

# Reproductive bodies

A brief feminist anthropological review over the complex Argentinian scenario of artificial reproductive techniques and surrogacy

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## ABSTRACT

This research works as a Latin American contribution to feminist studies of the anthropology of reproduction. It allows to broaden the understanding of how surrogacy, as a type of (re)productive labour, operates with biotechnological practices, biopolitics and sociocultural changes in Argentina. Therefore, within the specificity of the Argentinian context, this article analyses the discussion of reproductive techniques and surrogacy in close relationship with biotechnology, biomedicine and biopower from a feminist perspective. Such analyses are necessary to collaborate in the expansion of research and discussions around surrogacy in Argentina. Debates loaded in this article are carried out to broaden understanding of social transformations resulting from biomedical advances, the expansion of reproductive rights, and the autonomy of women to decide about their own bodies.

## Keywords

Artificial Reproduction Techniques; surrogacy; biopower; biotechnology; feminism; reproduction

As Assisted Reproduction Techniques (ART) and surrogacy practices open a range of broad and complex dimensions of social life, this research aims to contribute to feminist studies of the anthropology of reproduction, from a Latin-American perspective. It seeks to broaden the understanding of how this type of reproductive labour coexists with biotechnological practices and biopolitics in Argentina, considering the differences between this country and some European cases. How do gender, social class and the body intersect, and how does biomedicine operate in this relationship? How does biopower shape reproduction based on ART and surrogacy in a country with supposedly progressive reproductive laws that are different from those in Europe, such as Argentina?

The case of Argentina allows us to look at how assisted reproductive technologies have become a fundamental pillar in the study of biotechnology and biomedicine and to consider the ways in which they interfere in the configuration of individual, family, and collective identities, promoting transformations in various domains of culture. In the case of Argentina, there is no specific regulation, beyond the laws related to ART and the possibility of a legal affiliation based on a procreational will. The country is among the main States in the Latin American region that have achieved the extension of full reproductive and family rights, being one of the first to recognise marriage between people of the same sex (Law No. 26.618), to establish free and universal access to Techniques of Assisted Human Reproduction (Law No. 26.862/13), in modifying its Civil and Commercial Code for the registration of births through these techniques (items 558 and 562), and to guarantee unrestricted access to safe abortion (Law No. 27.610). However, the inclusion of these sexual and reproductive rights has not been without debate, not only in the political, but also in the public and media arena (Ariza 2011). Special emphasis has been placed on the implications that ART and surrogacy have on motherhood, infertility and, of course, abortion, thus defining the sociocultural ideals that constitute the struggle for full reproductive and sexual rights in the country (Johnson 2020).

The broadening of the reproductive landscape in the country has allowed for a rethinking of reproduction within a modern conception of kinship (Bestard 1998). Because procreation no longer necessarily involves sexual relations, it destabilises ideas about supposedly natural, heterosexual, family. This implies accepting that there is no longer necessarily a correlation between genetic contribution and the social role of filial identity, mainly through the instrumentalisation of the donor's body, or in the case of gestational surrogacy, of the surrogate.

My research, conducted as a digital ethnography during February and August of 2022, was framed by two key analytical strategies for data collection, given that the digital ethnography approach is presented as an open and flexible research design, which can be shaped in relation to the research questions it poses (Pink et al. 2016, 11). I conducted six open-ended, semi-structured interviews which, for a matter of physical spatiality, were conducted virtually, as all my interviewees reside in Buenos Aires, Argentina. I chose this strategy because, as Salmons (2015, 28) explains, “semi-structured interviews balance the pre-planned questions of a structured approach with the spontaneity and flexibility of the unstructured interview” (2015, 28). All of them considered the Internet Researchers Association's (2019) ethical guidelines for Internet research. I interviewed three lawyers specialised in the field of ART and surrogacy, a doctor specialised in fertility and reproductive health, a psychologist who works with mothers/parents and surrogates, a woman undergoing gestational surrogacy treatment with her cousin as a gestational carrier and the head of the LGBT Federation of Argentina. I furthermore conducted participant observation digitally. I observed four websites in particular: Hialitus Instituto Médico, Surrogacy 365, BioTexCom Ukraine and Interfertility, as well as social networks, specifically the Facebook groups Surrogacy 2021 Argentina, Surrogacy in Argentina, and Surrogacy in Ukraine, where the possibilities of carrying out surrogacy within and outside the legislative frameworks and specialised fertility clinics in Argentina and abroad are discussed and offered.

