

Book Review: Wombs in Labor: Transnational Commercial Surrogacy in India by Amrita Pande

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Wombs in Labor is an absorbing and meticulously researched work. Amrita Pande fruitfully scrutinises the minutiae of interactions among surrogates and the community of a clinic for their underlying meaning, writes Marion Koob.

Wombs in Labor: Transnational Commercial Surrogacy in India.
Amrita Pande. Columbia University Press. 2014.

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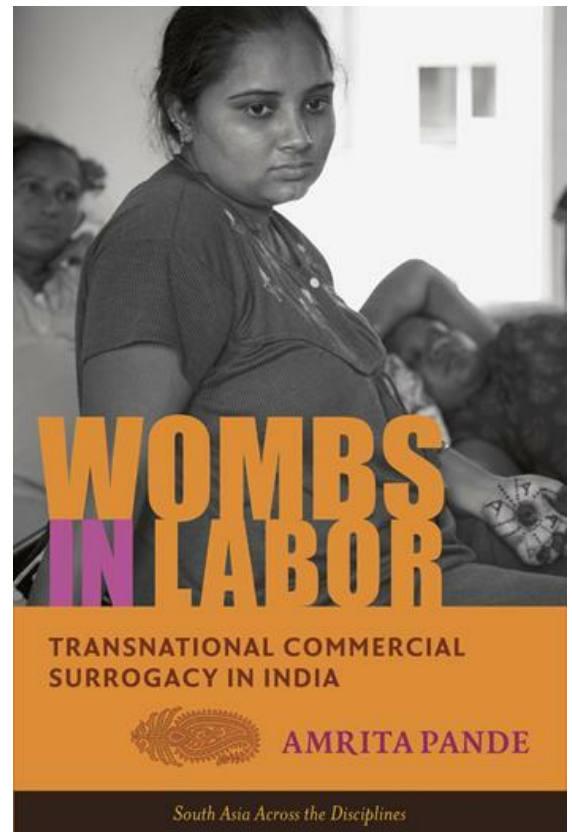
Parvati is a nurse. She wanted to be a teacher but did not finish middle school. One day, a doctor at the hospital where she works told her about surrogacy – carrying another couple’s child through pregnancy. She went to a fertility clinic, where a couple from New Zealand was willing to pay \$5,000 for her to bear their child, an amount worth approximately 50 times her household’s monthly income. She and her husband had hesitations, namely about the health risks involved and the social stigma which surrogacy still relays – but they agreed to go ahead. The money will help save on a crippling monthly rent and pay in part for building a house.

In recent years, the business of surrogacy has boomed in India, in the fold of a huge growth in medical tourism. Many foreigners are drawn to the country for surrogacy due to the lack of regulation in this domain. Yet, its ethical ramifications have sparked an on-going debate in the media. Surrogates are typically required to live in dormitories for the duration of the pregnancy, under a strict regime and the careful watch of doctors and nurses. This conjures visions reminiscent of the world of dystopian fiction, of Margaret Atwood’s *The Handmaid’s Tale*, or of Lois Lowry’s *The Giver*.

Wombs in Labor: Transnational Commercial Surrogacy in India by Amrita Pande is an ethnography of one of the country’s very first fertility clinics. Made up of interviews of “fifty-two surrogates, their husbands and in-laws, twelve intending parents, three doctors, three surrogacy brokers, three hostel matrons, and several nurses” and complimented by participant observation, the study is an intimate analysis of the lives sustained by this trade. Amrita Pande discusses its subtleties of power; the use of divinity as a rationale for surrogacy; the absurdity of a prospering fertility business in a historically anti-natal state.

Armaan Clinic (a pseudonym) manages pregnancies to the minutest detail in order to ensure their success. In Chapter 4, “Manufacturing the Perfect Mother-Worker”, Pande shows how this control is exercised on surrogates. The perfect surrogate is formed through the creation of two conflicting identities. The first, ‘mother-producer’ encourages surrogates to behave with care and nurturing towards the baby they carry.

