and widely consumed representations of egg transfer.

¹ My research suggests that the prominence and magnitude of professional and popular literature that specifically addresses the experiences of egg donors is largely overshadowed by that which considers the experiences of recipients. While this fact is itself telling about the cultural significance that has been attributed to the role of donors, I think the larger story here lies in the content of the literature that does address the role of donors, and what that content says about practitioners' beliefs and practices.

² The known physical risks of being an egg donor have been identified as menopausal symptoms (e.g. hot flashes, vaginal dryness, and dyspareunia), or ovarian hyperstimulation syndrome (OHSS) due to hormonal regimens. In rare instances, thromboembolism, stroke, or death have resulted. Risks from needle injury, hemorrhage, and infection are also infrequent, but may result from the retrieval process, and could potentially affect sterilization. The use of GnRH has been documented to result in a minimal number of unwanted pregnancies for the donor. Speculation about long-term health consequences of donation suggest that there may be a link between the use of fertility drugs and later development of ovarian cancer, but no conclusive evidence exists to either support or discount this possibility (Morris, 1998). Short and long-term psychological risks are also a factor. They could include any outcomes ranging from temporary regret to difficulty later in life for the donor if she herself faces infertility (Handel, Vorzimer, & Shafton, 1998).

³ The indicated report suggests that "Monetary compensation should reflect the time, inconvenience, and physical and emotional demands associated with the oocyte donation process" (pp.218-219). Through an analysis of the ethical issues raised by egg donation, and a comparison with the typical rates of compensation for sperm donors, the Committee determines that "at this time sums of \$5,000 or more require justification and sums above \$10,000 go beyond what is appropriate" (Ethics Committee of the American Society for Reproductive Medicine, 2000, p.219).

⁴ Corea (1991) offers a similar perspective of "technodocs" (a term self-selected by an ART practitioner) in her critique of a 1986 report by the American Fertility Society (a precursor to ASRM) titled "Ethical Considerations of the New Reproductive Technologies." Corea sarcastically comments, "Surprise: the technodocs determined, after 18 months of serious deliberation, that what they do is ethical" (p.71).

⁵ The biographical notes about contributors in Sauer's book indicate that Handel is affiliated with the Center for Surrogate Parenting and Egg Donation, Inc. Thus, it is highly unlikely that this coincidence is merely a case of mistaken identity.

⁶ The Egg Donor Program and Surrogacy Program does not indicate the abbreviation of its name through any acronyms. Due to the length of this program's name, I have created EDP as an acronym for my convenience and readability.

⁷ The very fact that these images are intelligible within U.S. society speaks to the power of what Haraway (1997) terms "sociotechnical production." Haraway describes, "By sociotechnical productions I mean the knowledge-power processes that inscribe and materialize the world in some forms rather than others" (p. 7). In particular, Haraway goes on to comment on the significance of Christian influences (such as those I identified from the websites) on practicing science in the U.S. She says, "Despite the extraordinary multicultural, multiethnic, multireligious populations in the United States, with quite various traditions of signifying time and community, U.S. scientific culture is replete with figures and stories that can only be called Christian. Figural realism infuses Christian discourse in all of that religious tradition's contested and polyvocal variety, and this kind of figuration shapes much of the technoscientific sense of history and progress" (p.10).

⁸ While websites in general provide no certain evidence of whether a text was truly produced by the person who allegedly composed it, authorship really is not relevant to my argument here. The fact is that these

representations of egg transfer exist, and as part of the content of the EDP website, these letters contribute to the perceptions of egg transfer, whether or not the letters are legitimate.

⁹ EDP and Egg Donation, Inc. provide no indication of denying treatment to single women or lesbian couples – as seems to be true of many infertility clinics and egg donor programs. Despite the absence of a discriminatory policy, the terminology that these programs and many like them utilize illustrates their assumption or belief that their clients will all be heterosexual (typically married) couples.

¹⁰ In her article “Semen as Gift, Semen as Goods,” Tober (2001) made an identical observation of the focus placed on altruistic motives of ART-related websites which contained profiles of both sperm and egg donors. She comments, “This focus on altruism is an attempt to remove such ‘donations’ from the realm of market transactions in order to imbue them with a higher meaning” (p.155).

¹¹ Although I have noted previously the inappropriateness of a parallel between egg donation and sperm donation, I am using the comparison in this particular instance to draw attention to the unproblematized deployment of specifically gendered norms in perspectives of the donation of *women’s* genetic material.

¹² The dogmatic fixation on donors’ altruistic motives and the poorly masked directives that they act upon such intentions certainly relates to Foucault’s (1977) notions of discipline and docile bodies. The implications of these concepts for the case of egg donation will be considered more extensively in Chapter 4.

Chapter 2

Analyzing the ‘Choice’ and Gendered Assumptions behind Donation

In thinking about the emphasis within ART professional literature and websites that is placed on the altruism of a woman donating her eggs – and thus its resulting prominence in formulating popular perceptions of egg transfer – the designation of this ART as egg “donation” really is no surprise. The very term “altruism” invokes notions of gift giving, sacrifice, and providing something of one’s own to another in need without any expectations of reimbursement. By defining the practice of egg transfer as “donation” and the women who make it possible as “donors,” it becomes impossible to even think about these practices outside of contexts of altruism.

Yet as Chapter 1 uncovered, the typical uses of egg transfer in the U.S. present several challenges to general assumptions of the altruism embedded within women’s decisions to donate their eggs. Within these contexts, the emphasis placed on donors’ altruistic motives appears exaggerated and, as a result, becomes questionable. Thus, this chapter will further deconstruct the notions set up in Chapter 1 that identified donors’ primary motives as purely altruistic.

In an attempt to look more critically at the significance of perceptions of altruism in the practices of egg donation I will consider a two-part premise upon which these ideas of altruism are based. In order to establish the validity of the assumptions of donors’ altruistic drives to participate in egg transfer, one must believe that women choose to

donate their eggs, at least in some part, out of the goodness of their own hearts. The first part of this premise, that women *choose* to donate, relies on a belief in women's right to bodily autonomy. The second half of the premise, in alignment with contemporary gendered assumptions of women's nature, suggests that all egg donors are good-natured and kindhearted people.

In this chapter, my intent is to look at the cultural ideologies and belief systems that enable the dominance of altruistic representations such as those that were identified in Chapter 1. Specifically, I will draw out the weaknesses in informed consent, the manipulation of feminist ideologies, and the utilization of traditional gendered expectations, as representative of three central flaws in assumptions of egg donors' altruism.

Autonomy as a Basis for Altruism

Autonomy, the first assumed predicate of egg donors' altruistic motives, is a complex philosophical idea that indicates voluntary and well informed actions, behaviors, and thoughts. In terms of women's reproductive decisions, the notion of autonomy concerns women's ability and freedom to control what happens in and to their own bodies. As discussed earlier, egg donors face a barrage of potential physical, emotional, and social consequences for volunteering their eggs. Thus, when placed within the contexts of contemporary uses of egg transfer in the U.S., notions of autonomy become specific to women knowingly, and completely of their own volition, undertaking the various consequences of all related aspects of this ART (Dickens, 2001; Gurmankin, 2001; Kuhse, 2001, Petchesky, 1995).

Within this series of assertions, two central issues become relevant to women's decisions to donate their eggs, and thus to their ability to altruistically choose to participate in egg transfer. First, the status of egg donors' autonomy (as is true of any individual) depends heavily upon their ability to give informed consent¹ (Kuhse, 2001). The second issue derives from the fact that any discussion about women's bodily autonomy in relation to topics of reproduction must inevitably intertwine with westernized perceptions of the importance of bodily integrity (Bordo, 1993) and feminists' commitment to women's reproductive freedom (Petchesky, 1996). In an attempt to interrogate the degree to which discourses of egg donors' bodily autonomy support the prevalent representations of altruism, the next part of this chapter will be devoted to investigating these issues of informed consent and constructs of reproductive freedom.

Difficulties in attaining informed consent

As Kuhse (2001) indicates, the autonomy of health care decisions in general are "captured in the notion of informed consent" (p.308). She contends that conditions of being autonomous require that a decision to participate in an ART include, "adequate and accurate information and understanding of the potential risks and benefits of alternative courses of action, and that it be voluntary (that is, free from coercion and undue inducement)" (p.308). Gurmankin (2001) seconds this view of informed consent when she claims, "It would violate the right to autonomy to withhold risk information that is crucial to the ability to weigh the costs and benefits of donating" (p.11). Thus full disclosure to egg donors of the risks they undertake in participating in egg transfer have

been identified as one component that must be present for women to be able to make autonomous decisions.

As my readers will recall, Chapter 1 exhibits the emphasis which ART professional literature places on informed consent as a necessary component of the ethical use of egg transfer. While conditions of informed consent seem unproblematic in theory, some difficulties arise when these principles are actually applied. The previous chapter addresses one way in which informed consent may be impeded, by acknowledging that ART practitioners' financial and professional gains – specifically from persuading women to donate their eggs – may lead them to minimize the risks associated with donation.

Yet, for complex reasons, even practitioners with the best intentions of fully adhering to procedures of informed consent may still fall short of facilitating autonomous decision-making by donors. The possible failure of ART practitioners in assuring egg donor's autonomous choice through the presence of informed consent is due to the fact that some ambiguity is inevitable. Regardless of how clear the ASRM guidelines are about the protection of donors from unnecessary harm, the rather subjective question of what may actually count as harm to donors – or perhaps more accurately, unacceptable harm – makes the provision of informed consent much more complicated (Gurmankin, 2001).

Are the use of hormones and the hyperstimulation of a donor's ovaries excessively harmful to her now? Will it be so twenty years from now? Does deciding to disconnect from part of one's body – in particular one's genetic material – pose the threat of psychological or emotional harm to the donor? Is it possible that the practices of egg

transfer may involve more risks to some donors than others based on factors that we may not even be able to anticipate due to the brief history of egg transfer?

