

WOMEN'S EMERGENCY CONFERENCE ON THE NEW REPRODUCTIVE TECHNOLOGIES

Tconference of about 80 women from 18 countries was organised by the Feminist International Network of Resistance to Reproductive and Genetic Engineering (FINRRAGE), and aimed to share information about the development and application of New Reproductive Technologies around the world, to discuss the implications for women, and to define some strategies for resistance.

The presence of women from Bangladesh and Brazil broadened the issues to include more traditional forms of reproductive technology (contraception and sterilisation) which were used to carry out reproductive abuses in the form of population control.

Ms. Sultana Kamal spoke of the experiences of Bangladesh women who were coerced into having sterilisations with promises of one month's salary and a sari. The operations are carried out in makeshift camps with little antiseptic or anaesthetic support. The US aid agency for which she worked did not supply money for post-operative care — only for the sterilisations — and she pointed out the obvious lack of concern for the women, treated like animals to be sterilised, and not as patients in the US might be treated.

She also criticised the use of injectable contraceptives like Depo-provera, and Norplant, an experimental hormone implant sewn under the skin. Drug companies did not ask for side-effect reports — they were only interested in how to make the drugs more marketable. She criticised the aid programs which tied food aid to population control programs.

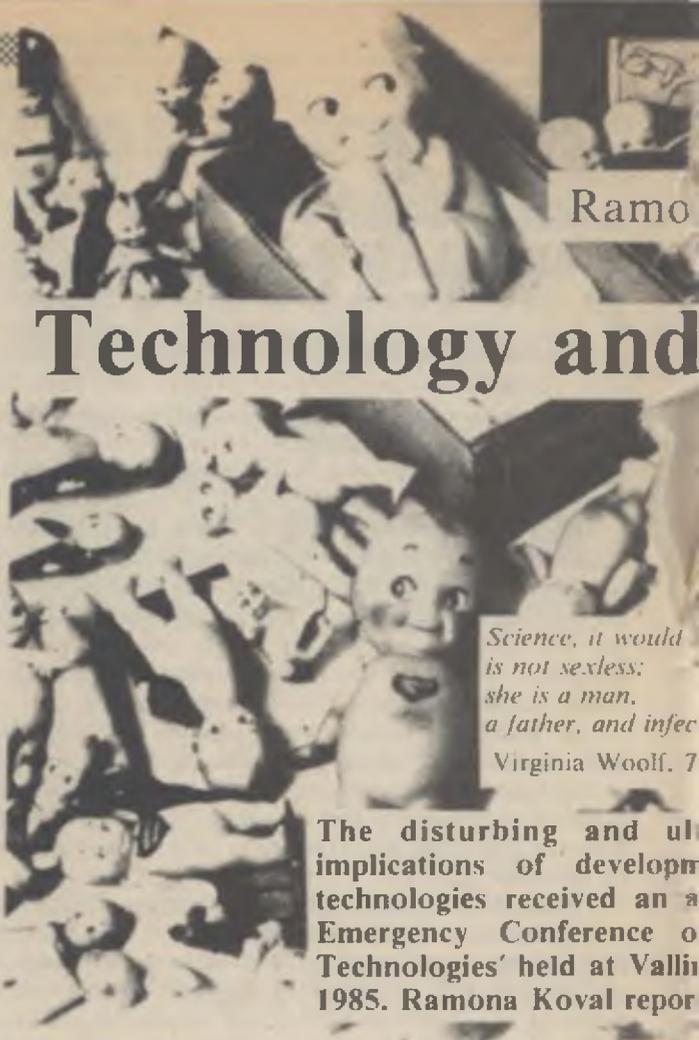
Several women were pessimistic about the possibility of controlling the technologies which they regarded as part of the general thrust of science which viewed organisms as technological devices to be controlled in the same way as machines. The thrust towards new reproductive technologies was part of the world-wide contest between privatised and individualised expensive medical care which concentrates power and profits in the hands of a few experts, and the more widely effective, but less sophisticated economic and health measures which could meet the needs of many more people.

Commercialisation of new reproductive technologies was an issue, with reports from Australia on the "IVF-Australia" case, and from Gena Corea of the United States (author of *The Mother Machine*) on US IVF Clinics which advertise "success rates" of over 20 percent, even though half of them had never produced a baby.

When "success rates" are based on pregnancies (some of which do not even reach the two week old stage, others miscarry later) rather than live births, infertile people are enticed into paying \$US4,000 per treatment cycle.

