SILENT SUBJECT: THE CHILD IN THE DEBATE ON ASSISTED REPRODUCTION IN POLAND

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This article explores the social construction of the "IVF child" in Poland. In this country where Catholicism is the dominant religion, attitudes towards in vitro fertilisation (IVF) and, more generally, assisted reproductive technologies (ARTs) are clearly mirroring and reproducing the nation's values. Based on official church teachings, the "IVF child" is a new subject of concern. Research conducted with children who were conceived in this manner proves that they are important actors, whose voices need to be included into the anthropological analysis of ARTs. The ways in which they articulate their understanding of ARTs shows both the pervasiveness of anti-IVF voices and the active roles children play in producing their own meanings.

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Artykuł dotyczy społecznego konstruktu "dziecka z in vitro" w Polsce. W kraju, gdzie katolicyzm jest dominującą religią, stosunek do zapłodnienia in vitro (IVF) i, szerzej, technologii wspomaganego rozrodu (ART), odwołuje się do wartości narodowych i reprodukuje je. W oficjalnym nauczaniu Kościoła stworzony zostaje nowy podmiot, "dziecko z in vitro". Badania z dziećmi, których przyjście na świat było możliwe dzięki pomocy medycyny, dowodzą, że są one ważnymi aktorami, których głosy powinny być brane pod uwagę w antropologicznych analizach ART. Sposoby, w jakie artykułują one swoje rozumienie ART, pokazują z jednej strony siłę głosów przeciwników IVF, a z drugiej – aktywną rolę dzieci, które tworzą własne znaczenia w tym obszarze.

Keywords: IVF, assisted reproduction, children, Poland

INTRODUCTION

Children take centre stage in regards to Polish debates on assisted reproduction. In public discourse, their existence is discussed, health scrutinised, best interest protected, and dignity respected. Social reality and the lives of children, however, are being neglected. The figure of "IVF child" is a juxtaposition of the way it is presented in Polish public debate and the way these children who come from families with histories of infertility, understand and negotiate their experiences.

In this article, I examine how the social image of the "IVF child" is constructed, contextualised and used in Poland. In addition, I unpack the set of values, norms and beliefs that are attributed to both Assisted Reproductive Technologies (hereinafter ARTs) and children and present how they are instrumentalised in public debate within a society that is predominantly Catholic. The number of Poles who attend religious services has consistently been decreasing, but 91,9% of Poles still declare themselves to be Catholic (*Życie religijne w Polsce* 2018). Moreover, 92.8% of all newborn children in Poland were baptised as Catholic (Mariański 2010). This means that membership of the Catholic Church is culturally significant, allowing this church to fill a very forceful position in Polish society. The power of the Church is also based on its institutional and material resources and connections with politicians at different governmental levels (Hall 2012).

In my efforts to understand the cultural forces shaping the current status of ARTs, I examine the main controversies fuelled by the official Catholic stance on reproductive technologies and the strong position of Catholic actors on the local political scene. I show how Catholic discourses have created the "IVF child" as a subject, which is both politically powerful as a concept and weak, muted (Ardener 2007) as a representative of a certain group.

Based on interviews and participatory research, I examine how discourses on IVF are negotiated and re-interpreted by the children themselves. Research with these children, who are rarely recognised as being among the main actors in the literature concerning ART, adds a new perspective to the anthropological understandings of assisted reproduction¹. Including children's voices confirms how powerful the dominant discourses are, but also sheds light on the active roles being pursued by the young in their efforts to produce their own meanings. By exploring the connection between public discourse and children's narratives, this paper presents how Polish society's values are performed and reproduced (Weiner 1980).

CHILDREN IN ETHNOGRAPHY

This article is based on a larger multi-sited ethnographic project (Marcus 1995) entitled, "New Reproductive Technologies – a perspective of childhood studies"². The ethnographic material for this part of the analysis comes from two types of sources.

- With the development of ARTs, a new subject has emerged on the stage: a person who was born as a consequence of an embryo or gamete donation. However, donor-conceived child is analysed mainly in relation to third-party reproduction and its consequences for meanings of identity, kinship, etc. Although the subject of this paper may seem similar, my main focus is on those who are "IVF babies" in the national and religious context where assisted reproduction as a whole is widely debated and opposed.
- 2 This work was supported by the National Centre of Science in Poland under Grant No. UMO-2012/07/E/ HS3/01024. I thank my colleagues from the Interdisciplinary Childhood Studies Research Team for their comments and revisions.

