

2014 International Conference by the Institute for Gender Research & the SSK “Gender and Solidarity”
Research Cluster

International Trade of Reproductive Materials and Relationships: Individualism and Radicalized Fragmentation

October 16th, 2014 (Thursday) PM 1:00-5:30 / Seoul National University, South Korea

PM 1:00-1:20 Welcome and Opening Remarks

[Session 1] Global Trade and Local Regulation

Chair: CHANG, Kyung-Sup (Seoul National University, South Korea)

PM 1:20-1:30 Presentation 1: BAE, Eun-Kyung (Seoul National University, South Korea)

“Glocalization and the Reproduction of Everyday Life”

PM 1:30-1:50 Presentation 2: HIBINO, Yuri (Kanazawa University, Japan)

**“Third-party Reproductive Tourism among Japanese Infertile Patients:
Future Regulation of Assisted Reproductive Technology in Japan”**

PM 1:50-2:10 Presentation 3: HA, Jung-Ok (Seoul National University, South Korea)

“The Non-Regulation and Actual Trade of Surrogacy in Korea”

PM 2:10-2:30 Presentation 4: ADRIAN, Stine Willum (Aalborg University Copenhagen, Denmark)

“Boundaries of Ethics, Sperm on the Border: The Globalization of Danish Sperm”

PM 2:30-3:00 Session Discussion 1: LEE, In-Young (Hongik University, South Korea)

Session Discussion 2: KWON, Hyuck-Chan (MIRAE & HEEMANG ObGyn. Clinic, South Korea)

[Session 2] The Gap between Ethical Ideals and Commercialized Experiences

Chair: PAIK, Young-Gyung (Korea National Open University, South Korea)

PM 3:20-3:40 Presentation 1: GUPTA, Jyotsna A. (University for Humanistics, Netherlands)

“Responsible Parenthood?: Umbilical Cord Blood Banking in India”

PM 3:40-4:00 Presentation 2: MOON, Kyung-Hee (Changwon National University, South Korea)

“The Blurred Line between Inter-Country Adoption and Trade”

PM 4:00-4:20 Presentation 3: LEE, Eun-Ju (Seoul National University, South Korea)

“An Empirical Study of Korean Surrogate Mothers’ Experiences”

PM 4:20-4:50 Session Discussion 1: KIM, Hye-Young (Sookmyung Women’s University, South Korea)

Session Discussion 2: JEONG, Yeonbo (Hanyang University, South Korea)

PM 4:50-5:30 Panel Discussion and Floor Q&A

[Session 1] Global Trade and Local Regulation

Presentation 2: HIBINO, Yuri (Kanazawa University, Japan)

“Third-party Reproductive Tourism among Japanese Infertile Patients: Future Regulation of Assisted Reproductive Technology in Japan”

Recent demographic changes, such as marrying at a later age and delaying childbearing, have contributed to the increased demand for assisted reproductive technology (ART) in Japan. Indeed, approximately 600 accredited *in vitro* fertilization (IVF) clinics performed over 200,000 IVF cycles in Japan in 2009.

The globalization and commercialization of third-party reproductive technology, such as gamete donation and surrogacy, have increased reproductive tourism among Japanese infertile patients. Indeed, an increasing number of infertile Japanese couples seek fertility treatments overseas, and this has contributed to the recent increased demand for ovum donation abroad. Although the actual number of Japanese reproductive tourists remains unknown, the number of women giving birth at a very advanced age has evidently increased during the past few years. We assume that this domestic phenomenon is partly attributable to traveling abroad for egg donation, as ovum donation enables older women to conceive. Thus, going abroad for egg donation may contribute to the increasing prevalence of childbirth by older Japanese women.

The US has been the major destination for reproductive tourism because several states have legalized commercial third-party reproductive procedures. However, more recently, Asian countries such as India, Thailand, Malaysia, and Taiwan have also emerged as major destinations for infertile patients who seek infertility treatment abroad. This is because the ART industries in these countries have considerable competitive advantage due to liberal legislation and lower labor costs. Because of legal and economic advances, these countries are attracting increasing numbers of overseas patients, including those from Japan. The use of a third party in infertility treatment has contributed to the availability of procreative choices for women. However, this practice remains controversial. Reproductive tourism raises a number of ethical, legal, and social issues.