Furthermore, can *any* harm be justified, seeing as donors undertake these risks for someone other than themselves? Those who ground their theories within the significance of social networks may answer this last question affirmatively, or at least by asserting conditional agreement. And, in previewing the discussion in the next chapter, what amount of money creates undue inducement – how is the exact monetary figure that crosses into the category of “excessive” determined? Assuming that a compensatory sum, regardless of size, is provided, can donors’ participation be completely voluntary?

With all of these questions, and an infinite number of others, continuously circulating around the practices of egg transfer, can any ART practitioner definitively say that he or she can inform donors fully of the consequences of their decisions? Certainly, based on problems in previous cases, practitioners are conscious of medical and health risks of which donors should be made aware. However, there is no clear answer to the question of practitioners’ ability to ensure informed consent because, as I stated earlier, so many of the measures involved in this decision are subjective.

While these are important questions that warrant consideration, it must be recognized that they are in actuality only inquiring about the theoretical status of informed consent. The ways in which informed consent is used in the actual practices of egg transfer provide much greater room for variation in the level of information provided to, and understood by donors. Two recent studies by Gurmankin (2001) and Kalfoglou & Geller (2000) provide some insight into actual experiences of donors in terms of informed consent.

Gurmankin's study investigated the level of disclosure about the risks to potential egg donors during a preliminary inquiry phone call. Of nineteen donor programs Gurmankin polled, 57% were found to provide potential donors with risk information that was inaccurate or incomplete in some ways. Gurmankin acknowledges that her study applies specifically to the preliminary contact between potential donors and donor programs, and therefore may not be completely representative of the information that the programs offer donors before receiving their consent. Even still, Gurmankin cites research suggesting that people's decisions made in analogous situations are often influenced by the initial information people receive. Gurmankin also comments that donors, having actually visited the donor program offices, may feel committed to donate prior to becoming fully informed.

In a study of donors' relationships to the lawyers, psychologists, and health care providers involved with egg donation, Kalfoglou & Geller (2000) found that approximately half of the 33 donors whom they interviewed indicated that the care and information they received were not at all influenced by the fact that they were being paid or that they were receiving treatment for the benefit of another (paying) patient. Thus, based on the findings from these studies that show informed consent to be inconsistently applied, the presence of informed consent appears to be hit or miss, depending on both the practitioners and donors involved.

In general, all commentators – those working inside the ART field, as well as those critiquing it – seem to indicate that if donors were simply provided with informed consent, their autonomy would be maintained in choosing to participate. But clearly this issue goes beyond the complexities of whether donors are receiving informed consent, to

questions of what values are being prioritized by the specific content and what quality of the information that is thought to enable autonomous decision-making.

Appropriation of pro-choice rhetoric or empowerment?

Long a feminist of a liberal stripe, I did not want to think that this was a choice I should not have. I did not want to think that this is a choice no one should have.
(Blacksher, 2000, p. 30).

While general ideas of autonomy are central to many philosophies about human rights, woman-specific conceptions of bodily autonomy are deeply embedded within feminist histories of women's battles against discrimination and oppression. Women's bodies have historically been recurrent sites of sexual, reproductive, and labor-based exploitation and abuse which have functioned as central sources of women's oppression (Petchesky, 1995, Raymond, 1993).

In recognition of such dynamics, many of the objectives of women's movements around the world have been to empower women in reclaiming ownership of, and control over their own bodies. Petchesky (1995) indicates that assertions of women's bodily autonomy are empowering for women both personally and as a political collectivity. She describes that for many women's movements around the globe, "the idea of women owning their bodies is . . . not an individualist, exclusionary interest but rather a fundamental condition for women's development and strength as a social group and thus for their full participation as citizens" (p.403). This excerpt indicates that even though bodily autonomy is an issue of each woman having the power to control her own body, this empowerment of individual women has implications for the status of all women. As such, ideas of women's ability to control their own bodies – specifically through access

to safe, legal abortion and birth control – has been a core element of historical and contemporary western feminist battles for all women’s liberation and empowerment.²

The implications of altruistic representations and conceptions of egg transfer that paint donor participation as women’s “choice” thus necessarily invokes this history of feminist struggle (subRosa, 2002). Yet even as several generations of feminists have logged many victories for women’s bodily autonomy in all spheres of life, numerous gray areas which continue to complicate women’s rights to control their own bodies remain – particularly when issues of race, class, ability and sexual orientation are factored in.³ Contemporary contexts of reproduction – which are largely defined by the increasing use of new ARTs, and are equally shaped by racial, class, and other forms of social inequality⁴ – compose just one such area in which women’s right to autonomy remains hazy. In part, these unclear definitions are a reflection of even feminists’ inability to unanimously assert definitive components of women’s bodily autonomy and reproductive freedom.

As Rosemarie Tong (1996) demonstrates in her essay “Toward a Feminist Perspective on Gamete Donation and Reception Policies,” different groups of feminists have supported or contested the use of egg transfer based on their varying perceptions of what counts as women’s autonomy. According to Tong, some approach egg transfer from a “Marxist feminist” perspective in which women’s “choice” to donate her eggs merely reflects the selection of the “lesser of two evils” (p.143) – i.e. the “choice” of suffering in conditions of poverty, or of endangering her health by subjecting her body to the capitalist practice of selling her eggs.

Similarly, those who Tong terms “radical feminists” see the potential donors’ “choice” as lying between two negative options, but they believe that the option involving exploitation may have some other basis than economics. The radical feminist perspective problematizes egg donation further by indicating that “it is a process under the control of both the medical establishment and profiteering infertility clinic” (Tong, 1996, p. 145), and thereby is out of women’s control.

In contrast to Marxist and radical feminist perspectives, those who approach egg transfer from what Tong terms a “liberal feminist” perspective support both anonymity and monetary compensation for donors. In assuming the presence of informed consent, liberal feminists contend that *failing* to pay egg donors for their efforts, time, and inconvenience would be the true source of women’s exploitation within the use of this ART. The liberal feminist viewpoint thus acknowledges that women may very well be motivated to donate eggs by the promise of financial gain. However, they condition their support of these practices on the presence of informed consent.

As is evident in the Marxist, radical, and liberal feminist perspectives on egg transfer that Tong outlined, feminists work from at least two somewhat conflicting notions of women’s bodily autonomy. Radical and Marxist feminists theorize from the belief that women do not have autonomy because of the forces of oppression in their lives. Whether women are oppressed on the basis of their sex, class, race, or other characteristics, they will not be able to attain bodily autonomy unless all forms of oppression are eradicated. However, liberal feminists view women’s autonomy as pre-existing, or part of the human condition, which thus leads to the conclusion that women’s “choice” is evidence of their autonomy. Thus, even though all feminists are concerned

with protecting the rights and welfare of donors, their beliefs about how to go about doing that may be grounded in completely contradictory theoretical perspectives.

Now surely the liberation battles fought by feminists for social, economic, legal, and reproductive rights were not waged to ensure that the women of the 21st century (or any other time period, for that matter) would have the right to profit from the direct sale of their bodies. Or were they? Perhaps these battles waged by feminists across the decades were designed to liberate women in order to make these sorts of decisions within the contexts of their own lives. Is it not possible that the battles for choice and autonomy were meant to say that, “Provided that a woman is legally competent and a medically appropriate candidate for gamete donation or, as the case may be, gamete reception, *it is her business* whether she decides to sell her eggs to help her way through college or, whether at the postmenopausal age of 55, she decides to purchase an egg in order to get pregnant” (Tong, 1996, p.143; my emphasis). Clearly, if a solution to this puzzle of how all women’s autonomy can be established and protected exists, it will not be simple.

Even though varying theoretical frameworks may be employed, this brief acknowledgement of the basic premises that many feminists contend must be present in order for women’s bodily autonomy to exist hints that the contemporary uses of egg transfer seem to fall short of protecting women’s autonomy. In situations in which the provision of informed consent is uncertain and the amount of appropriate compensation (if any) seems impossible to determine, the status of women’s bodily autonomy seems to remain equally precarious. As such, the practices of egg transfer, as they are currently used in the United States, seem to only provide fuel for Petchesky’s assertion that “For women’s movements globally, the idea that a woman owns her body stands not as a

description of reality but as a rhetorical achievement” (1996, p.403). In this statement, Petchesky is basically suggesting that bodily ownership – and thus implicitly autonomy – do not exist beyond a mere theoretical ideal.

Yet, as is evidenced in the feminist views of egg transfer I just discussed and the overall emphasis on altruism in representations and discussions of its practice, some feminists and non-feminists alike are utilizing the presumption that women *do* have bodily autonomy and thus *can* make free and informed choices about their reproductive capabilities. So, in actuality, Petchesky’s statement, while raising an important question about exactly what the status of women’s bodily autonomy is, really drives more to the heart of the problems that arise from embedding discourses of donors’ altruism within feminist notions of choice and women’s right to control their own bodies.

This problem is one that similarly has been identified by subRosa’s (2002) article “Stolen Rhetoric: The appropriation of choice by the ART Industry.” In this article, subRosa suggests that “a politics of autonomy and liberation had been transformed into a rhetoric of ‘choice’ . . . which became identified with the pro-choice movement” (pp.135-136). They later go on to claim that “the rhetoric of choice is used to make controversial issues acceptable” (p.139). In the contexts of my current discussion, subRosa’s assertions about the appropriation of pro-choice rhetoric can equally be applied to the hyper-emphasis on altruism within representations of egg donation. By applying the heavily invested feminist notions of “choice” to the practices of egg donation, a woman’s decision to donate her eggs appears to be embracing and even furthering notions of women’s reproductive freedoms – an argument which seems to be completely overshadowing any real exploration of how egg transfer might be affecting

women's reproductive rights. In pairing donors' supposed altruism with "choice" in this way, feminist demands for women's full control of their bodies are undermined.