Firstly, texts from mainstream Polish media: newspapers, magazines and popular Internet portals are used. The main focus is on publications from the years 2007–2015. The second type of material comes from interviews with children and young people that were conducted in Poland between 2014 and 2016. The participants came from families who experienced infertility at some point, and most of them were conceived through ARTs. Participants were informed of the research aims using leaflets and web page information addressed to the children, as well as to the parents. Most of the interlocutors were from middle class families who had the financial wherewithal to afford expensive infertility treatment.

In this project, 29 children and young people (aged 5–28) from families who had experienced infertility took part. Participants were recruited mostly with the help of the Polish patients' organization, The Society for Fertility Treatment and Adoption Support 'Our Stork', along with assistance from personal contacts. Focus group discussions were organized in child-friendly spaces, suitable for private discussions. These were either children's homes, or a workshop space provided by a non-governmental organization in Warsaw. An ethics- committee permit was not required in regards of this research, but the researchers were extremely aware of the ethical dimensions involved and thus worked under a psychologist's supervision and adhered to the ethical rules as outlined in the Code of Good Practice in Social Research Involving Children (Maciejewska-Mroczek and Reimann 2017).

As we recruited children participants for our project, the research team's members encountered some methodological and ethical problems. We met criticism concerning the essentialisation of children who were conceived with IVF, ostensibly a reiteration of strategies used by IVF opponents in Poland. The contention was that these children are no different from others, who were not conceived without the help of IVF. However, comparison was by no means a focus of this study.

The research was conducted either in individual interviews, or, in most cases, group discussions. The latter method gave the participants an opportunity to share their experience with others with similar family histories. The presence of others, as methodological research suggests, facilitates the verbalisation of some problems through the process of sharing and moving from the personal to a more abstract level (Hennesy and Heary 2005; Hunleth 2011; Morgan *et al.* 2002). I was inspired by a broad body of literature in interdisciplinary childhood studies, especially by the view of children as active social actors, both in the research and in a broader social life (see for example Mayall 2008; Vaele 2005; O'Kane 2008; Gallacher and Gallagher 2008; on anthropological research with children Hardman 2001; James 2007). I was also influenced by feminist participatory research, with its "openness, reciprocity, mutual disclosure" (Reinharz 1992, 181). The idea of the research grew out of the concern that current anthropology is entitled and in a way obliged to give voice to the voiceless and marginalised, which obviously is the case for children, especially those who were intended participants.

This approach was inspired by the adamant stance taken by Nancy Shepher-Hughes (2004), who shows how this perspective is important especially in research conducted within the area of medicine.

In my research, children became not objects, but subjects of inquiry and their experiences and viewpoints produced valuable knowledge. According to Nick Lee (2005), most data about children's well-being comes from majoritarian knowledge, and insights from children, who have experiences differing from those of adults, are seen as pathological. In this context, it is important to acknowledge children as a social group which as a whole can be treated as a minority group (James, Jenks and Prout 1998), deprived of the position of active social participants (Jans 2004).

Of special concern was the methodology. Although anthropology has never limited its sources of knowledge to the verbal or discursive, research with children needs some new methodological approaches, shifting the focus from "what was said" to various modes of non-verbal expression. This is due to children's specific characteristics of interaction, related to their narrative skills, their position in society, and their special competencies, which are not equal to those of adults (Alderson and Morrow 2011; Christensen and James 2008; Emond 2005). Thus methods employed in the research were designed in a manner that would facilitate communication, such as making use of drawings, collages, playing with Lego figures, photography, and film-making.

Children's input into the social construction of debate on IVF is not recognised in Poland. Their voices may, however, throw a new light on the relationship between moral and religious concepts, revealed through the formation of the "IVF child" in the public debate Analysis of what they know and how they talk, draw or play about assisted reproduction (which is a part of their family history) may unveil the power of certain discourses and show how they are embraced, opposed or negotiated.

IVF AND CHILDREN IN POLAND: HISTORICAL, POLITICAL AND LEGAL ASPECTS

In order to better understand how the subject of the "IVF child" is produced and used in Polish debate, this concept needs to be embedded in the wider historical, political and legal context of ARTs in Poland (see Radkowska-Walkowicz 2014; Mishtal 2015). As Magdalena Radkowska-Walkowicz notes,

"To understand the current debate on IVF in Poland it is necessary to place it in the wider context of Polish transition after 1989. And in turn, to understand the Polish transition to democracy it is helpful to follow the Polish debate on reproductive rights and health" (Radkowska-Walkowicz 2014, 2).

The roots of contemporary Polish debates on IVF can be traced back further than the transformation of 1989. According to Andrzej Leder (2014), it was in the late communist era, the late 1970's and 1980's, when a conservative-liberal alliance was

established. Because of extensive support for anti-communist movements given by the Catholic Church, the victory of the anti-communist opposition in 1989 can also be seen as a victory for the Church, which took an active role in shaping the young state's political agenda. As Leder writes, the "cultural capitulation" of the left took place, which opened the way for a situation in which the Catholic thought gained a quasi-monopoly in the naming major moral dilemmas (Leder 2014, 187).

