Embodied Value: Egg Donation, Visuality and Cyberculture in the United States

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Abstract
This article examines selected examples of the contemporary American fertility industry's commercialized cyberculture. Foregrounding one clinic's egg donor recruitment campaign, and drawing on interviews conducted with industry practitioners, it tracks the ways in which efforts to sell assisted conception online depend upon a visual economy of whiteness.

Introduction
In 1997 critic Valerie Hartouni read images accompanying media stories from the United States (US) about Assisted Reproductive Technology (ART). Stating that within the US it is Black, Latina and poor white women who have the highest rates of infertility, Hartouni questioned the media's near ubiquitous use of white children to illustrate stories about assisted conception. More than affirming that infertility could be circumvented, she concluded that the visual linking of ART with white babies represented a troubling but historically legible action. Given, for Hartouni, the broad anxiety over ART in the US, together with whiteness's role in determining whose reproduction counts as "legitimate," the pairing of white children with assisted conception domesticated the latter by assigning it a place within the dominant reproductive order. A child's whiteness asserted that ART is simply about extending the "right" to the "right" kind of reproduction to the "right" kind of woman. For Hartouni, the US media's conjoining of ART with racial whiteness served as one means to legitimate often unfamiliar bio-technologies in the late 1980s and early 1990s (Hartouni 1997).

In the decade since Hartouni's work, rapid technological, socio-cultural and biomedical change has inflected the discourses and practices constituting ART in the US. Biomedically, not only have claims been made for increased efficacy of fertility interventions but there has been an expansion in the range of procedures available. Socio-culturally it appears that fertility medicine has become normalized: debate about its desirability largely has
given way to discussion about improving outcome and access. Therefore, it seems that to an extent ART has been written into US society. So too has the Internet. If in the mid-1990s there were questions about the uptake of its commercial potential, the Internet is now an established commercial venue in the US as elsewhere. As such, it represents an important site for the practice of ART with US clinics and third party agencies, "egg brokerages" that match donors to recipients, advertising their services via websites, banners and emailed newsletters. Providing virtual tours of facilities, written and graphical information on procedures, photographs of staff members and potential egg donors, charts with pricing data and success rates, a key part of the US practice of fertility medicine now occurs online.\(^1\)

However, despite both this and feminism's longstanding interest in ART's intersection with visuality, critique of ART has tended to overlook the US industry's cyberculture. With little attention devoted to the industry's internet-based visual and written culture, little work has been done to theorize the role mundane industry-produced or commissioned immaterial artifacts play in the practice of ART in the US and to consider whether, because they are so similar to the images Hartouni examined, they can be understood to operate in the same manner. It is with these two issues that I concern myself here, whereby I closely read selected examples from the US fertility industry's commercialized cyberculture. Foregrounding one clinic's representative egg donor recruitment campaign, I track ways US-based efforts to sell ART online still depend upon a visual economy of whiteness.

Anglo-American feminist critiques of ART grounds my reading of egg donation's US cyberculture. In addition to Hartouni's attention to media depictions of ART, underpinning my work are Sarah Franklin's pioneering efforts to locate ART socio-culturally (1990, 1991, 1993, 1997) and Charis Thompson's attention to ways the fertility clinic is constituted and maintained through a series of competing discourses, including financial ones, that may not be immediately perceived as integral to the performance of ART (Cussins 1998; 2005). In addition to their readings of ART, also vital is Franklin's and Thompson's decision to undertake extensive ethnographic work with clinic staff and patients. This brought the generally messy, often cacophonous and always rich lived experiences of women undergoing, and women and men practising, fertility medicine to bear on theoretically sophisticated feminist engagements with an increasingly important and widespread subset of reproductive practices and meanings. Therefore, fundamental to my argument that racial whiteness continues to be central to US fertility industry strategies of self-representation are a selection of semi-structured interviews conducted with clinic and agency staff. These conversations together with close-readings of selected artefacts enable me to position the US fertility industry as an organizing centre against which individual firms undertake different kinds of representational work and to read this work as a key site where the multiple socio-cultural meanings of ART are articulated, disseminated and contested.\(^2\)

In 1998, as a doctoral student in Virginia, I began collecting material - brochures, advertisements, websites, media reports - about ART, fertility clinics and third party agencies. This has grown into a substantial collection. After moving to Dublin in July 2001, I travelled back to the US in October to interview clinic and agency personnel. From Dublin I emailed 50 clinics and agencies requesting an interview. I received 31 positive responses before I left and I ended up conducting 18 interviews in total. New to interviewing and daunted by the prospect, prior to beginning the interviews, I prepared an extensive list of questions about each institution's practice. I had imagined that my informants and I would methodically work through these. The
reality was quite different with each interview - whether conducted in person or over the phone - unfolding as a conversation. Generally lasting about an hour, I asked my informants to tell me about their work, their experiences, their opinions about ART and what it was they felt I should be aware of as a visual cultural studies researcher looking at egg donation. In addition to the industry’s cyberculture, my remarks in what follows are based on interviews conducted with five informants. This group is comprised of the owner/director of one clinic, an embryologist working in another clinic, the owners of two different agencies, and a lawyer with his own law practice that specializes in arranging adoptions, surrogate pregnancies and egg and sperm donation.