I used semi-structured observations (Salmons 2016), an approach that allows for greater responsiveness and flexibility, as it can include a combination of consistent or spontaneous questions, prompts and/or observation priorities. I was therefore able to identify patterns of the main characteristics of this virtual interaction, which guided some of the questions I asked during my interviews. My analysis focused on an in-depth examination of the information published on the four websites, which clearly showed how biomedical and biotechnological clinics operate regarding the practice of ART and surrogacy in the country and abroad. This included mapping how surrogacy is talked about, what the options are for intended parents and for surrogates, and what economic values are involved in these processes. This allowed me to locate the practices under study in the users' terrain, as well as being a useful tool to understand how the intended parents and surrogates relate to each other through the digital arena. It also helped me address the ways in which the journey to surrogacy is constructed through desire and intention.

The article is organised as follows: first, I analyse the Argentinian context, briefly presenting the current legislation and social understandings of surrogacy through ART in the country. Secondly, I enter into the discussion on the application of reproductive technologies in surrogacy and how the use of ART has sparked ethico-political debates about its uses and users, and about the relationship between reproductive markets, the stratification of reproduction, and the use of biomedicine applied to human reproduction. In this case, the role of States as builders of biological citizenship is also highlighted. Finally, I offer a brief reflection on the role of feminism in ART and surrogacy, from the Second Wave feminist theories to the current approaches of feminist agendas in the Global South.

## ART AND GESTATIONAL SURROGACY IN ARGENTINA

In several decades, ART have become common to accessing motherhood, fatherhood, and diverse family projects. They are

imbricated within a complex framework of social and cultural dilemmas, involving reproduction as it relates to biomedical investments and advances, and perceptions that disrupt ideas over kinship. On the one hand, ART clinics are becoming more present in a pharmacological market based on the medicalisation necessary for ovarian stimulation, as well as in vitro fertilisation technologies, cryopreservation, preimplantation and conceptional genetic tests. Consequently, a complex biotechnological market is created, challenging deeply essential structures of social relationships and affiliation. When resorting to ART, patients using these techniques can become biological and/or social parents, and this separation between biological and social parents has made it possible for new family models and new kinship categories to be introduced. These categories include single-parent families, homoparental families, or dissident identity families, that challenge perceptions of the “traditional family” (Tarducci 2013). In this context, complexity arises to another level of social phenomenon, when, based on infertility problems or new maternity/paternity, couples or single parents decide to form families through surrogacy. Surrogacy is based on a contract or agreement between a person or couple and a surrogate mother, where it is expected that the latter will carry a pregnancy to term (Rudrappa 2015).

Recent studies (Olavarría 2019; Cutuli 2021; Trupa 2017; Pande 2011) have shown how extremely heterogeneous legislation between countries with regards to ART and surrogacy has led to international reproductive migration. Assisted reproduction treatments often begin in the countries of origin of the intended parents and are then continued in the countries that allow carrying out pregnancies by surrogate gestation. In this article, I show how Argentina is becoming a flourishing market for such “repro-migration” and I contrast the Argentinian case with a number of Latin-American and European countries, such as Spain, Ukraine, or Mexico. In Spain, for example, even though it is accepted, there is a critical attitude towards ART because they are considered as a generator of parental needs, with a strong component of biological essentialism of the maternal

instinct. In 2016 tensions increased between feminist groups on the one hand and the LGBT collective and surrogacy companies on the other, particularly regarding surrogacy. The Feminist Party of Spain denounced the organisers of the “surrogacy fair in Spain” and compared surrogacy to a practice like prostitution or human trafficking (Álvarez Plaza 2017, 20). In Ukraine, where surrogacy is legal and relatively easy to access, surrogacy is supposed to be accessible only to married, heterosexual couples who prove that they cannot have children for medical reasons. Procedures must ensure that at least one parent has a genetic connection to the foetus, thus allowing the use of donated eggs or sperm. Moreover, the commissioning parents are listed on the birth certificate as the biological parents, while the surrogate woman has no legal right to claim custody of the baby. Ukrainian law recognises the intended parents as the biological parents from the moment of conception. It does not stipulate a limit to the surrogate’s mother’s payment which would essentially create an open market where women can ask for whatever sum they deem appropriate, even if there is no reliable correlating information.