No comprehensive ART legislation exists in Japan, and the regulation of third-party reproduction is left to professional bodies or to guidance from governmental reports. In terms

of gamete donation, the Japan Society of Obstetrics and Gynecology (JSOG) published guidelines in 2004, and the Japan Society for Reproductive Medicine (JSRM) did so in 2009. Both stipulate that commercial egg donation should be prohibited and that only altruistic donation should be permitted. In regard to surrogacy, the Japan Society of Obstetrics and Gynecology prohibited any form surrogacy in 2003, and in 2008, a committee of the Science Council of Japan published a draft report calling for a law to ban surrogate birth.

Thus far, many guidelines and reports have been published, and all insist on the need to regulate ART. Finally, in 2014, the Liberal Democratic Party announced a draft report recommending the legalization of gamete donation and surrogacy for qualified patients. They noted the phenomenon of Japanese patients' traveling to other Asian countries for ART as one reason for the establishment of a legal framework, as this trend may lead to exploitation of poor individuals.

It is inevitable that ART practices in Japan will be controlled. However, it is much more important to recognize that we need options other than third-party reproduction and reproductive tourism. Alternative options may include adoption or foregoing having a child. Moreover, the government should increase incentives for having children at a younger age to prevent infertility associated with advanced age; this may also contribute to solving the problem of the very low birthrate.

We conducted field surveys regarding the medical and legal environments in non-Western countries that may be destinations for reproductive tourism such as India, Thailand, Malaysia, Vietnam, Taiwan, and Russia. We also used questionnaires to investigate the attitudes and behaviors of physicians and pediatricians, and infertility patients related to reproductive tourism. Based on these results, we will discuss the current situation of Japanese infertile patients and examine potentially beneficial approaches to the regulation of ART in Japan.

Presentation 4: ADRIAN, Stine Willum (Aalborg University Copenhagen, Denmark)
“Boundaries of Ethics, Sperm on the Border: The Globalization of Danish Sperm”

During the past two decades, Denmark has developed into an important destination for fertility travelers in need of donor sperm. A variety of different clinics providing sperm with

different modes of clinical care have developed, and an increasing number of their customers come from abroad.

One of the reasons why Danish fertility clinics have enabled women from Denmark and abroad to turn to sperm donation is, that two of the largest sperm banks in Europe are Danish. In contrast to many other countries where sperm is in demand, the Danish sperm banks are able to provide enough sperm for the national market as well as clinics worldwide. Furthermore, one of the sperm banks market sperm for self-insemination and deliver it to private customers by UPS.

Although sperm donation is an old and low technology compared to other reproductive technologies, this development has taken place at the same time as sperm donation in parliamentary debates, and in the media, often raises ethical questions.

This presentation inquires into how the bending of boundaries by “inappropriate parents”, fertility travelers, private sperm banks and fertility clinics have been part in negotiating the changes of the legislation in practice, and thus been part of developing a Danish industry of sperm banking. In this presentation, I will show how Danish sperm has become a global commodity even though, or maybe because the technology has been regulated, and continuously has raised and troubled questions of kinship, sexuality, relatedness and family by politicians and bioethicists, in the parliament and in the media. I will argue that the globalization of Danish sperm is a story of combined subversive acts by women and men using the technologies, sperm banks and private fertility clinics. I will explore what the labeling of “ethical” does to a technology and its users such as in the case of the globalization of Danish sperm, as well as I will question how understandings of normality, sexuality, race, age, gender and kinship become part of the negotiations of “the ethical”, or in the doing of ethics in practice?

The presentation is based on a multi-sited ethnography drawing on ethnographic research including observations and interviews from fertility clinics and sperm banks in Denmark during 2002/2003 and 2011- 2013, legislative documents and parliamentary debates and websites of fertility clinics and sperm banks. I follow how ethical boundaries are negotiated when sperm is on the border either by being exported to other countries, used in Denmark by

fertility travelers, or when the Danish legislation on assisted reproduction is discussed and altered.

The presentation is methodologically inspired by Adele Clarke's situational analysis based on Anselm Strauss' social world arena theory. Furthermore, I draw theoretically on Karen Barad and Donna Haraway's notion of diffractive readings. I use their understanding of accountability to question and intervene in the doing of ethics in practice.