Assumptions of Women's "Natural" Altruism

In the United Kingdom, where payment to sperm donors is acceptable but payment to egg donors has been deemed inappropriate, "it is assumed that women will donate for altruistic motives" (Fielding, et. al, 1999, p.274). This assumption suggests that there is something about women – something embedded in their biology or nature – that compels them to act on an altruistic basis. The situation in the U.K. obviously cannot directly speak to the specific ideologies behind use of egg donors in the U.S. At the same time, the highly emphasized representations of donors' altruistic motives that were revealed in Chapter 1 indicate that a cross-cultural parallel does in fact exist. This correlation presents a clear example of the second premise upon which ideas of egg donors' altruism seem to lie – i.e. that all egg donors are good-natured and kindhearted women.

This second premise of donors' altruism is a little less difficult to explain because it is directly drawn from gendered notions of womanhood that are filtered throughout all of our everyday interactions. Specifically, the emphasis placed on donors' altruism is asserted on the basis of women's assumed "natural" roles as nurturers and mothers (Haimes, 1993; Wilding, 1999; Hartouni, 1997). In other words, the success of representations of donors' altruistic motives lie deeply embedded in societal notions of what it means to inhabit the very position of "woman." Raymond (1993) articulates the basis of this relationship between womanhood and altruism nicely in stating, "The cultural norm of the altruistic woman who is infinitely giving and eternally accessible

derives from a social context in which women give and are given away, but also from a moral tradition that celebrates women's duty to meet and satisfy the needs of others" (p. 50). Raymond's description here explains how our societal norms both shape and reward the enactments of womanhood that embrace altruism as a guideline for every aspect of women's existence.⁵

In speaking specifically of U.S. culture, Tong (1996) extends this ideology identified by Raymond to the situation of egg donors. Tong comments on the ways in which society has not only established the assumption that egg donors are altruistic, but even provides a means for making such an assumption true by engraining in women's minds the idea that they must embrace altruistic roles in order even to be considered a woman. Tong states, "we live in a society that repeatedly teaches women that it is women's role to be the givers par excellence . . . many women feel guilty if they are not as self-sacrificial as possible – if they are not giving other people everything they can give them, including their sexual and reproductive services" (Tong, 1996, p. 144).

Raymond (1993) further accentuates the ideas expressed by Tong in saying,

It is the discourse of maternalism, which traditionally has equated devotion and dedication with women abandoning their own needs. It is also the discourse of maternal destiny in which a real woman is a mother or one who acts like a mother or, more specifically, one who acts like the self-sacrificing, nurturant, and caretaking mother a woman is supposed to be (p.51).

Thus, this idea of donors as altruistic fits right into, and simultaneously privileges certain cultural narratives of womanhood over others. Furthermore, Tong's suggestion that women may feel guilt or regret for not adequately meeting societal expectations of women's self-sacrifice, points to the self-policing in which women engage to adhere to

societal gender norms and the definitions that Raymond identifies (i.e. self-sacrificial, nurturing, caretaking).⁶

Not only do the assumptions and exaggerated representations of donors' altruistic nature portray them as humanitarian members of society, but they often rely on the powerful equation of a donor as a generous, kindhearted person *within* familial or kinship contexts (Haimes, 1993).⁷ For this reason, the narratives focusing on women as caregiving show how their familial and societal roles position them in ways that make a request to be a "known" donor from a family member or friend nearly impossible to refuse. Tong asserts this fact when she says, "Women typically find it very difficult to disappoint friends and relatives – to refuse to help them in their hour of need" (Tong, 1996, p. 144).

While recognizing the impacts of familial and kinship association to discourses of altruism, Strathern (1995) explains how such notions of kinship are broadened to account for situations utilizing ARTs (including egg transfer) in which familial blood relationships are absent. She states,

making visible the detachment of the procreative act from the way the family produces a child adds new possibilities to the conceptualization of intimacy in relationships. However minimal the role of those involved, dispersed conception may provide a model for relations that can take on a kinship character even where they cannot take on a family one (p. 353).

Strathern's assertion here points to the fact that although narratives of altruism end up building off of women's sense of obligation to people whom they care about, these feelings of relation may ultimately be extended to people whom the donors may not even know.

The discourses of altruism and kinship become even more powerful through frequent mention of the fact that some (though the image producers would rather their audience believe it to be a *typical* characteristic) donors have children of their own – and presumably husbands too, of course. In the eyes of potential egg recipients, suggestions that many donors are already mothers offers them reassurance that the donors’ eggs are likely to be viable. Such implications – based in ideologies that frame motherhood as “the essence or pinnacle of female existences” (Raymond, 1993, p. 29) – also affirm that the donor is caring and nurturing, and thus must be motivated to donate by her altruistic nature.

Although familial ties and obligations may be strong motivating factors for women who are in the positions just mentioned, the fact remains that many women are not already parents when donating their eggs, and they donate their eggs anonymously. Thus, forwarding representations of donors as altruistic members of family networks functions to communicate the acceptability of egg donation as proper womanly behavior. After all, if the models of womanhood – i.e. (white, heterosexual, middle-class) mothers and extremely family-oriented women – can express their love and concern for their family by donating their eggs either to relatives or close friends, or even to unknown couples who undoubtedly deserve the wonderful family life they have themselves, certainly it must be an appropriate act of womanhood to donate one’s eggs. In other words, egg donation comes to define womanhood itself.

Wilding (2002) really draws forth this function of the numerous altruistic representations of egg donation in saying, “marketing cynically plays on the so-called ‘natural maternal instinct’ ascribed to all women. The cyberbaby industry exploits

women's assumed 'need' to produce children, in some form or other, in service of ever expanding technological intervention into the body – for profit. Donor ads seem to appeal to the donor's empathy and generosity.” And in appealing to that empathy and generosity, recruitment of donors and representations of such practices both invoke and reify the cultural beliefs that giving and self-sacrifice are synonymous with women's nature.

Disrupted Assumptions of Altruism

With the apparent power and predominance of notions of “choice” and altruism throughout representations and discussions of egg transfer, one must wonder what it means for women to encounter such narratives. For women who are uncertain about offering their eggs for transfer, insinuations that egg donation is demonstrative of culturally valued qualities – i.e. those of reproductive freedom for women and the gendered expectations of females' kindness, sacrifice, and overall maternal instincts – may offer reassurance, or even justification for women's decisions to donate.

However, the flaws in assumptions of women's altruism that are examined in this chapter indicate that uncritically accepting the ideologies embedded in these discourses denies the much broader complexities that are factored into donors' decisions. Even the present practices of egg transfer in the United States suggest that altruistic feelings alone do not provide enough incentive to motivate many women to donate their eggs. For instance, even as Kuhse (2001) suggests that, “donations – to the extent that they do not involve substantial payments – *are clearly altruistic* and beyond the call of duty” (p.310), she ultimately concedes that in the presence of substantial sums, egg donors may be more motivated by monetary compensation than altruism.

As a study of egg donors' experiences conducted by Kalfoglou & Geller (2000) suggests, sizable sums of money, which are involved in many of the egg transfers in the U.S., do play a very real role in influencing women's decisions to donate. Yet even more interestingly, this study suggests that donors are well aware of the expectations that their motives are based in altruism. Kalfoglou & Geller (2000) found that during their meetings with psychologists as part of the screening processes for donor selection, some women felt the need to downplay their financial motivation "because they thought it would look bad" (p. 228). This example alone reveals only a few of the problems associated with the countless instances of exaggerated emphasis placed on altruism being the primary, or perhaps only motive for women to donate.

In bringing forth the contexts of limited definitions of informed consent, manipulation of feminist notions of "choice," and the utilization of traditional expectations of womanhood, this chapter has raised the question of whether the actions of egg donors may be viewed as altruistic *at all*, let alone primarily motivated by altruism.⁸ But even in adhering to the more common conceptions of altruism, this chapter has, at a minimum, significantly weakened the assumed basis on which donors' altruism is founded. By theoretically unpacking these premises of the presumption of donor altruism, the discussion in this chapter has disrupted the assumptions of altruism as egg donors' primary motive. In doing so, I have revealed common discourses of egg transfer to be falsely representing the actual utilization of egg transfer in the U.S.

¹ Susan Bordo's (1993) explanation of informed consent seems particularly useful in these contexts of egg transfer, and reproductive processes more broadly. She states, "The doctrine of informed consent is, in a very real sense, a protection of the *subjectivity* of the person involved – that is, it is an acknowledgement that the body can never be regarded merely as a site of quantifiable processes that can be assessed

objectively, but must be treated as invested with personal meaning, history, and value that are ultimately determinable only by the subject who lives 'within' it" (pp.73-74; emphasis in the original).

² As numerous feminist academics and activists from around the world have observed, the individualistic concerns of North American and "western" feminist movements, which focus on such issues as body politics and reproductive rights, may not represent the most pressing concerns of women's movement in various regions around the globe. See for example, Mikell (1995). Correa & Petchesky (1994), expand this discussion by pointing out that when western feminists consider issues of reproductive rights, they may overlook concerns of "maternal and infant mortality, infertility, unwanted sterilization, malnutrition of girls and women, female genital mutilation, sexual violence, and sexually transmitted diseases" (p.89) that shape the reproductive decisions of women all over the world.

³ Bordo (1993) provides several examples of how women who are marginalized (i.e. women who are *not* white, middle class, heterosexual, *and* able-bodied) are least likely to have benefited from feminist victories in terms of reproductive freedoms. Bordo evidences this assertion through a parallel of historical sterilization abuses based on racist and ableist eugenics to contemporary sterilization (and Norplant) abuses against women on welfare. (See also Davis, 1991).

