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Surrogacy and prostitution: the parallels

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Introduction: sexism and neoliberalism

Surrogacy is pregnancy that is paid for. Prostitution is sex that is paid for. Women are paid for use of or sale of eggs, ovaries and wombs or for the use of vaginas, breasts, mouths, and anuses. In order for the prostitution or surrogacy transaction to occur, there must be an objectified, dehumanized, and subordinated class of women.

The foundation of the businesses of surrogacy and prostitution is commodification which transforms people into objects with economic value. Men with greater social and economic privilege than women, buy or rent women.

The transformation of a human being into property may be termed *commoditization*...The commoditized person is *used* to achieve the commoditizer's objectives and is stripped of free will, self-determination, and selfhood. The commoditized person's body, skills, abilities, labor, and even reproductive capacity are no longer under his/her own control, but rather are controlled (i.e., owned or possessed) by the commoditizer. Hirschman and Hill, 2000, p 469-470

After a woman is turned into a commodity, the exploitation and abuse seem almost reasonable. A sex buyer explained, *"Being with a prostitute is like having a cup of coffee, when you're done, you throw it out."* (Farley, Golding, Matthews, Malamuth, & Jarrett, 2015). Prostitution was characterized as *"renting an organ for ten minutes"* (Farley, 2007). *"It's not buying a baby,"* said a surrogacy lawyer, *"it's buying a receptacle."* A 1970s medical article referred to the birth mother as the *"woman attached to the rented womb"* and to the child as *"the tenant"* (White, 2017).

"Surrogacy was a bazaar," wrote Saravan (2018) about the practice, "where everything about women's reproductive capacity and the children born was priced; the woman's body parts, her breast-milk, her labour as a nanny, the number of child(ren) born, the weight of the babies, the gender/(dis)abilities of the child and even the surrogate mother's caste or religion was priced." Legal German brothels in 2019 could

similarly be described as a bazaar where each sex act had its price listed, from masturbation, blow jobs, to more dangerous and higher priced acts such as anal sex without a condom or blood sports.

Neoliberal economic practices are the foundation of the human rights violations of surrogacy and prostitution. Neoliberalism is an ideology that advocates free markets in which something's value is determined only by the price it brings in the market. Neoliberalism extracts wealth from people by commodifying women's bodies and by "creating new commodity markets where there were none previously" (Harvey, 2007). Consider things that have been commodified but should not be for sale for example pregnancy and sex. While freedom of the market appears to be egalitarian "...there is nothing more unequal than the equal treatment of unequals" (Harvey, 2007 quoted by Hedges, 2018). For example a law that forbids both the poor and the rich from sleeping under bridges, disproportionately affects the poor and thus perpetuates their subordination (Ehrenreich, 1992). "*Some women prefer exploitation to poverty*," declared the surrogacy philosopher Alan Rassaby (1982 cited by Corea). Referring to women in Thai prostitution, a Canadian sex buyer explained, "*These girls gotta eat, don't they? I'm putting bread on their plate. I'm making a contribution. They'd starve to death unless they whored*" (Moore, 1994).

These Darwinian rationalizations for surrogacy and prostitution are the basis for the loudest arguments defending them: surrogacy and prostitution are alleged to be *choices* made by individual women that provide economic benefits. The payment of money is used to camouflage and disappear the harms of surrogacy and prostitution. Men assume that some women prefer exploitation to poverty. A sex buyer explained, "*Yes they are exploited, but they're making a lot of money*." A surrogacy apologist explained, "*Exploitation should be allowed because the exploitees are better with it than without it*."

Women are seen as objects in the marketplace while at the same time, that ugly reality is denied. The argument goes like this: she is being compensated for her choice to make lots of money by tolerating abuse in a way that benefits the womb-renters or sex-buyers. What is ignored here is the *context that limits women's options*: women make the choices that are available to them *as women* in a male-dominated and racist system. Those of us who object to the exploitive sale of women are accused of denying women the right to choose what they do with their bodies. Yet rich women do not make the choice to become surrogates or prostitutes. In US surrogacy, wealthy purchasing parents rent the wombs of working class or middle class women. The needs and desires of the sex buyer or the needs and desires of the couple seeking to rent a womb, take priority over the woman who needs money.

