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Reproduction, Globalization, and the State: New Theoretical and Ethnographic Perspectives

Carole H Browner and Carolyn F Sargent, editors

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Reproduction, Globalization, and the State conceptualizes and puts into practice a global anthropology of reproduction and reproductive health. Leading anthropologists offer new perspectives on how transnational migration and global flows of communications, commodities, and biotechnologies affect the reproductive lives of women and men in diverse societies throughout the world. Based on research in Africa, the Americas, Asia, and Western Europe, their fascinating ethnographies provide insight into reproduction and reproductive health broadly conceived to encompass population control, HIV/AIDS, assisted reproductive technologies, paternity tests, sex work, and humanitarian assistance. The contributors address the methodological challenges of research on globalization, including ways of combining fine-grained ethnography with analyses of large-scale political, economic, and ideological forces. Their essays reveal complex interactions among global and state population policies and politics; public health, human rights, and feminist movements; diverse medical systems; various religious practices, doctrines, and institutions; and intimate relationships and individual aspirations.

Part I: Global Technologies, State Policies, and Local Realities explores intersections of, and interactions among, local, national, and global influences on diverse reproductive practices. The chapters consider conceptual and methodological challenges anthropologists face when conducting global ethnography. In addition, they examine the impact of globalization processes on reproduction and the strategies that individuals and couples develop in response. Taken together, these chapters show that governmental policies and state power continue to have major impact on reproductive behavior in many parts of the world, even as global forces may to some extent eclipse them.

In “**Global Ethnography: Problems of Theory and Method**” Susan L Erikson elucidates the complexities and principal dilemmas faced by anthropologists who seek to conduct global ethnography, and offers a model for conducting such research. Using the example of German prenatal care, Erikson identifies the complex network of actors (i.e. international corporations, private doctors’ associations, insurance companies, medical practitioners, and pregnant women) who shape German practices associated with the use of fetal ultrasound technologies. Her chapter shows how an ethnographer can follow people, commodities, and concepts across the boundaries of nation-states, professions, and disciplines to apprehend the impact of the global flow of a medical technology as it is advanced by state and biomedical interests and the needs and desires of pregnant women.

Junjie Chen’s “**Globalizing, Reproducing, and Civilizing Rural Subjects: Population Control Policy and Constructions of Rural Identity in China**” shows that despite multiple changes in government policies and ideologies during the second half of the 20th century, the Chinese state has consistently identified its peasant populations and their reproductive practices as directly opposed to the state’s modernization agenda and therefore in need of “civilizing” state interventions. Rural women have been the main targets. After documenting the history of Chinese population policies and practices, including its highly criticized coercive aspects, Chen describes recent efforts to achieve a more internationally acceptable image by loosening some restrictions on individual reproductive choices. He argues, however, that these changes are largely cosmetic, aimed at the global community, and do not reflect any real change in policy.

Following Chen and paralleling some of his observations, in “**Planning Men Out of Family**

Planning: A Case Study from Mexico” Matthew Gutmann documents the influences of global and national processes on the evolution of Mexico’s population policy. He shows how men’s reproduction and reproductive health needs have systematically been excluded from Mexican population policies over the past century, even as the government has shifted from a pronatalistic agenda to one of population control. Emergent from the similar themes evidenced in Chen’s and Gutmann’s chapters are the ideas that men, especially rural men, are barriers to responsible reproduction and therefore best excluded from state population policies, and that while international pressures may help shape state population policies, they do not entirely determine them.

Lisa Ann Richey’s **“Antiviral but Pronatal? ARVs and Reproductive Health: The View from a South African Township”** explores the intersection of different histories and policies, at local, state, and global levels, on South African women being treated for HIV/AIDS. Richey uses the concept of the “therapeutic citizen” to discuss the transitive state that women occupy and perform while being treated with antiretroviral drugs (ARV). She argues that this concept needs to be reimagined and redefined in light of the seemingly contradictory stance of many women who are seropositive and want to become pregnant. ARV treatment is administered to these women, who, ironically, are encouraged to plan for future pregnancies – while also urged to have protected sex. Like both Chen and Gutmann, Richey describes the gendered nature of a medical intervention that once again systematically excludes men.