⁴ According to Hartouni (1997), "the incidence of infertility is one and a half times higher among poorer, nonwhite populations than in middle-class white ones, or higher in precisely those 'segments of our society' in whom medical science appears to have the least interest and who, in any event, have the least access to its assistance" (p.75).

⁵ Many of the theoretical analyses on which I have drawn to show that the links between altruism, motherhood, and the gendered expectations that women encounter, are blatantly lacking a critical consciousness of the implications of racial and class identities to these issues. In particular, a discussion of how such identity markers influence perspectives of "fit" mothers greatly affects the clarity of the assumptions that womanhood, motherhood, and altruism are synonymous (see Hartouni, 1997, Davis, 1991). Such a critique deserves much greater consideration than I can provide here. However, I think it is necessary to note that racial and class differences are conspicuously absent from both popular and professional representations of egg transfer as well as representations of the women who donate their eggs.

⁶ My reference to self-policing carries obvious reference to Foucault's (1977) ideas of the ways in which power works through disciplinary, rather than physically punitive means. In this sense, social norms are maintained through individual self-surveillance and self-correction rather than the dictates of an authority.

⁷ Raymond (1993) describes a parallel expectation within relations of surrogacy. She states, "When a surrogate arrangement is represented as generosity to a family member in need, the ideal of altruism binds the woman to the norms of family duty" (p.54).

⁸ A more fundamental question that may be relevant here is whether *any* action can be interpreted as altruistic, regardless of whether it is embedded in the processes of capitalism. As several social psychologists have argued, many of the actions that are typically perceived by be altruistic may actually reflect egoistic involvement where the actor is enacting helping behavior to either avoid punishment or gain rewards for him or herself. These researchers have thus defined true altruism as "a motivational state with the ultimate goal of increasing another's welfare" that is qualified by a desire to help regardless of the potential reward or punishment involved. Despite these findings, many of these psychologists still view both altruistic and egoistically motivated helping behavior positively because of its "prosocial" impacts (Schroeder, Penner, Dovidio, & Piliavin, 1995).

Chapter 3

Deciphering Donor Fees: The dynamics of commodifying and exploiting egg donors

By somewhat deflating the certainty of donor altruism, the arguments posed in Chapter 2 have opened the door for consideration of another influential factor that has been lurking in the shadows – namely, the motive of financial gain. In critiquing the vagueness of the ASRM guidelines for monetary compensation to donors in Chapter 1, I raised the question, “At what level of monetary compensation does the financial incentive become ‘undue inducement’?” While this question is certainly relevant to contemporary uses of egg transfer in the U.S., perhaps a more broadly probing question would inquire why the U.S. is the only country that allows the payment of sizable fees to donors. The reasoning implicated in both of these considerations requires thorough interrogation to elucidate the significance of financial compensation in shaping donors’ decisions and experiences.

In attempting to establish expectations for ethical use of egg transfer, ART practitioners and feminists alike have argued both sides of the payment debate – one side contending that financial compensation, or sums of specific amounts are resulting in donor exploitation because they are being coerced into the decision to donate; the opposing position claiming that *not* paying women for the time and inconveniences they undertake in donating their eggs would result in exploitation (subRosa, 2002; Dickens, 2001; Macklin, 1996). In an effort to decipher the impacts of substantial compensation

payments, this chapter will consider the complexities of both sides of the debate about the potential for commodification and exploitation of egg donors and their bodies.

What is the Donor Fee for?

Debates of whether the practices of egg transfer result in the commodification of donors' eggs are rooted in the question of exactly what is being compensated for by the donor fee. The argument that payment of the donor fee in direct exchange for a woman's eggs is *not* commodification is impossible to defend. The very meaning of the word "commodification" indicates that objects – in this case, the donor's eggs – are used in such a way that they provide an advantage (financial or otherwise), or that they are made into objects of commerce.

To combat the automatic equation of payment with commodification, many people who support the issuance of financial compensation to donors contend that donors receive remuneration for their time and effort, rather than the reproductive pieces of their bodies. Although they provide no justification or evidence for their claims, the ASRM Ethics Committee contends that "Compensation based on a reasonable assessment of the time, inconvenience, and discomfort associated with oocyte retrieval can be distinguished from payment for the oocytes themselves" (2000, p. 217). As supposed evidence of this, ASRM (2002) indicates that donors should be compensated for their time and efforts regardless of the clinical outcome of the transfer. In other words, the donor fee should not be dependent upon the number of eggs retrieved (if any at all), nor their employment in a successful pregnancy.

At a first glance, basing arguments in support of payment on the grounds that donors' compensation is not outcome-based seems perfectly reasonable. Yet upon closer

examination, this perception may prove to contain some inherent flaws. One commonly unexamined problem emerging from this logic lies in the claim that the financial compensation of donors is, in part, to offset the inconveniences and discomfort that may result from their participation in egg transfer. Admittedly, proponents of donor compensation argue that donors' *eggs* are not being commodified by this process, never making any mention of the potential for commodifying women's bodies in general. Yet one might argue that the provision of donor fees as compensation for the health risks and (perceivably unwelcome) bodily changes that may result from donating is commodifying donors' bodies and health status (Dickens, 2001; Kuhse, 2001).

In addition, this set of practices involves the removal of reproductive cells *from* donors' bodies and thus has very real impacts and consequences *on* their bodies. As such, can a donor possibly weigh the prospects of payment for her time and effort as separate from the idea that she is being paid for the pieces of her body being extracted during her participation in egg transfer? In providing donors monetary compensation for accepting conditions that directly impact their bodies, how can donors' bodies conceivably *not* be commodified by this process? Yet, proponents of donor fees continue to utilize the language of compensating donors for their "time and inconvenience" so as to avoid accusations of commodifying women's bodies.

Another rarely considered reading of the use of donor fees is that, if donors are in fact being financially compensated for their time rather than their eggs – perhaps because payment for eggs is viewed as too crude and capitalistic – why is the commodification of donors' time not seen as unethical as well (Macklin, 1996)?¹ Perhaps our grounding in a capitalistic society makes it seem perfectly reasonable for people to be paid for time spent

doing something for another – in other words, their labor. Or as Macklin (1996) describes, “The implication . . . seems to be that payment to people for their services is ethically permissible but paying them for bodily products is not. Payment to women for time and effort sounds like paying people for their work, surely an ethically acceptable if not obligatory social practice” (p.109). However, the failure to acknowledge the reproductive nature of the labor performed by egg donors in the time for which they are paid seems to draw on historically prevalent ideas that women’s reproductive labor should be required as unpaid work. To unquestioningly assume that women’s time, but not their *reproductive* labor should be monetarily valued, takes for granted many of our cultural beliefs about both assigning value, and women’s worth. But more importantly, doing so fails to recognize that the labor for which women will be compensated is performed in, and by the very bodies that are purportedly *not* being commodified by payment to donors.

On the whole, this question of whether it is possible to separate compensation for time from payment for eggs is phenomenologically impossible for even donors themselves – let alone policy makers – to answer. Yet perhaps a consideration of a hypothetical situation in which this donation scenario is able to occur separate from donor women’s bodies may offer some additional theoretical perspective. Suppose that, instead of donating eggs produced by a woman’s ovary, donor women were able to artificially manufacture eggs to give to an infertile woman. As within any good capitalist system such as ours, it would be anticipated that these donor women would be compensated for their time and efforts in producing these eggs. In this scenario, how

could the donor woman not see the payment she receives as being for her eggs – i.e. the products of her labor?

Even in considering the argument by many supporters of donor fees – that women are compensated regardless of the clinical outcome – the dynamics of a capitalist system automatically anticipate that some products will be flawed, or not suitable for sale. Yet even in such instances, laborers are still paid for their work – or in the case of this example, their work as egg makers. So using the argument that women are compensated regardless of the clinical outcome to indicate that donors are not being paid for their eggs seems to be marred on several counts. For advocates of compensation to base their argument on the irrelevance of clinical outcome is the equivalent of saying that donors would be just as likely to be compensated for providing finely crafted, intricately and uniquely designed Easter eggs as the eggs created by their ovaries, which is clearly just absurd.

Furthermore, it is highly unlikely that any donors would receive monetary compensation without proof that this procedure is successful. Unless ART users and practitioners can anticipate that the majority of egg retrievals will produce numerous eggs for fertilization, it would be unprofitable to maintain a policy of compensating donors on the basis of their time and inconvenience rather than the actual number of eggs retrieved. With the highest success rates of all ART procedures in terms of pregnancies and live births, egg transfer clearly has a history that indicates the likelihood of such desirable outcomes. These success rates thus serve to justify payment for donors' participation rather than their eggs.

A final flaw in the contentions that egg donors are not paid for their eggs generates from the fact that egg donors in the U.S. are not compensated uniformly. Whereas most donors will receive fees between \$2,500 and \$5,000, depending on geographical region and practitioners' preferences, some instances have recorded much higher sums being awarded to donors – at times in excess of \$50,000 (Gurmankin, 2000). These instances are due in large part to what Becker (2000) describes as marketing “designer eggs” (p.153), in which the “pedigree” or characteristics (e.g. intelligence, ethnicity, athleticism, appearance, etc.) of donors become major determinants of the amount they can procure for donating. If donors were truly being compensated for the time and effort exerted through numerous clinic visits, injections of hormones, and ultrasounds, not to mention the tedious screening processes and the actual retrieval process itself, why would they all not receive uniform compensation? ² Thus, the numerous holes in this proclaimed intent of donor fees suggest that claiming women are paid for their labor rather than their eggs is untenable in actual practice.

However, the more troubling implications of supposedly paying women for their time and inconvenience, instead of their eggs, is that doing so positions women's eggs (and their reproductive capabilities in general) as completely abstracted from the rest of women's bodies. The contexts of egg transfer that I have brought forth in this examination of commodification clearly indicate that women's bodies – much more so than their schedules – are bearing the costs of participating in egg transfer.

