

**'You are barren and have borne no children,  
but you shall conceive and bear a son' -**

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# Fertility in prehistory, history and contemporary culture - Part I

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Fertility has always been a vital and fundamental matter for the human race as evinced by the multitudes of fertility totems and rites that have been created by ancient cultures. Locally, for example, the Maltese Neolithic 'fat lady' statuettes are believed to be representations of Mother Earth, a symbol of fertility.<sup>1</sup> Ancient biblical texts also testify to the importance that fertility has always had for humanity. Genesis recounts that God created male and female, blessed them and enjoined them to be fruitful and multiply. Further examples as to the importance of fertility in the Bible abound. For instance, after the destruction of Sodom and Gomorrah, Lot took up habitation in a cave with his two daughters, who were concerned by the lack of men other than their father. They therefore deliberately drugged Lot with wine and had sex with him, producing two sons in order to propagate the race. The Bible also recounts several scenarios wherein infertile women arranged for their husbands to have children by other women such as in the case of three of the four biblical matriarchs (Sarah, Abraham's wife; Rebecca, Isaac's wife; and Jacob's wives, Leah and Rachel) who were infertile. The Old Testament is amply clear on this subject in that an infertile wife encouraged her husband to have sex and beget children from slaves and servants, and the children would legally belong to husband and infertile wife.<sup>2</sup>

Closer to present day, the infamous papal bull *Malleus Maleficarum* (1446) was used as an excuse to prosecute and generally hunt down and kill an

estimated 50,000 'witches', who were considered as vile as prostitutes, and this is germane to this dissertation as both were considered symbols of sterility.<sup>3</sup>

Interestingly, the first known documented recognition of the principle of physical insemination was documented in the Talmud (central text of mainstream Judaism), with the first successful artificial insemination occurring in 1742 using fish gametes. In 1780, the first canine and human inseminations occurred,<sup>4</sup> with elaboration by the famous obstetrician Sims in 1866, who, 'by a classification of all diseases of the uterus, [...] found sterility to be incident to many of them',<sup>5</sup> and strove to create cures and treatments. However, opposition to these new techniques by Sims' contemporaries was rife including 'as a valid objection to gynecological examinations [was] the likelihood of inducing a lax moral sense in the patient',<sup>6</sup> and even more drastically, a review of Sims's book concluded the utilisation of procedures such as vaginal examination and other techniques that might elucidate causes of infertility would be detrimental to the medical profession and

'[a]t any rate, if such practices were to be considered the "business of the

Physician", there are a good many of us who would quit Physic for some other calling that would let us keep our sense of decency and self-respect. Better let ancient families become extinct than keep up the succession by such means.'<sup>7</sup>

This paper will now briefly inspect the intersection between infertility and popular culture with particular reference to Helena Michie and Naomi Cahn's *Confinements: Fertility and Infertility in Contemporary Culture* (1997). This book was written by two female authors with personal experience in the fields of both infertility and pregnancy.<sup>8</sup> *Confinements* attempts to provide an analytic framework for the understanding of the metanarrative of infertility, and its bias toward the more affluent Western middle-class couple, principally by analyzing Arlene Eisenberg et al *What to Expect When You're Expecting* (1991) and other works which consist predominantly of self-help and self-empowerment narratives.<sup>9</sup>

Feminist attitudes to pregnancy and infertility are also discussed along with a very brief history of attitudes toward infertility, which until the 19th century was always thought to be the fault of the woman. To some extent this is still portrayed as a female choice

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for the following reasons: waiting too long to attempt to become pregnant, too stressed, too fat or too thin, using inappropriate contraception (e.g. the pill), sleeping around with too many different partners and developing a sexually transmitted disease or having an abortion. Thus, infertility risks being portrayed dually as a female choice or a cultural responsibility, and as a female disease, while, on the other hand, such empowerment and availability of options may lead to guilt if matters do not take their hoped-for course. It is also ironic that 'pro-choice' invokes the view that a woman should have the choice of whether or not to terminate her pregnancy. This pro-abortion stance implies not only the guarantee of reproductive rights, but also access to sex education, to contraception and fertility treatments and to safe and legal abortion.<sup>10</sup>

Michie and Cahn contend that the idioms of popular pregnancy and infertility manuals romanticise the dream or illusion that expresses the middle-class evolution of heterosexuality, marriage, fertility, pregnancy and childbirth. These progressions are considered normative and create the context from which the rhetoric of infertility arises, along with the disparate circumstances and emotional crises that together constitute infertility treatment. The authors correctly state that 'the rhetoric of choice diverts attention from the constraints within which an individual choice occurs onto the act of choice itself',<sup>8</sup> but the claim that the current infertility epidemic is caused by media attention to middle-class couples who find themselves in this quandary by waiting until both partners have established careers is rather dated, with clear evidence of falling fertility in all classes and races,<sup>11</sup> not to mention the current possibilities of gamete banking whereby couples may bank ova and spermatozoa for later use.<sup>12</sup>

Undeniably, the intertwined and certainly incorrect conflation of the rhetoric of choice in treatment is evident even in the titles of these narratives, such as Kitzinger's *Your Baby, Your Way* (1987).<sup>13</sup> These manuals encourage women to learn

about new reproductive technologies as fast as or even faster than doctors, a common enough situation to doctors in all specialities in these postmodern days of ubiquitous access to the Internet and to freely accessible medical servers, most notably the United States' National Library of Medicine's PubMed server archive.<sup>14</sup>

In turn, women with fertility problems may find themselves coerced, consciously or unconsciously, to opt for fertility treatments in a patriarchal society that values women mostly for their reproductive capacities.<sup>15</sup> Michie and Cahn outline the invasive progression of reproductive therapies and of pregnancy itself, from basic ultrasounds through to laparoscopies and hysterosalpingograms that look inside the female body, and in doing so, render the intimate public, a performatory aspect, exposing the body's working to the healing medical gaze. Indeed, a very recent review of the long-term effect on fourteen Swedish women twenty years after their infertility treatment found that childlessness had a profound and lasting impact on their lives, resulting in high rates of marital breakdown and sexual dysfunction.<sup>16</sup>

The negative medical aspects are also debated, including the lack of complete candour by doctors who do not always give honest estimates of likely outcomes of treatments, and who do not counsel adequately with regard to possible deleterious side-effects. Regrettable medical tendencies to seek fame and profit in this form of treatment are underscored, along with exhortations to select doctors and facilities after careful deliberation.

Michie and Cahn also argue that women are policed through a series of interventions in both infertility treatment and possible subsequent pregnancy in the name of domesticity, supporting Paul Morrison's notion of the 'domestic carceral',<sup>17</sup> foreshadowed by Michel Foucault,<sup>18</sup> almost a form of punishment for infertility, where we must almost 'analyse rather the 'concrete systems of punishment', study them as social

phenomena'.<sup>18</sup> This aspect is even more relevant when infertility treatments are imbricated in explicit or implicit male dominance games, particularly when framed in feminist discourses and idioms, leading to unwitting antifeminist tropes. *S (to be continued in 02/12)*

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