It is against this backdrop that Ukraine is one of the only countries in Europe where commercial surrogacy is legal for foreigners (fieldnotes, 28 August 2022). In Latin America, Mexico was, until the end of 2015, on the “supply” side of surrogacy. However, unlike other countries where the use of this technique has been regulated for several decades – the United States, Canada, Israel – Mexico was inserted in a disruptive way in a global chain of reproductive work thanks to the existence of legal loopholes and niches of opportunity. During the boom period of this industry in the country, the free exercise of surrogacy increased, and women from different regions and social contexts provided their gestational capacity to intended parents of all nationalities, ages and sexual orientations through extensive mobility networks facilitated by fertility clinics and international surrogacy agencies. This activity expanded rapidly until a regulation of April 2016 restricted surrogacy to Mexican couples and citizens with a “diagnosis of infertility” (Olavarria 2017, 9-10).

In 2010 Argentina took an important step in reproductive legislation in the country, with the transition from non-regulation to the promulgation and subsequent sanction of the Assisted Fertilisation Law of the province of Buenos Aires (No. 14.208/10). Its objective has been the recognition of human infertility as a disease, in accordance with the international criteria supported by the World Health Organisation (WHO). Likewise, it recognises the comprehensive and interdisciplinary medical care coverage of the approach, diagnosis, medications, support therapies and procedures, and techniques of low and high complexity that include or not the donation of gametes and/or embryos, that the WHO defined as medically assisted reproduction. In this sense, medically assisted reproduction is understood as the procedures and techniques carried out with medical assistance to achieve a pregnancy. This legislation was followed, in 2013, by the promulgation and subsequent enactment of the National Assisted Fertilisation Law (No. 26.862/13), which aims to guarantee comprehensive access to procedures and techniques for medically assisted reproduction. The law also implies that the public health sector, the private healthcare providers, and agents that provide medical services (regardless of their legal figures), incorporate mandatory benefits, providing comprehensive and interdisciplinary coverage of the diagnosis, medication and support therapies of reproductive medically assisted procedures.

The demand for health coverage for the treatment of infertility in Argentina has therefore contributed to dismantling the cultural association between women and mothers, and to a relief of the stigma that culturally marks infertility as a woman's problem. Demanding that the Argentinian State ensures access and full rights to reproductive interventions implied to question the cultural bases of sexuality and procreation, and to dismantle the separation between the sexual and the reproductive (Trupa 2017). From the enactment of these laws at a provincial and national levels, a modification was also made to the Civil and Commercial Code of the Argentinian Republic, which entered into force in 2015. Said modification includes an article, article 652,

which establishes that “those born by Assisted Human Reproduction Techniques are the children of the person who gave birth, and of the man or woman who has also given their prior, informed and free consent.” This context brings us directly to the discussion on surrogacy in Argentina. First, it must be considered that surrogacy is currently permitted within other legislative frameworks of the country. It is a practice that is not strictly penalised by law and is carried out through an agreement between intended parents and the surrogate mother but also with the increased involvement and intermediation of agencies as well as assisted reproduction and fertility clinics, and specialised lawyers who act as mediators between parties, that all contribute to achieving the execution of the cases (Interviews with lawyers Federico Notrica, 7 April 2022, and Florencia Daud, 16 June 2022; and with ART specialist, Dr. Enrique Salama, 8 June 2022).