Considering the bodily consequences of egg transfer, contending that donor fees are *not* compensating for the costs women's bodies are incurring – including lost eggs – is insulting. In this light, the involvement of financial compensation does seem to result

in the commodification of donated eggs – and by implication, donors’ bodies – regardless of whether or not that is the direct intent of payment.³ Thus, the following discussion will proceed from this deduction that both donors’ eggs and bodies are commodified during egg transfer, when sizable compensation for donors is present.

Does this Form of Commodification Evolve into Exploitation?

As the previous section demonstrates, the contemporary uses of egg transfer in the United States (i.e. those in which payments to donors are acceptable) result in the commodification of donors’ bodies and reproductive body parts. The extensive lengths to which ART practitioners, users, donors themselves, and society in general go in order to forward romanticized narratives and representations that *do not* point to the commodification of donors’ eggs makes apparent our presumption that commodifying bodies and their parts is an undesirable or unacceptable condition. But what exactly is it about the idea of commodifying bodies that we find so unsavory? Or, as Nancy Scheper-Hughes (2001) questions, “Why are markets in human bodies, body parts, sexual favors, reproductive material or blood sports (like boxing) so disturbing, so hard to take” (p.2)?

Establishing the relationship between commodification and exploitation

Becker (2000) offers a response to Scheper-Hughes’ question which seems to strike at the core of our discomfort over the idea of commodifying donor bodies and parts. She states, “The commodification of donor gametes represents an ethical dilemma for many people because it raises questions of disenfranchisement and exploitation” (Becker, 2000, p.153). As Becker suggests the notion that we could market and profit from our bodies is not what is offensive to society. Rather the implications that such capitalistic practices could both unfairly take advantage of, and disempower the people

whose bodies are marketed provides the basis for concerns about exploiting donors. Yet Becker's statement indicates that the processes of commodification are not necessarily always accompanied by exploitation—she merely notes that such *possibilities* do exist. This suggestion, however, indicates that even though women's bodies are commodified by egg transfer does not necessarily mean that egg donors are being exploited.

As a comparative situation in which exploitation supposedly remains absent from commodification, Blacksher (2000) acknowledges that the capitalistic contexts in which we live often encourage people to utilize their talents and characteristics for personal and financial gain. She suggests that most people ultimately commodify some part of themselves to advance in the world. She says,

people sell all sorts of things that are importantly a part of them. We are encouraged to develop and maintain personal and professional capacities and talents so we can do just that: market them. People cultivate and hone their analytic capacities, their athletic and musical talents, their entrepreneurial know-how, even their physical beauty, to earn a fee, make a living. Why not my eggs? (p. 30).

As Blacksher inquires, what is it about financial compensation for women's reproductive material that produces such a sharp reaction when we spend so much of the rest of our lives selling our best qualities to get by?

In applying the logic that Blacksher uses above, might it also be possible to conclude that the bodies of egg donors have been commodified in ways that avoid the detriment of exploitation, and as such are purely beneficial to all parties involved? Is the commodification of women's eggs justifiable if situations of exploitation are occluded? And if so, why is most of American society persistent in demanding that donor fees are not payment for women's eggs?

Any attempt to answer these questions – as Blacksher indicates – requires consideration of whether donors are being disempowered or taken advantage of in the process of egg transfer. Based on current uses of egg transfer in the U.S., these questions necessarily raise the three issues of appropriate levels of compensation, the implementation of informed consent, and donor vulnerability. The careful deployment of discourses demonstrating adequate donor fees, proper informed consent, and measures to protect vulnerable potential donors, provide strategic support to the use of egg transfer by making the exploitation of donors seem impossible. However the strength of these supposed protections of potential donors is questionable at best.

The issue of whether donors are being appropriately compensated for the transfer of their commodities (i.e. their eggs) to recipients is actually indeterminable. In considering whether donors are receiving either more or less money than their eggs are worth, one encounters a philosophical and ethical conundrum. As potential sources of human life, women's eggs are invaluable because to name any sum, no matter how high, would devalue and disregard the inherent dignity of human life (The Ethics Committee of the American Society of Reproductive Medicine, 2000). On the other hand, it can be argued that donor women's eggs, when left to disintegrate in the ovary, are valueless because they are resources that the donors themselves do not intend to use (Macklin, 1996).⁴ Thus, the "appropriateness" of the level of compensation for the commodity transfer in egg donation is impossible to assess due to the fact that eggs can simultaneously be priceless and worthless. Therefore determining a suitable payment for eggs is ineffective as a gauge for whether donors are being exploited.

Turning to an examination of donors' vulnerability to being exploited provides another, perhaps more useful, measure of whether egg donation disempowers or takes advantage of them. The component of informed consent that has been mandated by the ASRM is incorporated in acknowledgement of the very fact that women who are vulnerable as a result of financial need should not be accepted as donors (Dickens, 2001; Gurmankin, 2001). Yet, in questioning the content and quality of informed consent applied in the processes of egg transfer, Chapter 2 exhibits that the application of informed consent in the practices of egg donation are highly complex and have many inherent difficulties.

The weaknesses of informed consent become even more complicated when the financial incentives and motives are factored in. In discounting the exploitation of donors, many practitioners point to the fact that, during the screening process, they try to weed out potential donors who are "vulnerable through poverty who have no other means of earning" (Dickens, 2001, p. 341). Yet close examination of the screening process shows that it is not flawless. For instance, Gorrill (1998), whom I quoted in the first chapter, contends that donors' motives are explored to "ensure that donation is not done as an act of desperation" (p.45). This objective of the screening process (and many others) interestingly diverts attention away from examining the actual practices of egg transfer by psychologizing the potential donors. Thus, the screening processes are used as a measure of individual potential donors' ability to tolerate the conditions of egg transfer while the broader ethics and acceptability of these procedures remain largely unproblematic.

The use of donor screening processes warrant further critique because, even though the use of screening to avert financial exploitation (or pressure from family members in the case of known donors)⁵ may reduce many instances of outright manipulation, can the degree of a woman's desperation really be judged by another? Is not the assessment of this experience really subjective?

The ability of a psychologist to determine a potential donor's level of desperation is further complicated by a finding of Kalfoglou & Geller's (2000) research on the experiences of egg donors. Their research indicates that, "Because donors did not have the reassurance that information they provided would not be used to exclude them or be kept confidential, and because they did not always understand the purpose for some of the questions, there was information that donors felt they had to conceal from the psychologists" (p.228). Thus, in feeling compelled to disguise the extent of their need for the donor fee, potential donors may conceal the very "desperation" that ART practitioners might otherwise use to exclude them from donating.

On a similar note, some practitioners acknowledge that students are also an inappropriate population to serve as egg donors because of their characteristically precarious financial status. For example, Gorrill (1998) indicates that, "Some ART programs specifically do not target students as egg donor candidates because of the concern this group may be particularly vulnerable to the coercive power of money" (p. 49). Yet this claim stands in complete contradiction to the majority of donor narratives and investigative reports on egg transfer that appear in the popular press (e.g. Watson, 1997; Mead, 1999; Blacksher, 2000; Healy, 2003) as well as in the attitudes of many practitioners. Rosenthal (1998), for instance, declares that, "Many of our most prized

donors are college or graduate students in their early 20s, whose value as donors is based on their intelligence and the youthful age of their eggs” (p.190). Practitioners’ claims that they try to protect vulnerable potential donors are hard to take seriously when sentiments such as Rosenthal’s are stated out-right and also appear more subtly in descriptions of the ideal donor, or solicitation efforts aimed directly at student populations.

By focusing concerns about exploiting donors on the psychological status of individual donors rather than the contexts of egg transfer and ARTs, just one more parallel to historical attempts to pin reproductive “problems” on women is established. Yet even if one does take the screening processes seriously as a means for protecting donors from exploitation, numerous contradictions become apparent in attempts to identify and exclude particularly vulnerable potential donors. These various inconsistencies seem to suggest that the prospect of exploiting donors is an issue that receives only token attention or concern from those who are best positioned to eliminate it – i.e. practitioners and egg recipients.

Contesting Claims of the Harmlessness of Commodifying Eggs

This chapter has been devoted to breaking down the various justifications offered for the financial compensation that is uniquely paid to egg donors in the United States. Based on the impossibility of determining eggs’ value, the shortcomings of informed consent, and superficial attempts to prevent particularly vulnerable populations of women from donating – all of which were demonstrated in this chapter – the bodies of donors are apparently being both commodified and exploited by most instances of egg transfer in the U.S.

Obviously, these assertions may not apply to *all* donors. Yet while appropriate precautions are theoretically taken to avoid disempowerment and taking advantage of donors, the potential for exploitation in practice is much higher than our society is led to believe by common representations of egg transfer. The moral and ethical repugnance of such prospects make sense of Americans' insistence on clinging so tightly to the belief that donors are not being paid for their eggs.

If one steps back for a moment though, a rather overt, yet unacknowledged message lies right at the surface of the ways in which financial compensation to donors is explained. The fact that (despite the bodily costs they incur) donors are paid for other things as opposed to their eggs indicates that women's bodies – particularly women's reproductive bodies – are *not* valued by our society. While the debates over donor fees get entangled in efforts to protect donors from exploitation and coercion, U.S. society totally loses sight of the fact that the subject of these debates affects women's experiences of their bodies, and that the practices of egg transfer have serious consequences for women's bodies.