One of key issues in the country was assisted reproduction. In the first years of the new political order, assisted reproduction was not discussed in the same manner as other reproductive rights. Controversies appeared in the public arena gradually, with a significant rise in 2007, when the Minister of Health proposed funding for in vitro fertilisations, which are not included in the national health insurance system. ARTs were available for and used by those who could afford the very costly treatment. The situation changed when the Ministry of Health introduced a special program for the years 2013–16, in which three IVF procedures were funded by the state for couples that fulfilled a number of specific social and medical requirements. In 2014, another special program, for the funding of medicines used in ART procedures, was introduced. Statefunded procedures were realised in both private and public clinics until 2016. The new conservative government, which came to power in 2015, withdrew state funding for ARTs. Presently, some local municipalities provide IVF funding, but the scope of this support is very limited. Funding is only one of the areas, in which the state intervenes in the domain of ARTs. Another key involvement of the state is in the regulation of the law concerning ART.

The medical procedures of ARTs usually precede their legal regulation (Pashigian 2012). Regulations are created in accordance with local values and institutional processes (Banchoff 2011). This also holds true for Poland, but in a specific way. Unlike the situation in many other countries, for almost thirty years fertility treatment procedures were performed with no regulations concerning ARTs being in place. There was conflict over ARTs, which led to deadlock between the opposing sides. This eventually led to a situation where all assisted reproduction procedures were allowed without any external control or limitations.

In July 2015, the first law regulating assisted reproduction in Poland, the Fertility Treatment Act, was enacted. In its first article it states that the main goal of the Act is the protection of embryos. Its main organising principles are the primary position of the embryo with the state being a guarantor of order pertaining to all aspects of ARTs, the secrecy and anonymity of third party reproduction, the primacy of heterosexual couple over other forms of parenthood, and no recognition of infertility based on social grounds. Embryos are allowed to be cryopreserved and stored for 20 years. Their "right to life" is so primary that, if not used in this time, they must be donated to other couples. They are therefore attributed with personhood and viewed as vulnerable. Embryos are presented in this scenario as weak citizens in need of protection by

the state, and the order of articles in the act suggests the primacy of embryo protection over protection of the patient, which is characteristic of countries where there is a strong Catholic influence on the law-making process (see Zanini 2011). In this respect the creation of an unborn is similar to that adopted in Polish abortion law, where a new type of "foetal personhood" of the "purest democrat" was created. This refers to a phenomenon widely present in the literature: a "construction of foetus as a privileged legal, medical, and cultural subject, and consequential disfranchisement, disembodiment, and marginalization of women" (Holc 2004, 758).

Under the Polish Fertility Treatment Act, only anonymous gamete/embryo donation is allowed, and very limited data on donors are collected; no extended profiles of donors are made available for the recipients. Also gamete donations between family members are not allowed. The new law imposes an obligation on the doctor to choose donors on the basis of phenotypical similarities to the receivers. The Act does not recognise in any way a child's right to information or the future parents' right to participate in the process of choosing gametes/embryos. The process of third-party reproduction is framed as a purely medical issue.

The legal framework for assisted reproduction in Poland is still unsettled. For many decades it was unregulated by the law, which led to the strengthening of ART service-providers, who could freely decide which procedures were acceptable and to be applied, and which were not. However, some provisions of a more general character were applicable to fertility treatment (for example the Patients' Bill of Rights and the Patients' Ombudsman Act). At the same time, a lively debate in the media on IVF was taking place, which had an influence on the legislative process. Representatives of the Catholic Church took part in this process, formally, through bioethical commissions and informally, through sermons, articles in the press, religion lessons at schools, and private connections. It also used its institutional power (Mishtal 2015). The final shape of the Fertility Treatment Act was presented in the media as being "liberal" or "farreaching", with regard to the above-mentioned circumstances. However, the presidential and parliamentary elections of 2015 brought the Law and Justice Party (a conservative-nationalist party) to power, who declared some restrictions on IVF in their campaign. This situation shows the fragility of the status of ARTs in Polish law.