Women's entry to surrogacy or prostitution is a consequence of coercion via the structural harms resulting from sex, race, and economic inequalities, and childhood abuse and neglect. The decision to rent her womb or to have eggs extracted is based on women's limited options and economic restraints rather than

a range of accessible alternatives (Ehrenreich, 1991; Cicarelli & Beckman, 2005). Class differences drive the choices women make.

People can be confused by the fact that US birth mothers whose wombs are rented are not financially destitute as they were for example, in India.¹ Surrogacy of US military wives is based on the need to supplement incomes from their husbands' military employment (Ziff, 2017).

As the US economy worsens and the climate crisis intensifies, inequality will increase, resulting in more surrogacy and more prostitution. The COVID-19 pandemic has deeply affected some of the people in the surrogacy transaction: birth mothers, commissioning parents, and babies. Because of quarantines, border closings, or visa restrictions, babies born to surrogate mothers in countries where the commissioning parents did not live, were placed in hospital wards or orphanages when the commissioning parents could not get to them. US commissioning parents found themselves unable to cross borders to babies born to birthmothers in Ukraine, the Republic of Georgia, Canada, Mexico, and Colombia (Widdicombe, 2020). US birthmothers of Chinese babies whose parents were unable to obtain visas for US entry, handed babies over to nannies hired by surrogacy agencies (Frere, 2020). Fertility business websites acknowledged unknown medical risks of embryo transfers during the COVID-19 pandemic (Cofertility.com, 2020).

Harms of surrogacy and prostitution

Prostitution and surrogacy are gendered economic strategies that require women to take unreasonable risks for harm. The woman whose eggs are harvested faces harms from hormone injections aimed at producing multiple eggs that are then removed from her body and then fertilized with the sperm of the commissioning parent to produce an embryo. Ovarian hyperstimulation syndrome occurs regularly with egg donors. The surrogate mother also takes daily hormone injections to permit embryo implantation. These hormones have both short term and long term adverse effects. The drugs have been associated with increased rates of reproductive system cancers. The common practice of implanting multiple embryos creates high risk pregnancies (Klein, 2017). Symptoms of depression and grief are reported by women who have become attached to their babies despite attempts to detach and disconnect.

A "certain attitude" is required by the commissioning parent and by the sex buyer in prostitution. The fake emotions mandated in prostitution and surrogacy increase women's emotional stress. Women who function as surrogates report that in order to be hired by an agency, they must demonstrate altruistic motivation and fake enthusiasm for joining "Team Mommy." These agency-scripted declarations conceal

¹ India has banned the practice of surrogacy, as have China, Nepal, Sweden, France, and Germany because it was seen as putting undue pressure on extremely poor women to tolerate surrogacy by foreign commissioning parents.

what would otherwise be obvious as market transactions of egg harvesting, womb rental, and baby selling (Berk, 2015). In prostitution the sex buyer requires that she act as if she enjoys the sex. If prostitution is advertised as a "girlfriend experience," then a performance of fake intimacy is also required.

But the performance of fake emotions is not the only requirement. A profound emotional detachment is necessary to survive surrogacy and prostitution. An intimate part of a woman's self: her autonomous sexuality or her intimate connection to a child in the womb are split off from the rest of her being (Ekman, 2013; Ross, Farley, & Schwartz, 2004). The detachment required of women who perform surrogacy and prostitution is often equivalent to psychological dissociation. Dutch researchers minimized the traumatic origins of dissociation, commenting that a "dissociative proficiency" contributed to "professionalism" in the sex trade (Vanwesenbeeck, van Zessen, de Graaf, and Straver, 1994). A similar disconnectness is encouraged in surrogacy, where agencies employ elaborate strategies to decrease the attachment between baby and mother (Berk, 2015)