Of course, if one acknowledges that the conclusions drawn from the payment debates are not even seriously applied to the situations of egg donors, an even stronger statement is made about the worth our society attributes to women. As I suggest in the previous section of this chapter, the protection of vulnerable potential donors receives only token attention. Becker (2000) provides evidence of this in saying that even though many people utilizing donated eggs recognize and “express concern about” the potential for the “disenfranchisement and exploitation” of donors, “in all cases, they went ahead with their plans” (p.153). This callous disregard of the plight faced by donors clearly

asserts that women's *reproductive* bodies *are* actually valued, but that the women who are donating their reproductive cells *are not*. The fragmentation of women's bodies that has occurred as a result of attempting to establish justifiable compensatory practices within uses of egg transfer has thus produced a new version of the objectification of women's bodies and the presumption that the primary function of women's bodies is still reproduction.

¹ This seemingly arbitrary distinction seems to parallel the fine line drawn between other practices in which women profit from the use of their bodies. For instance, prostitution has been criminalized in the U.S. for commodifying women's embodied sexuality whereas erotic dancing is a legal form of "entertainment."

² Clearly, the majority of my discussion has seemingly excluded women who receive no monetary compensation for their participation in egg transfer – one example of which would be known donors. Yet in actuality, many women who donate to family and friends with no expectations of compensation can justifiably be clumped together with women who receive monetary compensation due to the fact that they may receive material or non-material rewards (e.g. increased status or respect within the family, receipt of favors, etc.) which may easily simulate the exchange that occurs through financial compensation of anonymous donors.

³ In suggesting that the commodification of donors' bodies is automatically assumed by the commodification of their eggs, I am treading on some treacherous ground. This extension fails to consider the idea that once eggs are removed from a woman's body, they are no longer part of her body. Is there a point when a donor's eggs are no longer considered pieces of her body? When they have been retrieved? Or implanted in another woman's body? When it becomes a gestating fetus inside another woman's body? If the fact that the eggs are produced from a woman's body indicates that they will always be a part of her body, whether they remain inside her body or not, is a child produced from a woman's egg thus also eternally part of her body? Would the answer to these questions differ in the case of sperm donors?

⁴ Initially, some concern was voiced over the possibility that by donating their eggs, donors may reduce the number of eggs they have themselves, should they desire a child at a later time. This fear was quelled by researchers' reassurance that this would not be the case because several oocytes go to waste each menstrual cycle, as numerous follicles are released, but only one matures. It will be interesting to see if this fear is further alleviated by newly breaking research (based on lab mice) suggesting that women may in fact produce eggs across the lifespan, rather than have a set number of eggs at birth (see Angier, 2004 for a description of these findings).

⁵ As Raymond (1991) argues, "The potential for women's exploitation is not necessarily less, merely because no money is involved and the arrangements may take place within a family setting. The family has hardly been a safe place for women" (p.64). Based on the alarming prevalence of emotional, physical, and sexual abuse that women and girls encounter within family contexts, Raymond's assertions are well grounded in claiming that the family may also be a source of women's exploitation.

Chapter 4: Re-conceiving Reproductive Freedom

At the time Mead's 1999 story on egg donation was printed in the *New Yorker*, Cindy Schiller, the central character and supposed paradigmatic egg donor, was an intelligent, attractive, light-skinned, blue-eyed, graduate student who had donated her eggs while both an undergraduate and graduate student. Among Schiller's many accomplishments and activities of note that are woven throughout the story of her involvement with this ART is mention of her central role in an organization called "Students for Reproductive Freedom." Schiller's involvement with this particular organization probably ignited little interest from the average reader, as this affiliation is listed among several of her other activist interests. Yet in light of my own consideration of the implications of egg donation for women's reproductive freedom, I could not help but contemplate the implication of Schiller's association with this organization.

In considering Schiller's identification as a reproductive rights activist, I entertained questions such as, if (as Chapter 3 shows), the processes of egg transfer do commodify donors' eggs and bodies, are such uses of one's reproductive capabilities contradictory to notions of reproductive freedom? If so, is there a discrepancy here between Schiller's willingness to commodify her reproductive capabilities, while simultaneously working to promote and protect women's reproductive freedoms? In other words, does Schiller's donation of her eggs damage or contradict the very

reproductive rights she is committed to supporting? Less consequentially, is this yet one more example of the contradictory situations conjured by the practices of egg donation? Or, is it indicative of a more significant shift in the very ways in which we conceive of notions of reproductive freedom?

In reflecting on the discourses around egg donation that have enabled the production of representations such as those examined in earlier chapters, Schiller's situation seems to indicate that notions of women's reproductive freedom are in fact transforming through our current uses of ARTs such as egg transfer. The ability to describe *concisely* a complex notion such as reproductive freedom is rare. However the central characteristic of contemporary discourses of women's reproductive freedom can actually be summarized in a single word: stewardship.

As a whole, the representations of egg transfer that I have drawn on in previous chapters demonstrate the ways in which our operative definitions of reproductive freedom have shifted away from previous notions of reproductive freedom that emphasized women's power to define their own roles as sexual and/or reproductive women in our society. Instead, current perspectives of reproductive freedom now seem to be focusing women's ability to "steward" their reproductive capabilities.

Admittedly, this is a very subtle discursive shift, but by elucidating the dynamics and ideologies of our present discourses, I will argue that this shift has significant impacts on the objectives of contemporary women's movements. In order to build this argument clearly, I will need to identify current commonly held perspectives of reproductive freedoms, as well as their significance for women today. To do so, the first part of this chapter will explain how discourses of stewardship function to establish

women's reproductive freedom – specifically by drawing on the appearance of these discourses in current representations of egg transfer that were analyzed in Chapter 1. The second part of this chapter will pry at the gaps and incongruities within these discourses to show that equations of stewardship with women's reproductive freedom may, in fact, not be adding up properly.

Egg Stewardship: Proper management of reproductive resources

The characterization of discourses about egg transfer as based in stewardship is not one I have pulled out of thin air. Several critics, scholars, and practitioners have both explicitly and implicitly implemented ideologies of stewardship to the practices of egg transfer (e.g. Shanley, 2001; Blacksher, 2000; Mead, 1999; Healy, 2003; ASRM, 2000), and ARTs more broadly (Sawicki, 1999; Becker, 2000; Dill, 2001).

As a general concept, stewardship invokes notions of responsible or careful management, or administration of valuable resources. In applying this idea specifically to women's reproductive freedom, one must consider what is the object that requires stewardship, or what is being managed by whom, and why? The predominant representations of egg transfer analyzed in Chapter 1 offer some insight into how these questions might be answered. Specifically, through the implementation of ideas of donors' altruism and freedom from exploitation, common representations of egg transfer demonstrate how stewardship discourses are now equated with women's reproductive freedom. To elucidate how these discourses have become viable metonyms for women's reproductive freedom, I will examine how typical components of egg transfer representations make such connections possible.

How women have become egg stewards

In contemporary discourses around egg transfer the portrayal of donors' reproductive freedom as stewardship both initiates from, and perpetuates ideas of their eggs as the valuable resources that require careful management.¹ A few of the individuals who critique this ART actually directly use the perception of eggs as resources to establish the relevance of stewardship to our contemporary narratives of reproduction. For example, in her discussion of egg and sperm donation, Shanley (2001) declares,

A person's relationship to his or her genetic material is better thought of as a kind of stewardship than as ownership. Thinking about what is involved in gamete transfer should turn us away from those strands of the liberal tradition that emphasize the individual and property in the body, and toward those strands that rest on a deeper understanding of the person rooted in multiple and complex relationships to family and civil society (Shanley, 2001, p.95).

In this passage, Shanley raises some points that are important for construing donors' eggs as resources and in need of administration, which thus supports notions of stewardship.

First, Shanley determines that people's genetic material – specifically their eggs and sperm – is not a commodity that can be sold or bartered. This aspect of stewardship discourses is apparent in the various representations of egg transfer discussed in earlier chapters which attempt to forward only depictions in which eggs are not commodified and donors are free from exploitation. In fact, the idea that women are merely managers of their eggs coordinates perfectly with the assertion critiqued in Chapter 3 that donor fees are compensation for time and inconvenience rather than women's eggs. If the eggs being provided for ART procedures are managed by women, rather than being seen as parts of their bodies, it becomes nearly impossible to conceive of donors being exploited

by the eggs' use – especially when the donors are being handsomely rewarded for their time administering these eggs.

Additionally, by implanting the ideas that women's relationships to their eggs are much greater than mere ownership within the contexts of social responsibilities, Shanley elevated the status of ova to a position of resource that bears significance to society, not just individual women. As such, the humanitarian goodness that is portrayed as a hallmark of egg donors fits seamlessly into the story line of women as stewards of their eggs. The emphasized representations of donors' altruism, which were identified in the first chapter and deposed in the second, provide the ideal fuel for the idea that women are acting merely as stewards of reproductive resources and capabilities – and ultimately their bodies – for the good of all members of society.

Blacksher (2000) provides some additional perspective on the idea of gametes, and eggs in particular, as resources requiring stewardship. In the process of debating the idea of donating her eggs, Blacksher echoes the above passage from Shanley, as she comes to the conclusion that she does not own her eggs as one owns a material commodity. Instead, she describes, "The biologic potential of this human material to throw into being another singular human, an entity that would transcend its material origins, began to give me pause. Complex and unique individuals were born out of this highly improbable, chance event, and this suggested to me that these precursors to life deserved my thoughtful stewardship" (p.29).

As Blacksher suggests, women's eggs as societally significant resources draw their value – or rather, the fact that they are invaluable – from the potential they have to produce human life. By stating eggs' relevance to the formation of human life, Blacksher

invokes their significance as links to both the past and the future of the human continuum. As such, they have priceless potential outcomes, and thus clearly need someone to ensure their proper use. Also, by qualifying the necessary stewardship of women's eggs as "thoughtful," Blacksher shows how women have been granted the privilege of deciding the fate of these precious resources, accompanied by the knowledge and responsibility that whatever choices they make will carry great consequence for both themselves and all of humankind.

