

Reproductive technologies, biological clock discourses and the extension of fertility time: gender, kinship and biopolitics of reproductive aging in Switzerland

Drawing on the seminal works of Sarah Franklin, Charis Thompson, and Carrie Friese, my dissertation project aims to contribute to the study of assisted reproductive technologies (ARTs), kinship, and gender by taking into account the underexplored dimension of age/aging. The view of a fixed pool of oocytes, declining in quantity and quality with aging, has been at the core of reproductive medicine for decades. However biomedical technologies, such as IVF with donated eggs and egg cryopreservation, have been increasingly used to extend fertility time and to address what is framed as the social problem of the postponement of childbirth and related infertility. Along with the future regenerative possibilities opened up by the presence of germline stem cells in ovaries, they have also raised the prospect of decoupling the relationship between female fertility and age altogether, transforming the frontiers of age.

This project explores how socio-technical imaginaries relating to the possibility of fertility extension are framed in the Swiss context and how the biology of reproductive aging itself becomes a matter of governance. Two main questions are addressed in this project. On the one side, I examine how the use of ARTs produces new understandings and definitions of reproductive age and aging, and explore their gendered and kinned dimensions. On the other, I examine how the category of age informs the development of reproductive medicine and science and is used to regulate the use of ARTs. Switzerland provides a relevant location from which to explore these questions. Indeed, this country is characterized by a strict regulation on ARTs, prohibiting reproductive treatment with donated human eggs, while sperm donation is authorized, and entailing that a growing number of perimenopausal women turn to egg donation abroad to have a child and build their family. Additionally, a trend to delay the first childbirth can be observed – the mean age of motherhood was 31,6 in 2013 (OFS 2013) and women starting reproductive treatment were on average 36,3 years old in 2012 (FIVNAT 2014). This contributes to make age-related infertility a salient medical, legal, and political issue, whose study allows to highlight the ambivalence raised by an ageless fertility potential and the social processes of naturalization, socialization, and normalization (Thompson 2005; de Jong 2009), at stake in the making of “older parents”.

Methodologically, the project conjugates a constructivist stance, inspired by science and technology studies (STS) and by gender studies, with the empirical-observational method associated with a multi-sited ethnography (Marcus 1995; Hine 2007; Beaulieu 2010). The analysis draws on three main types of material collected between 2011 and 2014: 1) 48 qualitative interviews with 34 women or couples undergoing reproductive treatment, 21 qualitative interviews with clinicians and other experts – psychologists, bioethicist, middle persons, legal and public health experts – involved in the field of reproductive medicine; 2) observations during interviews, conferences, information sessions, and through contacts with a reproductive medicine unit; 3) scientific, medical, legal, and media textual and visual documents.

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