Another important dimension of the picture of the IVF child in Poland is social acceptance for fertility treatment. Large-scale national surveys have been conducted on Poles since 1995, which show that IVF has gained broad social approval: in 2015, 76 percent of people accepted in vitro fertilisation for married couples, while 62 percent did so for heterosexual unmarried couples (*Opinie o dopuszczalności...* 2015). The least accepted model was in vitro for single unmarried women, which gained the approval of 44 percent. These numbers were similar to previous editions of the survey and they are meaningful because they reveal certain inconsistencies. The rates of acceptance are relatively high, given the fact that Poland is a country where Catholicism is the

dominant religion, the Catholic Church openly opposes IVF, and Catholic clergy and journalists hold great sway in public debate. At the same time, these figures reveal the upholding of traditional attitudes of Poles towards the model of family. The majority of Poles believe that children should be born into traditional families, formed by heterosexual couples, preferably married. The acceptance of IVF correlates negatively with attendance of religious services. Those who attend church several times a week are the only group in which a majority (57 percent) does not accept IVF even for married couples. But among those who attend church every week, only 20 percent oppose IVF. The model of the IVF child is then shaped in relation to two contradicting social phenomena: the widely known opposition to IVF of the Catholic Church and its broad approval by ordinary citizens (of whom most are also Catholic).

CONTESTING IVF, CONSTRUCTING A SILENT SUBJECT: THE CATHOLIC POSITION IN THE POLISH CONTEXT

A very strong Catholic position towards ARTs and the "IVF child" in Poland is to be found in the teachings of the Catholic Church and in the activities of its local representatives. It is based on official documents released by the Congregation of the Doctrine of the Faith and is rooted in Catholic tradition and theology. Its main line can be traced back to the debate over abortion that took place in the early 1970s. In 1974, the Congregation issued a *Declaration on Procured Abortion*, where it was directly stated that personhood is attributable as early as when the ovum is fertilized.

"From the time that the ovum is fertilized, a life is begun which is neither that of the father nor of the mother, it is rather the life of a new human being with his own growth. It would never be made human if it were not human already"³.

The notion of personhood and the dignity of an embryo, posed clearly in the context of abortion, was continued and reinforced when Catholic authorities were forced to react to the fast-developing reproductive technologies.

The basic document which expresses the Catholic stance on IVF is *Donum Vitae*, *The Instruction on Respect for Human Life in Its Origin and on the Dignity of Procreation*, issued in 1987 by the Congregation for the Doctrine of the Faith (*Donum Vitae*... 1987). In this document, in vitro fertilisation is compared to abortion, and presented as an outcome of "civilization of death", thus assisted reproduction is enmeshed into a broader range of problems with modernity. As written in *Donum Vitae*:

3 http://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_19741118_declaration-abortion_en.html. Access: 15.09.2015.

"The facts recorded and the cold logic which links them must be taken into consideration for a moral judgment on IVF and ET (*in vitro* fertilization and embryo transfer): the abortion-mentality which has made this procedure possible thus leads, whether one wants it or not, to man's domination over the life and death of his fellow human beings and can lead to a system of radical eugenics" (*Donum Vitae...* 1987).

The parallel between abortion and assisted reproduction is, however, not confined to Catholic theology, but may also be seen as a pattern that is employed in different social, national and religious contexts (Banchoff 2011). In the case of Poland, however, this parallel results in the creation of a silent subject, the IVF child – innocent survivor of the Holocaust of embryos and at the same time a threat to the social order.

The ideological basis for all judgments of ARTs is the idea of marriage being the sole space for the creation of new life, and sexual intercourse within marriage as the only legitimate way to conceive. In Catholic bioethical discourse, the separation of conception from a physical "conjugal union" is defined as the "pathology of family life", caused by "false prompts coming from the field of science" (Wojaczek 2011). Unlike in some other socio-religious contexts (see for example Kahn 2000, on Judaism, or Garmaroudi Naef 2012, on Shia Islam), Catholic thought understands sexual intercourse as essential in the process of family-making, and its lack thereof is a crucial argument against the permissibility of assisted reproduction. Concerned about the violation of this rule, IVF is presented not as an act of creation, but of destruction. Being an act against God's and nature's laws, it destroys family ties. This is defined in terms of children's rights. As the authors of *Donum Vitae* claim,

"The child has the right to be conceived, carried in the womb, brought into the world and brought up within marriage: it is through the secure and recognized relationship to his own parents that the child can discover his own identity and achieve his own proper human development. The parents find in their child a confirmation and completion of their reciprocal self-giving: the child is the living image of their love, the permanent sign of their conjugal union, the living and indissoluble concrete expression of their paternity and maternity. By reason of the vocation and social responsibilities of the person, the good of the children and of the parents contributes to the good of civil society; the vitality and stability of society require that children come into the world within a family and that the family be firmly based on marriage" (*Donum Vitae...* 1987).