Throughout the Argentinian territory, except for the Autonomous City of Buenos Aires, the judicialisation of the processes is necessary, based on what is established in this article.<sup>1</sup> This implies that legal agreements on cases of babies born through surrogate gestation must be prosecuted, requesting judicial authorisation to declare said article unconstitutional. In this context, the items (558/562) of filiation and procreation will allow judicial rulings that make the intended parents the subjects of rights of a baby born through surrogacy. However, despite the criticism and struggles for its modification, the Nation’s Civil and Commercial Code establishes that “mother” refers to the one who gives birth, regardless of whether she is the parent or not. Therefore, at the time of judicialisation, the woman who gestated must renounce the parental authority of the embryo in favour of the intended parents, which establishes the legal links of filiation. Judicial statements indicate that the surrogate mother and the intended parents have an altruistic and familial relationship. However, this does not clarify what type of social bond exists between both parties, and if it has been mediated through an economic agreement. This context implies difficulties to agree



the amount of money a surrogate mother may receive during the process. Issues arise not just from the absence of any discussion regarding financial compensation, but also when there is a lack of regulation that both intended parents and surrogate mothers can adhere to, since agreements are usually defined between the participating parties.

Even though most of the fertility and reproduction processes are carried out through specialised clinics in this field, they do not intervene in the contact processes between intended parents and surrogate mothers, nor in the agreements that parties decide to generate to safeguard said contracts (Interview with María Rachid, President of the LGBT Community in Argentina, 25 April 2022). In this sense, a new modality of filiation is socially accepted, in which the subjects involved in the practice are hierarchised, physically separating the child born through gestational surrogacy from the pregnant woman and the commissioning parents. The desire is satisfied through a market where only those who can afford so are able to access it, materialising a separation between sex and reproduction based on economic privilege. The existence or not of a mention and/or gratitude towards the pregnant woman implies a deliberate erasure from the scene of her condition as a (re)productive subject and evidences the inequalities of power in the construction of narratives and filial links (Cultuli 2021, 46) of the new Argentinian families.

During an interview that I conducted with Florencia Daud, a lawyer specialising in ART and surrogacy, and who works in Buenos Aires, Italy and Spain with Argentinian and European couples, the issue arose about how to approach the legal rights of women who decide to become surrogate mothers, while avoiding reproductive tourism in the country. She mentioned that, based on the current legislation and especially the regulations for birth registration in the Autonomous City of Buenos Aires, Argentina has become a destination chosen by heterosexual couples, homosexuals, and people without a partner,

from Latin America and Europe, to register their children born through surrogacy. This can be explained, for instance, by the fact that the European Parliament condemns surrogacy as

contrary to the human dignity of women, as their bodies and reproductive functions are used as a commodity; considers that this practice, which involves the exploitation of reproductive functions and the use of the body for financial or other purposes, particularly in the case of vulnerable women in developing countries, should be prohibited and calls for its urgent consideration under human rights instruments.<sup>2</sup>

Therefore, this implies that the intending parents go directly to the National Registry of Persons and register those children born in Argentinian clinics and hospitals as their own, without having to demonstrate or justify the nature of the filiation bond. It does not matter whether the couple or person is Argentinian or foreign, if the surrogate is Argentinian foreign, nor if there was economic mediation around that birth. This process for the registration of births through surrogate gestation in Argentina, legally allows foreigners to carry out treatments in their countries of origin and travel with the pregnant women to Argentina so that the birth can occur within the territory and allow access to the permissive legislation.

## THE ARGENTINIAN STATE AS PROMOTER OF BIOLOGICAL CITIZENSHIPS

The use of ART has not only sparked ethical-political debates about its uses and users, but it has also triggered debates about how such practices unfold the possibilities of new and contemporary family configurations on the scene. The application of reproductive technologies in surrogacy further complicates such dilemmas, which invites us to rethink reproductive markets, the stratification of reproduction, and the use of biomedicine in the optimisation of technologies applied to human corporeality. As sociologist

Nikolas Rose mentions, technologies of optimisation are no longer merely medical or health technologies, but have become technologies of life (Rose 2006, 46). Biotechnological advances in fertility and reproduction have produced changes in biomedicine, but also in socio-cultural conceptualisations of the limits of subjects and bodies. This means that they become visible from the idea of “combating” infertility, an aspect that is highlighted in the aforementioned Argentinian legislation (Law No. 26.618 and Law No. 26.862/13). Lucía Ariza mentions that reproductive technologies have been defined as a response, somewhat effective in terms of results, to the non-voluntary childlessness of individuals or couples (Ariza 2007, 257). It is understood that the new reproductive technologies construct new discourses around infertility as a failure of supposedly natural heterosexual reproduction. In this sense, although reproductive biotechnologies operate in the facilitation of procreation, it must be the subjects themselves who seek initiatives to intervene in procreation.