Managing resources through "choice"

While this discussion of eggs as resources that are managed by women certainly supports the application of the term "stewardship" to donors' role in egg transfer, at this point, one might be wondering how this relates to women's reproductive freedom. Drawing on the above excerpt from Blacksher, her implication (even though she does not specifically articulate it) is that women have a *choice* of how to administer their eggs. In fact, framing practices of egg donation with the concept of stewardship assumes that women have free reign over their eggs and may manage them in any way they see fit.

As egg stewards, women are purportedly recognized as the sole executors of these eggs, which potentially could be a very empowering situation for women. How the eggs in women's ovaries are administered is thus seemingly their choice, which rests the fate of humanity in women's hands, or more literally, their ovaries. As Chapter 2 indicates, this presumed decision-making power of donors is read through the cultural lenses of "choice" that are shaped and informed by feminist histories of women battling for the freedom of both their bodies and destinies through control of their own reproductive lives. Thus, the supposed presence of donors' autonomous choice in managing eggs

becomes conflated with the similar, but more politically invested concept of “choice” as is understood in terms of reproductive freedom.

This connection between women’s administration of their eggs and reproductive freedom is affirmed further by Shanley’s insinuation (which grounded women’s relationship to their eggs within societal obligation) that women’s stewardship or donation of their eggs is based in altruism and freedom from exploitation – which the previous chapters determined are both concepts that are hinged upon the assumption or supposed precondition of donors’ autonomous choice to participate in egg transfer. Thus, by embedding the discourses of stewardship within constructions of altruism, societal obligations, freedom from exploitation, and ultimately within notions of “choice,” stewardship has metonymically come to index contemporary conceptions of women’s reproductive freedom.

In stepping back to examine how notions of stewardship, altruism, and the absence of exploitation cooperate to influence our current perceptions of egg transfer, and women’s reproductive freedom more broadly, the presumed presence of donors’ free choice to participate in this ART serves as a central pillar in assembling favorable perspectives of egg donation. Yet as Chapters 2 and 3 exhibit, women’s ability to autonomously choose to donate their eggs is weakly constructed.

In metaphorical terms, it is almost as if our current representations and awareness of egg transfer exist as a house of mirrors in which donors’ altruism, the absence of exploitation, and “choice,” repetitively reflect off one another in such ways so as to construct an image which equates donor stewardship with their reproductive freedom. As a result, women’s rights and responsibilities to manage their eggs are seen as a perfect

picture of women's bodily rights. Yet if one of these mirrors was to break, or if one of these central images was disrupted, the reflections of all the other images would be distorted. In other words, because the ideas of "choice," donor altruism, and freedom from exploitation are so intricately reliant upon one another, the disruption of one image alters all other reflected images in this house of mirrors, including that of donors' stewardship as reproductive freedom. Thus, in light of the incongruities raised around autonomous donor choice in previous chapters, I will now unearth some of the gaps in stewardship discourses that are typically glossed over in contemporary representations of egg transfer.

Shattering Images of "Choice" and Disrupting Stewardship Discourses

The questionable status of donors' autonomous choice that is brought forth in both Chapters 2 and 3 suggests that the presumption of donors' reproductive freedom may be more problematic than is implied by the stewardship discourses. For instance, the gaps within the processes of informed consent, manipulation of women's feelings of empowerment through the appropriation of feminist ideologies, and utilization of gendered kin relationships, which may all factor into women's decisions to donate their eggs, endanger their ability to make the autonomous choice to participate (see Chapter 2). Additionally, the indeterminate impact of monetary compensation and the inability of ART practitioners to weed out all financially vulnerable potential donors, further jeopardize donors' reproductive freedoms (see Chapter 3).

In sum, when considered together, the questions raised in Chapters 2 and 3 about altruism, autonomy, and exploitation, ultimately contest whether a decision to donate one's eggs on the bases of altruism and autonomy can truly exist—specifically within

contexts of financial gain (regardless of the intended object of payment) and the cultural pressures that burden women with a sense of duty to reproduce and/or nurture others. Thus, as persuasively configured are the discourses of women as stewards of their reproductive capabilities, the arguments built in Chapters 2 and 3 challenge the validity of such discourses.

Stewardship as a false vision of reproductive freedom

Even if one takes for granted the existence of free choice for egg donors (as is the case in representations of egg transfer), this ART still poses several problems in equating stewardship of reproductive capabilities with reproductive freedom. On the surface, the stewardship discourses may be read as affirming of women's rights because if anyone is going to be a steward of women's reproductive capabilities, including her eggs, it is desirable for each woman to maintain this responsibility herself. Although the agency implied in this reading may be experienced as empowering by some women, it ultimately devalues all women's worth by using very limited aspects of individual women as the scale by which all women are measured.

Furthermore, by fragmenting women's bodies both literally and ideologically, ideas of egg donation as stewardship encourage women to (yet again) see parts of their bodies as "resources" that require management.² The stewardship discourses position women's eggs as "natural" resources – as was indicated by the biological and genetic emphases of the excerpts from Shanley and Blacksher earlier in this chapter – that have invaluable potential outcomes.³ In this sense, the proper management of women's eggs is as much a public concern as is, say, preventing deforestation of wilderness areas, or maintaining healthy citizens in order to form a standing army. In following this line of

thinking, if a woman fails to properly utilize the eggs she is stewarding (i.e. through donation or pregnancy), is she harming or short-changing society, or the nation, by allowing such valuable resources to go to waste?

The obligations embedded in this question show that even as notions of stewardship provide women with the privilege of determining the fate of the eggs in their ovaries, women simultaneously are granted the hefty responsibility of determining the future of human existence. Thus, women have been thrust into roles as stewards, or nurturing managers of the past, present, and future of U.S. society, and ultimately the human race. Consequently, the high stakes of egg stewardship appear to have spawned yet one more permutation of the seemingly eternal imperative for women to be active in procreation in order to qualify as “true” women, i.e. biological and cultural reproducers of society.

The pressure that women experience to embody “true womanhood” provides a salient example of “biopower”⁴ as theorized by Foucault (1978), because in forwarding such traditional gender ideology, the stewardship discourses have crafted women’s proper management of their eggs into more of an imperative than a choice. In other words, the constructions of women as egg stewards presents a disciplining and restricting force on women’s “choice,” rather than an endowment of rights and freedom. As such, the stewardship discourses are enacting social and psychological control over women which compels them to be complicit with narrowly defined roles as reproducing machines (Foucault, 1977; Bartky, 1998). Through embracing the notions of their obligation and social responsibility to steward their reproductive capabilities women are both abiding by, and helping to construct a framework, built upon stewardship, that limits

the very realm of what women and society are even able to recognize as the options from which women are able to choose (subRosa, 2002).

Such gendered ideology is carried over into the belief that women's sense of stewardship over their eggs will compel them to monitor and maximize the use of their eggs – not with the objective of protecting their own interests, but with that of serving the believed interests of humanity. Women's own interests are superceded by what Shanley (2001) describes as their “multiple and complex relationships to family and civil society” (p.95). These gendered expectations of self-sacrifice are deeply embedded in nostalgic societal imaginings of motherhood (and by implication, womanhood) that call upon assumptions of women's nature as essentially good, kind, and altruistic.

However, by positioning women as egg stewards in this way, feminist objectives of women's liberation are negated in at least two ways. In the first place, the gendered expectations embedded in ideas of stewardship provide very restricting constructions of what women's reproductive freedom might look like. In other words, the stewardship discourses offer a limited view of the appropriate intentions and outcomes of women's reproductive behaviors (e.g. constructing heterosexual nuclear families, reifying traditional gender roles, etc.) and therefore perpetuate restrictive categories and roles of womanhood from which many feminists believe women need to be liberated.

A second way in which feminist visions of reproductive freedom are negated by these discourses exists in the very fact that ideas of stewardship place anyone else's need over those of individual women. By prioritizing the interests of women's families, communities, and society – as well as members of past and future generations – over the well-being and bodily integrity of the very women who are accepting (arguably

unnecessary risks) by agreeing to participate in egg transfer, the stewardship discourses undeniably deviate from the mission of women's liberation and empowerment sought by feminist movements.⁵

Of course, my contention that women's interest should be attended to first reveals a fundamental conflict between the objectives of women's liberation and definitions of stewardship (i.e. stewards should act primarily for the good of the whole – i.e. women's communities or society). This is not to say that the goal of women's reproductive freedom is to completely individualize their reproductive choices. To clarify my point here, I am not arguing that earlier feminist visions of reproductive freedom attempted to remove women's reproductive lives from the social contexts in which they made decisions, acted, and/or were acted upon. Rather, it seems that the stewardship discourses enable the de-contextualization and disembodiment of donors by conveniently remaining oblivious to the gendered, racist, and classist conditions influencing donors' experiences.

Historically and contemporarily, considering women's reproductive freedom as embedded within complex sociological frameworks is both appropriate and necessary in all attempts to establish and protect women's reproductive freedoms (Roberts, 1997; Corea, Hanmer, Klein, Raymond, & Rowland, 1987). But problems arise when the social connections and obligations are forwarded as the *raison d'être* of women's reproductive freedom (as in the case of egg transfer). In other words, stewardship discourses foreground and attribute greater importance to the interests of society, at the cost of donors' embodied experiences receiving adequate acknowledgement. Much of this problem stems from the fact that the resources women are charged with stewarding are

actually part of the women's bodies. Perhaps this suggests then, that stewardship is not an appropriate framework for thinking about women's use of their eggs, or any aspect of their reproductive lives for that matter.

However, as a consequence of these imbalanced priorities of society's interest over women's needs, individual women's rights to act in ways that first and foremost benefit themselves, rather than other individuals, or even humanity as a whole are denied. While these assertions may sound purely selfish, assuming that an individual is capable of making *any* decision completely separate from their social contexts is impossible (Petchesky, 1995; Shanley, 2001). Yet in getting caught up in the ideas that women – as the supposed innately self-sacrificial beings – are obligated to manage their reproductive abilities to specific ends (primarily in the interest of their family, society, race, or species), the objective of ever establishing women's reproductive freedom gets lost by minimizing the consideration of individual and collective women's personal concerns. Thus, in shaping individual women's decisions with societal interests, stewardship discourses transform and shift the individual politics of reproductive practices for women as a collective.