Thus, according to this document, the appropriate model of conception is through sexual intercourse in a married couple, because this is the only model that allows for the child to be a sign of "reciprocal self-giving" of the couple. Alternatives of this model allegedly pose a serious threat to the social order. In the case of "IVF children", the category of best interest is used: if IVF is destructive, it is considered in the best interest of the child not to be born with the help of ARTs. This implies yet another paradox, which is it is in the best interest of the child not to be born at all. This shows the vagueness of the notion of a child's best interest, which is socially constructed in such a manner allowing different actors to use the term to suit their own purposes (Monk 2008; Stainton Rogers

2008). ARTs are therefore presented as posing a risk to one of the most important of modern values: the protection and well-being of the child. Allison James and Adrian James show that the notion of risk, when defined as natural in relation to a certain group (for example young people), allows control to be exercised over this group (James and James 2008). In the aforementioned context this concept is well applicable, as defining in vitro fertilisation as a "natural" risk to a family, is an endeavour to exercise control over modern people in society where traditional family patterns are collapsing.

The conceptualisations expressed throughout *Donum Vitae* and other official Vatican documents are in force for Catholics worldwide. What seems unique in the Polish context is the fact that a substantial number of politicians support anti-ARTs views. It is Catholic-affiliated politicians in Poland's aim to enforce the implementation of bioethical regulations with the ultimate goal of either banning IVF in its entirety, or restricting access to ARTs. Paradoxically, despite the strong acceptance of IVF in Poland, the anti-IVF side is very influential in public debate. The bishops of the Catholic Church are very powerful actors, and regularly raise assisted reproduction. This mechanism is in line with an overall model of Polish Catholicism. Despite a high rate of affiliation, a substantial portion of Poles is not religious in terms of practices and worldviews. This is why, in order to exercise control over reproduction and families, Polish Catholic authorities concentrate their efforts on trying to influence policymaking from the top down, including shaping the public discourse on ARTs. Although there are exceptions in this language of disapproval for ARTs, the message from the local Catholic authorities against assisted reproduction is clear. This message finds further realisation in conservative journalism, in Internet communication, and anti-IVF activism.

OF BARRELS AND DEWAR FLASKS: A "TEST-TUBE CHILD" IN THE ANTI-IVF DISCOURSE

The Polish debate on IVF in recent years has become more and more heated. It has also gained rising attention in scholarship (Radkowska-Walkowicz 2012, 2013; Krawczak 2014; Korolczuk 2011; Mishtal 2015). I focus here on the "IVF child", who in my opinion is created as distinct, but muted subject. In accordance with other scholars, I regard this process as part of a broader political project, pursued by conservative politicians and supported by high-ranking clergy. In order to gain the political goal, that is maintaining the Polish nation's attachment to "traditional" values, various strategies are being employed in shaping the public debate. Most of them are believed to be workable because they are embedded in the nation's moral agenda.

A somehow dramatic passage, written by Tomasz Terlikowski, an influential Catholic-affiliated journalist, recounts the story of a woman who was born from a donated embryo:

"She's aware of the fact that she, unlike thousands of children, who still are kept in barrels, was given a chance to survive and she's aware of the fact that she, unlike her genetic siblings, was given the opportunity to live her life. (...) It is worth noting that the girl was saved by her parents from the big barrels with liquid nitrogen, to which she was sentenced to un-death and un-life by her genetic parents and doctors. Her parents decided to rescue her and give her love and acceptance, but still she feels she's been rejected" (Terlikowski 2014).

According to the author, the woman has undergone some serious psychological problems, related to the history of her conception, as she feels rejected by her genetic parents. The emotional and powerful language found in this text is a good example of how the debate on assisted reproduction is being shaped nowadays in Poland.

To understand the actual meaning of the above-cited fragment, it is necessary to know about a case that happened in Poland in 2012. In a small village, the Police found the bodies of six dead newborns. Further investigation proved that the perpetrator of the crime was their mother, then a 41-year old woman, who hid the bodies in plastic barrels. She was described in the press as an uneducated alcoholic, with poor moral standards and diagnosed as having a psychopathic personality. "Children in barrels" became a symbol of the harm caused to innocent children, adult moral deprivation and degradation, as well as the weakness of the state (the family was allegedly under the supervision of social services). This symbol soon started to be used as a widely recognised idiom.

The history of this case throws new light on the story about frozen embryos evoked by Terlikowski, which were also kept in barrels. In fertility clinics, embryos are cryopreserved in dewar flasks which are barrel-shaped containers with liquid nitrogen. In Terlikowski's narrative, no distinction is made between embryo and child, therefore embryos are also "babies in barrels". This rhetorical trick creates an association between notions of degradation and deprivation from "babies in barrels" to cryopreserved embryos in dewar flasks. It also shows them as innocent and vulnerable, needing of rescue, which is the typical conceptualisation of an embryo used in Polish conservative discourse (Krawczak 2014). The representation of "babies in barrels" is used in relation to IVF embryos, thus attributes to the latter characteristics of being innocent and deprived human beings.