While the extension of reproductive rights in Argentina, facilitated by the incorporation of legislation that regulates biotechnological reproduction, represents significant progress in terms of rights and decisions about procreation, it is important to note that these regulations initially failed to embrace an ideal of diverse family conformation beyond the heterosexual norm. In this framework, the demands of feminist and LGBT groups regarding the incorporation of single women, dissident identities and lesbian families enabled to think about the way in which the state controls the biological processes of its citizens, especially those related to reproduction, sexuality, procreation, and sex-affective relationships. This is how biological and sexual citizenships have been constructed and developed, which, as Trupa (2017) argues, proposes a discussion about the biological essentialism that occurs around access to ART treatments. There are requirements, obligations and expectations about citizenship practices traversed by assumptions regarding the sexualities of socio-political actors. These transformations in the legislative framework

not only meant a transformation in terms of the understanding of reproductive desires and rights for a diversification of family configurations, but also implied positioning the state as a builder and promoter of biological and sexual citizenship (Rose and Novas 2005; Rose 2006; Trupa 2017).

The first law on reproductive technologies (the law of the Province of Buenos Aires), understands the coverage of such procreation treatments as a response to infertility as a disease based on an understanding of the dysfunctional biological body. On the other hand, the second law that was passed at national level allows us to understand how the State operates in the instruction of reproductive bodies, which are not conditioned by a biological fertility, but are centred on a gestating body, as could be the case of the non-pregnant mother in co-families. In this sense, the paradoxical role of the State, which guarantees reproductive and procreative rights in a broad manner, produces normative and biological citizenships, insofar as it promotes hegemonic ideals of family, couple, and reproductive health (Trupa 2017, 104). Finally, the widespread use of gestational surrogacy has shown the way in which it is used to constitute the reproductive rights of subjects and social collectives who, either due to bodily conditions or sex-affective practices, cannot carry out biogenetic procreation involving their own bodies. In this sense, the importance of this practice cannot be denied as a reproductive right for the parents, and as a practice of autonomous decision-making over the reproductive corporeality of pregnant women. Despite this, feminist voices have echoed the use of biomedicine and biopower as a form of appropriation of women's bodies for (re)productive purposes, crystallising inequalities of gender, race, ethnicity and class on a global scale. Such debates have shown that global reproductive stratifications occur around various intersectional and geopolitical inequalities (Cutuli 2021, 36).

The reproductive market, adapted to the growing demand, has found points where to be applied, and this is where Argentina has not been the exception to this rule. The country has become, in the last five

years, a propitious ground for the flourishing of a biotechnological market dedicated to commercial and tourist reproduction, marking the importance of having a legislative agenda that can provide regulatory frameworks for such practices. The testimonies of Florencia Daud (presented above) and Silvia Jadur (psychologist specialised in ART and surrogacy working in an ART fertility clinic in Buenos Aires), presented here, as well as those of other participants of my larger fieldwork research, highlighted the ethical and political concerns about a possible lack of protection for the participants of a surrogate pregnancy in Argentina.<sup>3</sup> In the words of Florencia Daud: “Argentina, in principle Argentinian society, will not tolerate being the womb of South America as Ukraine is the womb of Europe.”<sup>4</sup> In other words, the experience of women raises the question of the construction of new forms of agency, that is, the development of capacities for action made possible by relationships of social and historically established subordination.<sup>5</sup> Surrogacy indeed has the potential to perpetuate the idea of women’s destiny to reproduce, yet women attempt to exercise autonomy in this reproductive context, trying to find answers to the control of the biomedical system over their own reproductive processes.