In order to transform her into the sex buyer's idea of "sex," her commodified body is separated from her real self. The person in prostitution is disappeared and she simply becomes "sex," to the buyer. Or she's viewed as body parts, mouth, vagina, breasts, anus. In surrogacy, the uterus that holds the child for 9 months is not seen as integral to the "real" mother; surrogacy agencies and commissioning parents abstract the birth mother out of existence, as in the names *pre-birth child care provider*. These cruel labels are internalized by women who are paid to rent their wombs. One woman said to herself, again and again, "*it's not my baby, it's not my baby*" Similarly, a woman explained how she survived the verbal assaults of prostitution by using dissociation to protect herself, "*I was just there but I wasn't there.*"

A veneer of medicalization cloaks prostitution and womb rental. In prostitution, there is great concern about HIV/STD. And in surrogacy, clinics and doctors monitor her womb. The goal is to make these harmful institutions appear normal. A closer look reveals that the focus is on the sex buyer's desire to avoid STD and the purchasing parents' desire for a healthy child. Harms to the woman in prostitution or to the woman whose womb is rented are ignored or minimized. Informed consent does not occur in prostitution, and is inadequate in surrogacy. Pimps (that is, agencies, managers) in the business of reproductive trafficking or the business of sexual exploitation, have no idea what the long term harms are.

Physicians often do not follow accepted medical guidelines. For example, the number of embryos transferred into the womb of the birth mother exceeds medical guidelines in a large majority of cases (White, 2017). Health risks of these multiple embryo transfers are minimized because of the conflict of interests resulting from commodification of the birth mother, costly fertility treatments, and the purchasing parents' strong desire for children.

In prostitution, protection of the sex buyer is the primary motivation in public health campaigns. The woman receives health checks for STD because she needs to be sold as "clean," but the sex buyer is not screened in order to protect her. The health risks caused by endemic violence against women in prostitution are minimized or denied.

The control of pimps and those who function as pimps

Pimps exert control without physical force by exploiting inequalities and by manipulating women's vulnerabilities. In surrogacy, pimps may be medical professionals, case managers, surrogacy agencies, attorneys, and pharmaceutical company representatives. In prostitution, pimps can be strip club managers, brothel owners or managers, massage parlor owners, hotel concierges, taxi drivers, pornographers, the list of predators goes on and on. At least 84% of adult women in prostitution are under pimp control (Farley, Franzblau, Kennedy, 2013).

Surrogacy agencies and sex trade businesses are carefully protected by lawyers (Shapiro, 2014). For example, the mayor and district attorney of San Francisco were attorneys for San Francisco strip clubs before and after their retirement from public office (Romney, 2004). Surrogacy agencies are staffed with people who have greater educational and social privilege than women who become surrogates. Surrogacy contracts exert so much control over women's freedom and decision-making that, like prostitution, they approximate ownership (Hamstead, 2020). In prostitution, pimps control what she eats, when she sleeps or uses the bathroom and menstrual supplies, what she wears, where she lives, and who she interacts with. A review of surrogacy contracts listed 127 restrictions on daily activities commonly required including abstinence, monogamy, restricted use of alcohol, caffeine, fast food, and vitamins, over the counter and prescription drug use, proximity to kitty litter, limited travel, choice of doctor, to name a few (Berk, 2015). The commissioning parents may require the woman functioning as a surrogate to undergo video surveillance. Rules against breastfeeding are common in surrogacy contracts since breastfeeding is assumed to promote intimacy between mother and infant.

Words that camouflage human rights abuses of women

There are many words that hide the human rights abuses of women in surrogacy. Some words even make these oppressive institutions seem progressive. In surrogacy, the purchasing/commissioning parents (the demand), the surrogacy agencies/pimps, and the for-profit medical industry together design the narrative about surrogacy.