Another strategy employed by IVF opponents is their dehumanisation of IVF children and their parents by equating them to animals, especially cattle, and comparing the procedure to veterinarian ones. The fact that embryology is rooted in veterinarian medicine is a widely used argument against IVF in Poland. This concept finds further development on the internet: one popular meme presents a cow, photographed from the back, with the inscription: "I have had a child from in vitro. A cow-specialist insemination did it". The word "did" is used here and in many other anti-IVF narratives in order to strengthen the concept of the dehumanisation of the process.

In relation to parents, anti-consumerist language is used, in which infertile couples are depicted as consumers, who shop for a child, similar to the way they would purchase goods in a supermarket. This reification views IVF children as products to be bought and sold. A good case in point is a widely cited and broadly discussed interview conducted with one of the key bishops in Poland, Tadeusz Pieronek, who deemed IVF to be an exclusively mercantile transaction: "love is not expressed at the counter of a shop". This and other similar statements relate to anxieties evoked by the separation of sexual and reproductive activities, as well as adding a mercantile aspect to the process of procreation (Kahn 2000). The shape of these anxieties manifests itself in blaming parents for improper way of conceiving, which is against the dignity of the child.

When this side of the debate employs biomedical language, it does so in order to portray IVF children as monster-like. Possible malformations are mentioned as the probable outcomes of assisted reproduction, and are presented in an exaggerated, "monstrous" way. Bishop Pieronek made a famous statement: "What is the literary representation of Frankenstein, a creature brought to life against nature, if not a prototype of in vitro?" (*Pierwowzorem...* 2009). This, as Radkowska-Walkowicz notes, is in line with the role of monsters in culture in general. They are seen as the result of sin or a bad omen. She sees the figure of Frankenstein as

"a reference point in today's debate over biotechnology, especially new reproductive technology. So it is not without reason that Frankenstein's creature appears in debates on IVF in Poland. It is invoked to express fears of biotechnology and support the argumentation of its opponents" (Radkowska-Walkowicz 2012, 31).

The creation of surplus embryos and the fact that not all of them will be used is compared, following Donum Vitae, to abortion or even murder. During a debate in the Polish parliament, one parliamentary member, representing a conservative party, addressed his words directly to children who were conceived with the help of IVF, saying that their existence was paid for by the lives of their "brothers and sisters" (the other embryos that were not transferred). Assisted reproduction is also compared to the Holocaust: in both cases millions of innocent beings were murdered. Such a comparison is exceptionally powerful in Poland, where the Nazis located their biggest concentration camp, Auschwitz, and where the population of Jewish citizens was almost entirely exterminated. Moreover, those who manage to be born, are said to suffer from a "survivor syndrome" – a term used mainly in the context of the Holocaust. The previously cited conservative Catholic journalist Terlikowski, analysing the situation of a child who was born as a result of assisted reproduction through gamete donation, says: "I am not a psychologist, but it is hard to not recognize in her words a survivor syndrome" (Terlikowski 2014). Therefore, statistics of failures in IVF procedures are being presented as statistics of the innocent lives that were sacrificed in the name of other people's desire for reproduction.

Conferring the characteristics of children on embryos is not limited to Catholic-oriented discourses (Banchoff 2011). In Poland, however, in public debate this continuum

is being employed in order to transfer it to a political subject, and to achieve the goal of banning IVF. In 2009, the prominent politician and parliamentary member, Jarosław Gowin, stated in a similar manner in a widely-discussed interview: "I almost hear the screams of despair of those tens of thousands of frozen embryos and I feel their distress. In my eyes, they are children abandoned by their parents" (*Aborcja zarodka...* 2009). The personification of embryos and their attribution with the traits of an innocent child has found its way into mainstream debate through such powerful politicians. It is also observable in political mobilisation. In 2014, over 28,000 people signed a petition given to the Polish government, opposing the introduction of a law regulating fertility treatment. They appealed in words such as: "thousands of children are asking for help! Help us to save their lives and battle for their dignity!" (Tak dla leczenia niepłodności... 2014). On 8th March 2015, on the streets of Warsaw the annual Manifa feminist march was held. As every year, it was surrounded by opponents representing various conservative groups. One of them, Pro Prawo do życia (Pro Right to Life), showcased a large banner, which asked: "What is being done to in vitro children?". And the answer was: "Frozen in barrels, abandoned when ill, killed when defects are revealed. Only 5% have the chance for a life and family". The text was illustrated by the pictures of: dewar flasks, a crying newborn and a fetus post abortion. This banner sums up most of the radical views of IVF children, who are presented as the victims of an "abortion mentality", unloved, treated as instruments and with cruelty by those who dare to play God.