## FEMINISM AROUND ART AND SURROGACY

Reproduction and reproductive labour are processes strongly marked by gender and are naturalised through family ideals and desires. Strathern (1991) affirms that with the possibility of donating gametes, thinking about them as a type of exchange currency has arisen. In this sense, said donation of gametes takes place in an implicit gender inequality, since the extraction of ovules is based on a procedure of a certain complexity in comparison with the simplicity that sperm extraction entails. Likewise, the handling and protection that the ovules require means that they are, in some way, a treated and treatable product, and with an extensive possibility of commodification. Egg donation entails greater consequences for women’s corporeality, since they must generally be subjected to

biomedical controls and stimulation. These processes reverse the very social nature of reproduction, since it introduces disparities in the way in which said acts of donation are embodied in the social relations between subjects who exercise varying degrees of control over themselves and others (Strathern 1991, 41). During our conversation, Silvia Jadur, a psychologist specialised in Human Reproduction Techniques and gestation by substitution, exemplified that she believed a possible surrogacy law in Argentina should be a “law of gestation by solidarity,” avoiding the possibility of reproductive trafficking and reproductive tourism in the country. She furthermore argued that feminist collectives should engage with these processes:

if a company establishes itself here [in Argentina], which is looking for surrogate women... What type of women is it looking for? Those with the fewest resources... And there the leg of feminism has to say something, because it is using the bodies of vulnerable and violated women in life, for their economic and social place (interview with Silvia Jadur, June 2022).

What Silvia states serves as a kick-off to reflect on the way in which reproductive work is not recognised as labour. The implication of the requirements for the success of reproduction, such as compliance with medical regimens, medicalisation, tests, appointments, and self-control, which are crucial for the development of the biotechnological industry, remain invisible (Waldby 2008, 27), and are the strict responsibility of pregnant women. Likewise, the workers of the (re)production, that is, egg donors and surrogate mothers, are a crucial part of the global bioeconomy. Reproductive biotechnology thus creates an asymmetric reliance on female reproductive biology, which, when combined with a growing population of economically marginalised young women, allows them to carry out some form of reproductive work as a means of subsistence (Waldby 2008, 28).

Given the previous points, it is worth noting that, despite surrogacy playing a significant role in the realm of social reproductive life, it has not been exempted from debates and ruptures within feminist groups. As Olavarría, Álvarez Plaza and Parisi (2017) mention, ART and surrogacy have led feminists to now include issues of rights and reproductive legitimacy in their debates. Classical feminists of the Second Wave theorised extensively on the oppressive and patriarchal character of motherhood (Simone de Beauvoir, Nancy Chodorow, Élisabeth Badinter, Shulamith Firestone, among others), but decades later, some feminist theorists (Marilyn Strathern, Sarah Franklin, Rayna Rapp, among others) have begun to theorise about ART from critical perspectives. In this way, a first point of tension that can be pointed out in the feminist debate on ART had to do with a conception of the subject and particularly with the possibility of women's agency in the face of reproductive technologies.

Following Franklin, rather than rejecting ART, being able to identify the ways in which oppression develops in the biomedical field then allows us to think about the strategies that can strengthen women's reproductive autonomy. From there, the visions of the users of these technologies were central to contesting these power relations (Johnson 2020, 272). Furthermore, the phenomenon of surrogacy links the feminist debate in relation to the female body, motherhood(s) and the global north-south dynamics (Álvarez Plaza, Olavarría and Parisi 2017, 33). It is enriching to show how feminist debates open an important path to rethink the universal meanings women's hat have been questioned within collectives, giving rise to a re-actualisation of women's agency capacities. As Johnson (2020) mentions, Latin American feminisms make it possible to raise new epistemological debates, since the proposals of the epistemologies of the South result in an intersection of power little explored by feminisms to think about new ways in which reproduction and relationships between humans, technology and biology take shape. Following Andrea Torrano and Natalia Fischetti, it is possible to think about technologies from the perspective of *Buen Vivir*, the Latin American philosophy that sees

“a co-constitutive relationship between the human, the technical and the technological and nature,” encouraging us not to reproduce extractivist logics on the bodies that gestate and carry care forward (Johnson 2020, 283). In this way, the feminisms of the South allow us to answer the question about ART, surrogacy and power with new tools and debates, since, on the one hand, they invite us to think about biotechnological advances without resorting to the sacralisation of maternity or genetic biology, while questioning situated experiences and strengthening the forms of resistance and agency of the women involved (Johnson 2020, 283). Feminisms must redefine power relations and imaginaries linked to reproductive technologies and their application to the global and capitalist economy. Rethinking feminism in ART in general and in surrogacy in particular means reconsidering the production and circulation of globalising neo-patriarchal forms (Álvarez Plaza, Olavarría and Parisi 2017, 35) since these processes are framed within a patriarchal and colonial scenario that reinvents itself with its social and political control devices through biotechnology.