Ms. Corea reported suggestions that women use IVF technology and donor eggs if they work in hazardous workplaces, rather than risk conceiving; to avoid engineering the risk out of the working environment, they would engineer the risk out of women's biology.

Dr. Maria Mies, a social science professor at Koin University, emphasised the need on the part of governments and industries to produce new consumer



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goods in order to boost flagging economies. Genetic and reproductive technologies are accelerated and financed by international chemical and pharmaceutical companies that recognised potential new markets.

She listed the usual arguments made in favour of these technologies by some supporters as:

- 1) technologies are not bad *per se*, but only if they are in patriarchal/capitalist hands — that all women need is "control", and
- 2) that "we must get more women into science and technology in order to oversee these new developments".

She countered these statements by pointing out that technology is never neutral and women scientists working within the same "machine-logic" mind would not render these developments safe. She said that, even if women were in power, their "success" would be based on the same scientific values as before, where life is seen as something to manipulate at the biological level instead of acknowledging the economic and social basis of disadvantage.

West German women traced links between contemporary German practitioners of reproductive and genetic engineering and the academic underpinnings of Nazi racial policies, and argued that such techniques open the door to sexist and racist manipulation, as well as undermining the already difficult position of disabled

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people.

Some women argued that "surrogate motherhood" (actually, "surrogate wifehood") was an acceptable practice of reproductive sharing between women. Others pointed out that there was evidence of an international traffic of women from non-industrialised countries for surrogacy in the west, which had much more to do with exploitation rather than "sharing with the sisterhood". The real pain of infertility was seen as an important issue for women to address, as well as an analysis of the desire for motherhood.

The resolution passed at the close of the conference appears below.

RESOLUTION (as passed by the conference participants) July 3 - 8, 1985 — Vällinge, Sweden

We, women of Australia, Bangladesh, Brazil, Canada, Denmark, England, France, Ireland, Israel, Japan, Netherlands, Norway, Sweden, Switzerland, USA and West Germany, declare that the female body, with its unique capacity for creating human life is being expropriated and dissected as raw material for the technological production of human beings. For us women, for nature, and for the exploited peoples of the world, this development is a declaration of war. Genetic and reproductive engineering is another attempt to end self-determination over our bodies.

We know that technology cannot solve problems created by exploitative conditions. We do not need to transform our biology, we need to abolish patriarchal social, political and economic conditions.

We shall resist the development and application of genetic and reproductive engineering.

We want to maintain the integrity and embodiment of women's procreativity. Externalisation of conception and gestation facilitates manipulation and eugenic control. The division, fragmentation and separation of the female body into distinct parts for its scientific recombination disrupts historical continuity and identity. The individual becomes the dividual, the divided one.

There is no right to a child as property. Neither infertile nor fertile women, neither lesbian nor heterosexual women require permission to have a child from authorities like the state or the medical profession.

We call on women to resist the take-over of our bodies for male use, for profit-making, population control, medical experimentation, and misogynous science. Life for us always means risk. It cannot be programmed or perfected. Living demands courage. We shall not surrender ourselves to the technocrats. We shall hold fast to the collective responsibility for ourselves and our lives.

We resolutely oppose all attempts through genetic and reproductive engineering to bring about a racist and fascist division of women into "valuable" women in the industrial world, who should have children, and "inferior" women in exploited countries, who are forbidden to have children. In our own countries, we oppose differential treatment of poor, disabled, lesbian, black and foreign women by patriarchal medicine. We resolutely oppose eugenic population policies, in particular the fabrication of "perfect babies".

We condemn all governments that allow genetic and reproductive engineering.

We condemn the international traffic in women, specifically for purposes of reproductive prostitution.

We condemn the use of women from exploited countries and poor women by men and international conglomerates in the interests of global capital and patriarchy.

We condemn men and their institutions that inflict infertility on women by violence, forced sterilisation, medical maltreatment, and industrial pollution and repeat the damage through violent "repair" technologies. We oppose coercive prenatal diagnosis.

We support the exclusive rights of all women to decide whether or not to bear children, without coercion from any man, medical practitioner, government or religion. Recognising that infertility is often determined by political, social and economic conditions, we support compassionate treatment of infertile women and intensive study into the prevention of infertility.

We support the recovery by women of knowledge, skill, and power that gives childbirth, fertility and all women's health care back into the hands of women.

We seek a different kind of science and technology that respects the dignity of womankind and of all life on earth. We call upon women and men to break the fatal link between mechanistic science and vested industrial interests and to take part with us in the development of a new unity of knowledge and life.