In surrogacy, a woman's self-definition as altruistic & nurturing is exploited for profit. This is codified in the notion of the *contented breeder*. In prostitution, a woman's self-definition as a sexual being is

exploited for profit. This is codified in the notion of the *happy hooker*. These expressions project the sexist myth that some women just love to be pregnant - with anyone's child. And the sexist myth that some women just love to have sex - with anyone. Prostitution is called *sex work* or *compensated dating*. Surrogacy is called *reproductive work* or a *labor of love*. The birth mother is called *oven*, *incubator*, *suitcase*, *gestational carrier*. Womb rental is described as *third-party reproductive arrangements privileging multi-party medical decision-making*. Prostitution is justified as the *oldest profession* simply because it has existed for a long time, like slavery. We suggest using words that do not turn the woman into the harm perpetrated against her. For example, we refer to her as a *battered woman*, not a batteree. We can also refer to her as a *prostituted woman* rather than a prostitute. And she is a *birth mother* not a surrogate.

Some concluding thoughts

Surrogacy and prostitution not only harm individual women exploited by the reproductive trade or the sex trade, they harm all women because these demand-driven institutions create and maintain inequality between men and women. Women's sex and reproductive capacities are leveraged and sold wherever women's economic survival is at risk (Dworkin, 1983). "Surrogacy undermines the principle of human dignity, which is the foundation of human rights. It is a form of medical, obstetric, symbolic, economic and psychological violence against women. It exploits them and transforms human life into a contractual object" (Devillers, O'Garcia, & Deram, 2020). Prostitution similarly exploits women for profit, based on the sex buyer's fetishistic idea of what sex is. For most women, prostitution is the experience of being hunted, dominated, harassed, assaulted, and battered. Despite the fact that money is paid, sexual assault remains most women's experience of prostitution.

Regulation of surrogacy and prostitution² are not solutions because these institutions, like slavery, are so intrinsically harmful that they can't be fixed, only abolished. Advocating the *abolition* rather than the *reform* of police and prisons, Davis observed,

Ironically, many efforts to change these repressive structures - to reform them - have instead provided the glue that has guaranteed their continued presence and acceptance... Abolition - of slavery, the death penalty, prisons, police - has always been a controversial political demand, not least because it calls attention to the fact that simply reforming specific institutions without changing their foundational elements may reproduce and perhaps even exacerbate the problems reform seeks to solve.
Davis, 2020.

² Harm reduction is a form of regulated prostitution implying that certain practices such as condom distribution, zoned brothels, and the like will control or regulate prostitution's harms. However, the author sees the need for harm elimination or abolition of prostitution.

As Klein (2017) pointed out, regulation of prostitution and surrogacy precludes addressing their roots in sexist, racist, and classist societies that limit women's existence. Thus reforms of surrogacy or prostitution would ensure their continuation rather than their abolition.

Feminists who have written about surrogacy and prostitution saw the threats to women's human rights (Dworkin, 1983; Corea, Klein, Hanmer, et al, 1987; Raymond, 1995, 1979). Some looked into the future and saw that when women are subordinate to men, men's control over women expands as technology and pharmacology expand. Decades later, there is disturbing evidence for the increased subordination of women in the developing fields of robotics and artificial intelligence, and in the activist campaigns for the rights of men to self-identify as women.

New medical technologies threaten women's rights in novel ways as men who want to be women demand womb transplants (Klein, 2017). Pharmaceutical and surgical techniques now permit men to physically mimic women's bodies, including simulated lactation and mechanical contractions to imitate pregnancy (Linehan, 2020). Threats to women's safety have proliferated as men demand the right to declare themselves to be women including access to sex-segregated spaces (such as domestic violence shelters, homeless shelters, prisons, bathrooms, sports). The fields of transhumanism and transgenderism have merged as described by Bilek (2020) who documents the history of the transexual to transgender to transhuman strategy originated by CEO Martine Rothblatt (a trans identified man) who advocates for normalized surrogacy and human immortality via cryogenics, biotechnology, organ manufacturing, transplantation, and nanotechnology.

Feminists find ourselves on multiple battlefronts at this point in history. But that has been true for a very long time.