On this matter, the anthropological discipline serves as an important tool for understanding and studying these socio-cultural transformations. Rethinking contemporary practices of human reproduction from anthropological criticism results in a fundamental leg of feminist studies around this theme and comprises a crucial way to theorise how forms of cross-border reproduction affect social, cultural and gender relations in the global South. Following Davis-Floyd (1991), contemporary forms of reproduction build up some feminist’s ideas that reproduction and births facilitated by biotechnologies are transformative and ritualised processes for women. In this way, this invites us to think about how the theoretical perspectives of feminist anthropology can be transformed, and the way in which this field of study allows us to rethink the potentially transformative capacities of the new reproductive forms. As Rapp (2001) has also pointed out, the feminist anthropological concern for gender and the body inevitably implicates reproduction, including ART and its various applications, and brings it to the centre of social theory.



Likewise, the emerging forms of older biotechnologies opened the way to significant new practices around reproduction, but also to new socio-cultural dilemmas, supporting the intersection of medical anthropology linked to science and technology studies, developing a key and form for the study of the relationship between science, society, and culture. By placing contemporary reproductive biotechnologies at the centre of reproductive relations, one understands the multiple layers that they unravel in the specific sociocultural contexts that link them to surrogacy and the formation of family and agency.

## CONCLUSION

My research has highlighted how surrogacy in Argentina is traversed by a range of issues, not only in relation to biotechnology and the advancement of reproductive and fertility techniques, but also the way in which reproductive biomedicine intersects with gender, social class, and corporeality. As these are technological practices that are applied directly to the female human body, the scope that biomedicine has on the constitution of the ways in which the concepts of family, gender and identity are expanded cannot be ignored. In turn, this scope is marked by the ways in which nation-states administer their biopolitics of reproduction. The second section therefore highlighted the disciplining capacities of biomedicine, biotechnology, and the State. Governments present a particular locus around the fertility policies and strategies of populations, making it evident that biopower is intrinsically related to biomedical and biotechnological advances. Towards the end, I furthermore approached the issue from a reflection on the role of feminism, and specifically Latin American feminism, on the possibilities and limits of ART and surrogacy in the composition of reproductive and family rights and cultural change.

This research is far from being conclusive regarding the situation of ART and surrogacy in Argentina. Instead, it serves as preliminary exploration and indicates the potential for future investigations into how the complex terrain of these practices intersects between

reproductive work, biotechnological interests, international markets for human reproduction, the conformation of family rights, and reproductive justice. Discussions that are further deepened by exposing the relationship of that intersection with the inequalities and historical power relations between the global North and South. Relationships that are institutionalised through biotechnological corporations in charge of managing human fertility globally. Much still needs to be explored in this field, such as a broader understanding of the reproductive labour associated with egg vending and surrogacy, the female reproductive body under capitalist assumptions, the so-called bioeconomies (Rudrappa 2015) and the clinical labour (Cooper and Waldby 2014). I consider it essential to do so from the epistemologies of the south, enhancing governability capacities (Suárez Navaz 2008) that open the premises on the diversity of political subjects, the horizons of the feminist agenda, and of the conditions of possibility, agency and resistance marked by Latin American subjectivities.

## Notes

- <sup>1</sup> Due to the Regulation of the Registry of the Civil Status and Capacity of the People of the Autonomous City of Buenos Aires, entered into force in the year 2018.
- <sup>2</sup> European Parliament resolution 115 P8\_TA (2015) 0470 of 17 December 2015 on the Annual Report on Human Rights and Democracy in the World 2014 and the European Union's policy on the matter (2015/2229(INI)).
- <sup>3</sup> Such as Federico Notrica, Enrique Salama and María Rachid. For further development see Kranner (2022).
- <sup>4</sup> For a re-elaboration of the concept see footnote 3 and Kranner (2022).
- <sup>5</sup> For a re-elaboration of the concept of agency based on the study of a group of women-mothers, see Kunin (2018).

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