Whereas Richey’s chapter reveals how many South African HIV-positive women receiving ARV treatment hope to one day become pregnant, Cecilia Van Hollen’s **“Birth in the Age of AIDS: Local Responses to Global Policies and Technologies in South India”** examines the social consequences for a group of Indian women who are already pregnant when they become aware of their HIV-positive status. Van Hollen offers three case studies that illuminate how HIV status is seen as a family – and hence a social – issue, as opposed to a private and personal one, as is generally the case in Western countries. The stigma attached to HIV status in India and the related lack of enforced policies of informed consent create a milieu where doctors, patients, and family members engage in a web of duplicity,

secrecy, and collusion. In the context of a weak regional state, Van Hollen describes the strategies that pregnant women have successfully used to navigate the Indian medical system, their individual kin, and larger social groups.

As with other chapters in Part I, Ellen Gruenbaum’s **“Competing Globalizing Influences on Local Muslim Women’s Reproductive Health and Human Rights in Sudan: Women’s Rights, International Feminism, and Islamism”** references the complex interplay of regional, national, international, ethnic, and religious policies and practices, in this instance to situate the contemporary history of female genital cutting (FGC) in Sudan. Globalizing influences in two seemingly opposite directions have shaped recent debates about FGC: on the one hand, Western feminism and human rights discourse, and on the other, that of various Islamist groups. Harking to themes introduced by Chen and Gutmann, Gruenbaum shows how a state can interpret regional practices as appropriate or as backward at different points in its history, depending on multiple local and global dynamics.

In sum, the chapters that make up Part I serve as a point of entry into the complex realities created by interactions among social, corporate, national, and global forces as they shape women’s and men’s reproductive experiences. In the context of these multiple, complex, and sometimes contradictory processes, these ethnographic accounts illustrate some of the creative means by which local actors navigate constraints and opportunities.

Part II: Biotechnology, Biocommerce, and Body Commodification explores state-sponsored guidelines and laws defining and regulating reproductive technologies and their local interpretations and (re)inventions. Global advances in reproductive technologies and state responses to them in the form of legal and ethical guidelines are transforming widely shared notions of kinship at the local level. These reassessments of how to define family bonds are informed by social and culturally specific constructs of the person, kinship, and descent. Each of the three chapters in Part II explores local interpretations of how authentic children are to be produced and accounted for and how recent advances in reproductive technologies have challenged conventional understandings of what constitutes an appropriate family.

In **“Reproductive Viability and the State: Embryonic Stem Cell Research in India”** Aditya

Bharadwaj explores how infertile couples seeking to ameliorate the associated stigma may become complicit, albeit poorly informed agents, in the search by India's biotechnology industry to obtain legal embryos for stem cell research. Bharadwaj shows that informed consent is not a major concern for many of the doctors who aid infertile couples with in vitro fertilization (IVF) treatment. This in part is because under Indian governmental guidelines, embryos cannot be harvested solely for research purposes, so doctors encourage infertile couples to donate their extra, unneeded embryos produced through IVF as a "gift" to science. Bharadwaj shows how Indian infertility specialists, infertile patients, and their government coproduce a set of practices that strengthen the Indian biotechnology industry and better position the country as a biotech superpower.

Marcia C Inhorn's **"Globalization and Gametes: Islam, Assisted Reproductive Technologies, and the Middle Eastern State"** reveals a different side of infertile couples' IVF experiences. Whereas Indian practices are shaped in part by state guidelines, in Muslim countries, IVF falls within the domain of family law governed by religious law (*sharia*). Inhorn examines the implications of differences between more restrictive Sunni – and more flexible Shia interpretations of *sharia* – for the IVF experiences of couples living in various Middle Eastern countries. Her chapter reveals how religious law is being (re)interpreted, and in some cases circumvented, by infertile couples despite explicit religious sanctions. It also highlights some of the ambiguities surrounding the kinship of children conceived through IVF.

In **"Law, Technology, and Gender Relations: Following the Path of DNA Paternity Tests in Brazil,"** Claudia Fonseca explores how a different reproductive technology, DNA paternity testing, has, in paradoxical ways, also challenged and complicated conventional notions of kinship in Brazil. Historically, birth certificates were the main means to validate the social ties between parents and children. But in the 1990s, as part of a larger social justice movement, it was decreed that children had the right to learn the biological identity of their parents through DNA testing. While it was anticipated that the tests would be mainly used in child support claims by unmarried mothers and their children, they became unexpectedly popular among married men seeking to prove they were *not* the fathers of their wives' children. Like the other chapters

in part II, Fonseca's illustrates the larger point that global reproductive technologies are inevitably transformed by the particular cultural contexts in which they are deployed and the local strategic interpretations that accompany them.