All above-mentioned ethnographic examples reveal the specific construction of the "IVF child" in the Polish anti-IVF discourse. It is created and called into existence by these discourses. It is, however, silent subject, who is not allowed a voice. All the possible arguments have been expressed in this matter, but the children, the final "outcome" of IVF, remain unheard. The powerful use IVF children as discursive arguments, but neglect the very existence of them as real human beings, because it is counterproductive for them to do so. In the next section I will show how the children themselves construct their own meanings.

HOSPITALS AND CAMERAS

My approach in this research with children derives from an understanding of the category of embodied memories, which relates to the phenomenological concept of embodiment as espoused in current re-readings of Maurice Merleau-Ponty. Body, in this perspective, is a source of cognition and unique subjectivity, and family memory is preserved and revealed not only through narratives, but also through its members' bodies (Diasio 2013). Therefore, in families with a history of infertility treatment, a child's body represents the private, intimate history of the family. Children who hear

family stories, often told several times, incorporate them and make them elements of their personal identity. As I will show later on, sometimes this identity can be built on a bodily matter, dating back as far as to the embryonic phase of existence.

The children whom I interviewed paid little attention to the hardships pertaining to the history of infertility treatment, of its emotional, medical, or financial character. The whole process was viewed in a positive light. The participants said that they were "awaited" and that their parents were "happy" to have them. They probably were not very aware of the difficulties surrounding infertility and assisted reproduction, as their parents did not stress this aspect in family narratives. Positive connotations of assisted reproduction in family histories may be also related to the very negative presentation of IVF in public debate and may be seen as a way of balancing the possible detrimental comments that children may encounter. The children I interviewed therefore have a different perspective to what is recounted in numerous studies of infertile adults: a history of a painful, often silenced experience (see for example Becker 2000; Radkowska-Walkowicz 2012).

Some focal points of the discussion over IVF children were raised by the children who took part in the study, but again, with no reference to, and probably no awareness of, their controversial character in the public debate. A case in point being the cryopreservation aspect, which may be related to the children as a personal life story, without the notion of humiliation or degradation to be found in anti-IVF discourses. For example, a girl, aged 10, asked about the history of her family, says:

"I know I was for over three years in a hospital or somewhere, because... first I was supposed to... I might have been the same age as my brother, but my parents couldn't straightaway, my mom, give birth to me, at the same time".

Unlike in the public debate, cryopreservation is free from controversy and viewed as simply a fact in a family story. What is interesting is the extension of identity as far as to the embryonic phase, although children do not explicitly use the term "embryo". This form of awareness of being "oneself" would not be possible without the development of assisted reproduction. The "identity link" here is based on a continuity of matter and on an embodied understanding of self. In literature, the status of an embryo is widely discussed and shows that due to the development of new diagnostic techniques (ultrasonography) and assisted reproduction, the embryo has become a new kind of entity of ambiguous status and thus a new player in the social debate (see for example Dubow 2011; Steinbock 2011; Banchoff 2011). The notion of liminality is used in order to grasp the vague and fragile status of embryos (Merill Squier 2004). This perspective — of a child who is aware of her "embryonic past" and who includes this phase into her personal history — throws new light onto the debate. Embryonic heritage, inseparable from life course as a whole, strengthens and at the same time changes the meaning of the first stage of human development. It becomes something meaningful

personally, thus an embryo becomes not only a political actor in the public discourse, or the personal "treasure" of parents, but also a cornerstone of individual identity. This can be only recognised when the perspective of a person who was conceived in this manner is taken into account.

When children from families who have experienced assisted reproduction are given space to express their views on their family and its history, they prove that it is neither negated, nor overemphasized. A girl, who told me previously that she and her brother are "from in vitro", when asked what this means, says (with another joining in to further explaining the subject to the researcher):

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"[girl 1] They as if couldn't immediately...

[girl 2] ...from a laboratory.

[researcher] A laboratory?

[girl 2] As if. [...]

[girl 1] Mom and dad wanted to have children but c
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[girl 1] Mom and dad wanted to have children but couldn't do it normally, so they had to do it in another way, because [...] ...cause those little sperms from dad didn't want to merge with that something from mum".

The children had some knowledge about some basics of IVF, such as the role of science/medicine (represented by "as if laboratory") and the difference between spontaneous ("immediate") conception and assisted reproduction. The sounds of adult voices can obviously be heard in these narratives, but children actively construct their own meanings, such as by merging the language of science with the personal. And, again, assisted reproduction is presented as part of their family history.