[Session 2] The Gap between Ethical Ideals and Commercialized Experiences

Presentation 1: GUPTA, Jyotsna A. (University for Humanistics, Netherlands)

“Responsible Parenthood?: Umbilical Cord Blood Banking in India”

Umbilical cord blood (UCB) is claimed as a rich, safer, and less controversial source of stem cells, compared to embryonic and adult stem cells, which could be used for therapeutic applications. In 1993 the first public and private UCB banks were established in the US. During the 1990s, most developed nations organised public systems for the collection of cord blood, which were built over previous bone marrow registries or blood collection services. Since 2000, with the emergence of regenerative medicine as a new field of hope, the 'promissory' value of UCB has gained importance and spurred the rapid development of the private, commercial sector. India is an emerging economy, where both public and private initiatives in stem cell research exist and are proliferating riding on the second wave of globalisation in the biomedical and IT industry. The last decade has seen the establishment of private UCB banks in India, which define themselves as “family banks”, advertising their services as a form of “biological insurance for your child” and “responsible parenthood”. Using the risk theory paradigm, my presentation explores what this means for pregnant women's decision making, as UCB banks lay the onus for the future health and treatment of their child on them, and the factors and actors and values used that influence their decision whether to bank or not. Celebrities such as Bollywood film stars and cricketers (who often serve as role models) were some of the first parents who banked the cord blood of their newborns and have since been followed by many other well-to-do parents who see it as rational and responsible behaviour and an investment in the future health of their progeny and

perhaps of the whole family. The questions I want to explore are: What does the development and promotion of UCB banking mean for pregnant women's decision making as it lays the onus for the future health and treatment of the child on them? What are the factors and actors and values used that influence their choice whether to bank or not?

This presentation is based on a pilot research and reflects work-in-progress. Qualitative research methods, such as literature research for theoretical understanding of the issue and fieldwork were used. Initially, an analysis of media coverage on UCB banking was done to map the field. Also, promotional material of UCB banks (including information on websites), was collected and scrutinised. Participant observation sessions at ante-natal clinics were held. Semi-structured interviews were conducted in Delhi and suburban towns with various stakeholders such as: (a) directors and managers of private UCB banks, (b) gynaecologists, and (c) pregnant women.

Presentation 2: MOON, Kyung-Hee (Changwon National University, South Korea)

“The Blurred Line between Inter-Country Adoption and Trade”

Over the past decades intercountry adoption has become a global phenomenon involving cross-border movement of vulnerable children. Shaped by the social, cultural, legal and political environments of every country involved, intercountry adoption is a highly complex process involving many participants with a variety of interests, including a powerful emotional element. Some critics of intercountry adoption have argued that the nature of intercountry adoption has changed over time and that the humanitarian motivation of the early years has given way to a demand from childless couples in rich countries. Thus, it is claimed that parents in rich countries benefit from a demand-driven market for babies at the expense of those in poor countries. This paper investigates this market-driven claim of intercountry adoption. It outlines the circumstances under which intercountry adoption is likely to result in a “baby trade,” and analyses how the baby adoption business is operated and who benefits from it. This paper also reviews adoption policies and practices, ending with suggestions for future research.

Presentation 3: LEE, Eun-Ju (Seoul National University, South Korea)

“An Empirical Study of Korean Surrogate Mothers’ Experiences”

This paper examines how a discussion of surrogate motherhood based on concrete experiences and taking a subject-oriented view of women’s bodies can enrich existing discussions about surrogate motherhood. In order to do this, I first use feminists’ “user-technology relations” concept to consider why it is necessary for surrogate mothers, who are now considered and treated as the “tools” and “means” of biotechnology, to be perceived as the main subjects and end users of biotechnology in reality. Next, I look at how several of the viewpoints on and issues surrounding surrogate motherhood distort the (surrogate) women’s experiences and views of their own bodies. In order to do this, I discuss how perceptions of life and motherhood – each constructed as the effectiveness of technology or of value, or as absolute value – reveal themselves in actual experiences and situations, and what implications this has for surrogate mothers’ experiences. I also examine the possibilities and limitations of a contract-theory approach and a (social) constructionist approach in interpreting and perceiving surrogate mothers’ experiences from their point of view. Finally, by revealing the complicated conflict over women’s bodily and reproductive rights that has followed the development of biotechnology, I consider what is necessary for a feminist intervention into technology and bioethics.