These three chapters demonstrate some of the unintended consequences and social maneuvering that follow state imposition of formal legislation or guidelines to regulate reproductive technologies. With the ongoing global dissemination of information and technologies in the domain of reproduction, state structures, whether secular or religious, must confront a multitude of complex questions regarding the definition of legally and socially acceptable reproductive interventions – questions that also challenge individuals and families in distinct ways in different types of social formations.

Part III: Consequences of Population Movements for Agency, Structure, and Reproduction examines some reproductive consequences of transnational migration. Their overarching themes include the effects of immigration politics and policies on the reproductive practices of migrants and other displaced populations, and the processes that come into play as migrants try to negotiate unfamiliar institutional structures, practices, laws, and regulations. Mark B Padilla's contribution, **"From Sex Workers to Tourism Workers: A Structural Approach to Male Sexual Labor in Dominican Tourism Areas"** offers a framework for understanding the flexible, situationally determined sexual practices of a growing number of working-class Dominican men. His analysis begins with the wide-ranging structural and economic changes that have been transforming this small nation from an agrarian economy to one based on tourism, and shows how these economic and social transformations are being accompanied by new conceptions of masculinity, with health consequences not only for men but for their wives and children as well. In introducing a concept of "regional masculinities" Padilla moves beyond a circumscribed notion of the local to deepen our understanding of the ways in which HIV/STI risks are produced and their consequences for reproduction.

In **"Family Reunification Ideals and the Practice of Transnational Reproductive Life among Africans in Europe"** Caroline H Bledsoe and Papa Sow examine some of the contradictory and unanticipated effects of the European Union's family reunification policies and show that migrants' reproductive lives are often simultaneously

determined by legal and other institutional structures and practices both at home and in their host societies. Bledsoe and Sow illuminate some of the reproductive consequences of the countervailing forces at play in the lives of male Gambian migrants living and working in Spain. Their analysis raises provocative questions about how to analytically account for the power of states to affect the reproduction of non-citizen resident groups.

Carolyn Sargent's chapter, **"Problematising Polygamy, Managing Maternity: The Intersections of Global, State, and Family Politics in the Lives of West African Migrant Women in France"** similarly examines ways that state immigration policies, in this case in concert with institutionalized biomedical practices, shape the reproductive lives of migrant families in Europe. Like Bledsoe and Sow, Sargent charts the tightening of immigration regulations in relation to marriage and reproduction. Although family reunification has represented a principal route to legal residence in France for African migrants since the 1970s, the recent prohibition of once tacitly accepted polygamous unions has generated conflicts and gender-based strategic responses as polygamously married women and men seek to retain legal status. She shows how reproduction has become a central component in these marital and family tensions, as well as in national political debates surrounding immigration.

"Lost in Translation: Lessons from California on the Implementation of State-Mandated Fetal Diagnosis in the Context of Globalization" by Carole H Browner, looks at ways in which a group of Mexican immigrant women interact with, and come to adopt, certain reproductive practices of their host nation, the United States. Like the authors of the previous two chapters, Browner traces the links between broad-scale globalization processes, state policies designed to regulate immigration and reproduction, and male and female migrants' reproductive lives. In discovering and revealing the unexpectedly powerful role that untrained medical interpreters play in the determination of these women's amniocentesis decisions, Browner adds nuance to the meanings of agency, choice, and constraint – and new policy considerations for clinical practice.

In **"Reproductive Rights in No-Woman's-Land: Politics and Humanitarian Assistance"** Linda M Whiteford and Aimee R Eden examine a tragically overlooked consequence of global population movements for women's health and reproduc-

tion. They observe that while more than half the world's population live in disaster-prone areas and the number of displaced people grows annually, a large proportion of women who are refugees or otherwise displaced are excluded from basic reproductive health care by the humanitarian organizations ostensibly overseeing their protection. They conclude their chapter with policy considerations and a call to action.

The third part of this collection expands on the central questions posed throughout: How do global structures and forces shape and reflect state- and local-level dynamics? How does transnational migration generate transformations in marital relations, family ties, and reproductive decision-making in diverse locations and situations? In the context of global flows of population, both voluntary and involuntary, how do individuals, families, and other collectivities conceptualize and pursue reproductive goals and strategies, and to what ends?

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