Children also build their own understanding of in vitro, based on elements from family talks and the public debate they encounter. A 10 year-old boy, who is the son of an activist from the patients' organization, told us:

"There are priests who want to close a hospital called in vitro, and my parents are fighting along with others so that it's not closed".

This quote proves that there is awareness by some children (especially the older ones) of the negativity in some circles about IVF in Poland, and is yet another example of their active construction of meanings. Knowledge taken from the adult world is actively merged with the child's efforts to understand and define the reality of assisted reproduction.

Here a rather lengthy fragment of research with a group of four children, aged 10–12, is given which illustrates the moment when the participants were asked to play scenes with Lego blocks and figures, showing how they came into the world. It shows the children's understanding of and response to the debate in the public sphere. As the discussants are older children, they have an awareness of the main positions held and the participants in the debate.

" [child I] A new series should be released: Lego Duplo Children or Lego Duplo In Vitro [laugh].

[researcher 1] Lego Duplo In Vitro, I wonder what would be there.

[child 1] There would be such... A priest, who's yelling.

[child 2] Yes, there would be the figurine of a priest, there would be a syringe and a sperm with a... with a kind of string, attached. And a ball, it would be fun. (...)

[researcher 1] Yes, brilliant concept for a toy. And is this priest an important part of this set, T.?

[child 1] Oh yes. (...) Could be a priest yelling in front of camera [laugh].

[child 2] Exactly, a camera could be there.

[researcher 2] So if there were figurines, there would be the figurine of a priest. What about other figurines?

[child 1] Children.

[researcher 2] Children. What other figurines would be in the Lego Duplo In Vitro set?

[child 1] Probably us.

[child 2] Probably a woman and a man, but a woman should be a little naked, not entirely, I mean... [laugh]. ...because doing in vitro completely dressed..., she should have, I don't know, panties?

[researcher 2] A kind of shirt. Hospital shirt.

[child 2] Hospital shirt and there should be a little syringe.

[researcher 2] What other figurines? Who would be there?

[child 1] A father.

[child 2] A doctor.

[researcher 2] So there is a man, a woman, a priest, a child, a doctor.

[child 2] Right, a midwife should be there.

[researcher 2] That's kind of an idea. Maybe one should write to the Lego company [laugh]".

Children themselves proposed the course of this discussion. What is striking in this fragment, is the discrepancy between the atmosphere of freedom, laughter, openness and play, and the serious subject of the discussion. It shows that children have interiorised some elements from various sides of the discourse. From the medical aspect they took some props (syringe), medical terms (sperm), and an awareness of the actors involved (doctor, midwife, parents, children). But the "anti-IVF" part of the debate provided them with other props (a camera), actor (a priest who is yelling), and the overall notion that there is something wrong with the method that helped them (or their siblings) to be born. This fragment clearly shows the way in which discourses present in the world of adults permeate into the worlds of children and are interpreted by them. Cryopreservation, discussed in Polish anti-IVF discourses as relating to dignity, may be understood as a purely private fact of a child's own history. Meanwhile, Catholic-driven controversies may be well observed, defined and actively transformed through the mediums of humour and play.

CONCLUSION

A child who was born as a result of IVF is a crucial figure in the Polish debate on assisted reproduction. Her or his existence would not be possible without the development of science, which by some is interpreted as a blessing but by others as a curse. His or her position is, however, limited to being representative of some well-established discursive arguments. Caught in the crossfire of medicine and religion, their actual existence and experiences are neglected.

Children's voices are generally barely heard in the public sphere and their low participation in the public debate is connected to their social exclusion (Kay et al. 2008). While the debate on ARTs in Poland is shaped to a great extent by conservative Catholic viewpoints, and the "test-tube child" is made an important subject of it, IVF children are subjected to multiple exclusion. They are talked about, but not talked to, as one of our interlocutors said. They are muted. This group is also very directly affected by reproductive technologies; maybe more so than any other actors in the process of ARTs and thus, this group may be interpreted as radical examples of what Susan Merill Squirer calls "liminal ourselves": those who are living in and affected by the era of ongoing biomedical negotiations and interventions (2004). This intervention has marked their very existence and how they understand and interpret this intervention is an important indication of the new power relations produced by the proliferation of biomedical technologies and religious discourses pertaining to the changing reproductive constellations. The research conducted with these children shows that ART discourse can reach their world, and that they grasp some of its elements. The creative ways in which children conceptualize and refer to the debate on assisted reproduction mean it is crucial that their voices be listened to.

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