Judging from the various chasms in the continuity of stewardship discourses that I have identified here, maintaining the presumption that women's reproductive freedom is universally promoted by egg transfer – and ARTS more generally – is impossible. To return to the metaphor of the house of mirrors, my arguments have exposed the fragility of the representations of donor altruism, freedom from exploitation, and “choice.” In doing so, I have exposed the vulnerability of the perception that egg stewardship is representative of reproductive freedom. Thus, if the equation of egg donors' reproductive

freedom with stewardship of their eggs remains dependent upon a myopic concentration on donors' altruism and the premise that donors are not being exploited, a false vision of reproductive freedom will continue to be fostered and perpetuated.

¹ The reason for my use of the terminology of "resources" in reference to women's eggs in this chapter is a reflection of the ideologies forwarded by the discourses being examined. The identification of women's eggs as "resources" in this chapter is not necessarily contrary to the arguments made in Chapter 3 that women's eggs have become commodities. However, the shift in terminology is accompanied by some different connotations.

² This argument, that females can utilize their bodies as various types of resources for advancement, is not limited to the realm of reproduction. In fact, the idea that women can use their supposed bodily assets (e.g. attractive appearance, sexuality, physical weakness, etc.) – which are embedded in sexism and traditional ideas of gender – to obtain gains (e.g. avoiding speeding tickets, getting into clubs, acquiring employment, etc.), is one that I often hear voiced by students in my "Introduction to Women's Studies" class.

³ My purpose in placing the term *natural* in quotation marks in this passage is two-fold. First, I am playing off our typical conception of what is meant when the phrase "natural resources" is used (e.g. petroleum reserves, clean water, etc.). More importantly, my second intent is to point to the fact that while ova generally form within most women's bodies without intervention of any kind, the practices of extracting them en masse from women's bodies clearly cannot be categorized as natural processes.

⁴ Haraway (1997) offers a useful explanation of this term. She states, "I understand Foucault's (1978) concept of biopower to refer to the practices of administration, therapeutics, and surveillance of bodies that discursively constitute, increase, and manage the forces of living organisms" (p.11).

⁵ These arguments are also frequently used to combat the increasingly prominent conservative and anti-choice efforts to establish "fetal rights." Over the past ten to fifteen years, opponents of abortion have fought for, and gained much ground in creating policy and legislation that recognizes the rights of unborn fetuses as independent from the rights of the women carrying the fetus. "Fetal rights" advocates hope that in obtaining these rights for fetuses, they will be able to revoke women's freedom of reproductive choice that was established by the landmark 1973 *Roe v. Wade* Supreme Court case. Such efforts have been reflected in the prosecution of pregnant women drug-users for such "crimes" as fetal abuse (see Hartouni, 1997). The battle for fetus' rights is also apparent in the current Congressional debate over the Unborn Victims of Violence Law (also known as "Laci and Connor's Law," so-called in remembrance of the brutally murdered Laci Peterson in 2002, during her eighth month of pregnancy). Women's rights advocates coming from a wide variety of theoretical and political perspectives contest the arguments for "fetal rights" on the basis that they are clearly misogynistic in undermining the rights of mature, living women in the interests of unborn fetuses (National Organization for Women, 2004).

Epilogue:
The Current Status of Reproductive Freedom

If the current situation of egg transfer is taken as a model, as I suggested in the last chapter, what can be concluded about the present status of women's reproductive freedom? In looking at the case of egg donors, even though they have the apparent ability to choose whether they will participate in egg transfer, their reproductive freedom is evidently undermined by the mythical proportions of both donors' perceived altruism and the humanitarian concerns women are believed to be demonstrating by donating their eggs.

In illuminating the contextual conditionality of women's reproductive choices, the situation of egg donors speaks more broadly to the ways in which all of women's reproductive decisions are deeply embedded within a complicated network of personal and societal factors. Corea, et al (1987) explain the political significance of women's personal reproductive decisions in stating,

Claims for a 'right to choose' cannot take place outside of the general revolutionary movement for women's freedom. And we cannot use individualistic solutions to deal with social problems. 'Choice' is only meaningful when material and social conditions are such that we may truly exercise it in equity and without threatening the survival or the rights of all women (p.8-9).

Thus, according to Corea and her colleagues, in supposedly altruistically choosing to donate their eggs, women are exhibiting their personal needs and desires as well as the societal and cultural influences that shape such individual motives.

Although recognition of this simultaneous expression of personal and societal impulses to donate may seem like an obvious observation, this point actually identifies the underlying danger that current U.S. uses of egg transfer bear in terms of women's reproductive freedom. As I have demonstrated throughout this examination of egg transfer, the material and social conditions (e.g. financial need, familial expectations, pronatalist pressure, etc.) that women as potential egg donors face are largely ignored in favor of the nearly hypnotizing notions of altruism. Through this erasure of the contexts around egg donation, many people have come to see egg transfer and other ARTs as promoting women's reproductive freedom by expanding their reproductive options (e.g. by allegedly increasing the reproductive lifespan of countless women).

However, by unearthing egg donors' often disregarded bodily experiences from the obsessive attention devoted to the oppositionally framed motives of altruism and financial gain, I have revealed egg transfer to be a form of "stratified reproduction."¹ Application of this term to the dynamics of egg transfer seems strikingly appropriate as there is clearly a class division between who is able to benefit from its practice and who must sacrifice for its success.² Yet this division is conveniently hidden from view by the domineering presence of the stewardship discourses based on the allegation of all women's "choice." The extent to which stewardship discourses and ideas of "choice" gloss over the hierarchical division and injustice of egg transfer is evident when one or all of the images in the house of mirrors is shattered. Through the disruption of such representations and discourses, some of the impacts of stratified reproduction on broader notions of reproductive freedom may be acknowledged and addressed.

However employing this term “stratified reproduction” to egg donation is not to say that the women at the bottom of this particular stratified system (i.e. egg donors) are the only ones negatively impacted by such practices. As Corea’s quotation above suggests, by impinging on the ability of any woman to make autonomous reproductive choice, the freedom of *all* women is endangered. This point is evidenced by both the implications and prevalence of stewardship discourses. In reinforcing gendered cultural ideologies in which altruism is an expected aspect of women’s nature, stewardship discourses contribute to restrictive definitions of all women’s reproductive roles.

These same notions of stewardship have clearly been applied much more broadly than just to the experiences of egg donors. For example, in acknowledging the various regimens, schedules, and treatments that infertile women are expected to undergo in their battles against infertility, the perceived necessity of these women managing (or stewarding) their reproductive capabilities becomes undisputable (see Becker, 2000; subRosa, 2002). As a more disturbing case in point, the impacts of stewardship are seen through the hyper-vigilance exercised over pregnant women that recently justified the arrest of a woman in Utah for refusing a caesarean section – a decision which purportedly could have prevented the “death” of one of the twin fetuses she was carrying.³ Such cases, which are not infrequent, reinforce the idea that women’s reproductive practices are purely in the service of others.

As this last example demonstrates, the seemingly innocuous (and perhaps even admirable) repercussions of perceiving women’s reproductive choice in terms of stewardship enable an overt assault on the ideological concept of reproductive freedom and its bodily consequences. This onslaught is relevant to all women, regardless of their

place in reproductive hierarchies. As the current Bush administration's fondness for infringing upon women's reproductive rights serves as a guide for policy and legislation,⁴ the increasingly conservative climate being witnessed in the contemporary U.S. is exhibiting escalating hostility toward women's rights and the protection of their bodily integrity. Thus, if we as a society continue to tolerate, rationalize, or excuse portrayals of women's reproductive abilities and "resources" as both separate from their bodies and persons, as well as selflessly provided for the greater good – as has been done in the case of egg transfer – we will in essence be facilitating even further erosion of all women's reproductive freedom.

¹ Ginsburg & Rapp (1995) briefly explain the idea of "stratified reproduction" in describing it as "the power relations by which some categories of people are empowered to nurture and reproduce, while others are disempowered" (p.3). Shellee Colen (1995), who originally coined this phrase, provides an expanded definition in saying, "By *stratified reproduction* I mean that physical and social reproductive tasks are accomplished differentially according to inequalities that are based on hierarchies of class, race, ethnicity, gender, place in a global economy, and migration status and that are structured by social, economic, and political forces. . . . Stratified reproduction, particularly with the increasing commodification of reproductive labor, itself reproduces stratification by reflecting, reinforcing, and intensifying the inequalities on which it is based" (p.78).

² A prime example of the inequalities inherent in the stratified reproductive practices of egg transfer is brought forth through an identical situation with surrogacy, identified by Raymond (1993). She asks, "If women were truly lining up to become surrogate mothers out of altruism and concern for the infertile, we would have middle- and upper-class women bearing the babies of lower-class couples, where the added gift of aiding those who cannot afford to pay would be an even greater expression of altruism. Presumably, altruism is a cross-class phenomenon, but it does not appear to work that way in surrogacy situations" (p.45). All indications suggest that the same inequalities are exhibited in practices of egg donation.

³ See Ellen Goodman's (2004) editorial for a more extensive discussion of this case and previous related cases.

⁴ For instance, the Bush administration's most widely known attacks on women's reproductive freedom include staunch support of "abstinence only" sex education in public schools, the imposition of the "global gag rule" which denies funding to international organization that counsel women on abortion, passage of legislation that bans late-term abortions even when medically necessary, and making life-time appointments of firmly anti-choice judges to federal courts without Congressional approval. And the list goes on . . .

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