Good ‘mother-producers’ stay in clinic hostels, although this means living far away from their own family. There, they participate in scheduled activities such as classes in English and computing, which facilitates communication with



clients about the pregnancy. But most crucially, 'mother-producers' must be selfless, and thus not negotiate payment with clients.

The contrasting 'worker-producer' identity incites surrogates to work to contract and give the baby up at birth without protest. Breastfeeding is not allowed in order to prevent attachment to the child. The disposability and transience of the surrogates' role is stressed. "They are just wombs," comments a clinic employee.

The interplay of these two is repressive, Pande argues. At recruitment, the clinic accents 'mother-worker' ideals. Women are persuaded to sign up by means of their fear of being a 'bad mother' by not providing adequately for their own children. Because mothers are also selfless, they are expected to accept whatever payment is offered to them. This has resulted in a wide disparity in how women are remunerated. At the time of study, rewards ranged from \$2,000 to \$8,000. Discouraging bargaining is also a stark choice when, as of December 2011, the clinic had a waiting list of two hundred parents.

This chapter's only limitation is the specificity of its evidence. Pande extrapolates some of her arguments from the testimonies of two or three clinic employees or associates, and here the reader is left wondering whether different characters would translate to wholly distinct realities in comparable clinics.

Surrogates make efforts to resist the inordinate amount of control exercised on their bodies during their pregnancy. This is within the context of the Indian Government's anti-natal policy, whose rules governed their experiences of reproduction prior to Armaan. Chapter 6, "Embodied Labour and Neo-Eugenics" shows that surrogates do reclaim power over their bodies, but ultimately in meaningless ways. Pande argues that despite small victories, the balance of control does not alter.

The Indian Government's anti-natal policy advocates controlling women's fertility for the sake of modernity and rationality, promoting birth control as a means to enhanced health, rather than women's greater autonomy. Part of the programme is a 'two-child' norm, which presses women to use a permanent contraception method after their second child. Tied into this are subsidies, educational benefits, and consumer products. Women with more than two children are banned from running in some elections, and the provision of some health benefits is linked to sterilisation. The policy communicates to women that their fertility is wasteful, and the source of their poverty. Surrogates resist this pressure by directing their capacity to bear children towards productive means.

Yet the underlying dynamic remains the same. While surrogates derive financial value from having children, they are reducing their own fertility to the advantage of someone else's.

Pande cites the example of Naseem, a surrogate who had difficulty conceiving a second child. When she eventually did become pregnant, her husband lost his job, causing a financial distress which led her to having an abortion, and then becoming a surrogate. Several women Pande interviews interrupted their own pregnancies to carry surrogacies instead. Others deliberately chose not to try to conceive in order to do the same.

Pande contends that this results in a stratified reproduction system, in which low-income or poor women are driven to have children for the wealthy, instead of for themselves. And while the Indian government champions fertility treatments as part of medical tourism, they push those poorer to permanent sterilisation, and small families. The author qualifies this as neo-eugenics. This chapter is haunting and persuasive. Pande uses a wealth of resources and perspectives to support its case. It could only have been improved by further interviews with clients, who would have added an interesting voice within the neo-eugenics argument.

Wombs in Labor is an absorbing and meticulously researched work. Pande fruitfully scrutinises the minutiae of interactions among surrogates and the community of the clinic for their underlying meaning. Her findings are anchored within a wide range of literature: the sociology of labour, body and divinity, and she expands on existing theory while making connections to comparable cases. Unlike many academic writing, this enhances rather than hinders the flow of the book.

In addition, Pande comments on recently proposed legislation in India on surrogacy. She advocates for a greater protection of surrogates' rights, envisaging an international model of fair-trade surrogacy.

Wombs in Labor is recommended to anyone interested in the subject of surrogacy and will please all readers.

Marion Koob has a BSc in Government and Economics at the LSE and and MPhil in International Relations at the University of Cambridge. She has worked in Polis, the LSE's journalism think-tank, and is now at the British Film Institute. [Read more reviews by Marion.](#)

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