Images of the Donor

The US fertility industry’s cyberculture evinces little thematic variation. Following critic Richard Chafen, unaffiliated firms employ the same modes of “visual/pictorial communication” - what I term “visual conventions” - to represent their work (1998, 215). Borrowing critic Marcus Banks’ terminology, these texts’ “internal narratives” or “the story that the image communicates” tend to be highly repetitive (2001, 11). Indeed, across the hundreds of images I’ve collected only three major visual conventions can be identified. These are the depiction of ART as an ethically sound biomedical enterprise or “Images of Science,” the assertion that ART generally leads to the birth of a child or “Images of the Child,” and, my subject here, the portrayal of egg donors as middle-class white women or “Images of the Donor.”

“Images of the Donor” consists of both formally posed photographic portraits and snapshots of attractive young women who in 2001 stood to earn upwards of approximately US$2,000 in exchange for undergoing the time-consuming and often painful process required for them to make their eggs available to other women. Whether professionally made or not, a primary function of these pictures is to reveal a donor’s facial features. Egg donation operates through a discourse of visually determined physical resemblance with clinic staff routinely assuring a prospective recipient that they will do their utmost to locate her “perfect match” so that no one will be able to tell by looking that she and her child are not genetically-related. As the “perfect match” is an egg donor who possesses some of the same physical traits, for instance, hair color and eye color, as the recipient, it is often important to a woman preparing for egg donation to see what a donor looks like.

Enabling this is not, however, the only function of “Images of the Donor.” Because these images operate within the visual discourse of professional portraiture, each also communicates an important message about the woman in it regardless of her appearance. Whatever a donor looks like, her portrait asserts that she is both middle-class and serious in her intent to donate eggs. It does this because it is widely known that portraiture costs money and requires time. Through their sheer existence, the subject’s clothing, make-up and pose also underscore her legitimacy as a donor.

Because she can literally be seen to have invested time, effort and money to sit for a portrait that may lead her to become an egg donor, the prospective donor can be read as having decided to donate her eggs for reasons other than financial gain. She becomes a woman who is not in desperate need of money but who made a rational decision to donate; identified as neither poor nor reckless with her health, through portraiture the potential donor can appear to be middle class. But when the images comprising this convention are read alongside one another, what is even more striking is the insistence on race. The majority of women depicted in "Images of Donors" are white. Black, Asian-American and Latina donors are almost completely absent. Why? Why do unaffiliated US clinics and agencies almost unfailingly represent
their egg donors as racially white? Perhaps the fertility industry's visual insistence on whiteness reflects the fact that there just are not that many Black, Asian-American and Latina egg donors in the US. Or, an equally viable supposition, perhaps it reflects the fact that white women in the US have higher rates of infertility than women from other racial categories and thus seek egg donation more frequently. If either of these is the case, then it would be reasonable to conclude that rather than being guilty of blatant racism, the US fertility industry uses its cybertext to depict reproductive reality. In other words, if either of these suppositions is plausible, then contrary to the predictions of feminist activists who, working around the globe in the 1980s, were extremely suspicious of assisted conception and predicted that its expanded availability would mean that white middle-class women would be encouraged or forced to reproduce whilst poor and/or racialized women would be discouraged or even actively prevented from doing so, it would appear that at least in the US there is no nefarious plot to erase Black, Latina and Asian-American women from discourse about ART - if not from reproductive discourse and practice. As it turns out, data published by the US Centers for Disease Control and Prevention (CDC) contradict the second supposition while interviews with clinic and agency staff initially appear to confirm the first. It is to these conversations that I now turn.

Locating Racialized Donors
The majority of my informants, all of whom are, like me, white, reported difficulty finding Black, Asian-American and Latina egg donors. Dr. Cole initially attributed this to the fact that he practises in a predominantly white city in the US Midwest. Karen Young and Laura Green, practising at agencies located in Los Angeles and the US southwest, respectively, did not concur with his explanation. Instead both women felt their difficulties in locating Black, Asian-American and Latina women to donate eggs rested on a broad sense that egg donation was largely the domain of white women. Ultimately, Dr. Cole came to share this opinion. He stated that there is a "decreased willingness of non-Caucasian women to donate eggs." No longer attributable to an absence of women meeting a specific racial designation, his difficulty recruiting Black, Asian-American and Latina donors was now related to another type of absence - absence of inclination. It is not that there were very few Black, Asian-American and Latina women in his city to whom an appeal to donate eggs could be made. Rather, women can be presumed to have heard appeals to donate and to have chosen not to respond to them. Perhaps, however, even this is not an accurate formulation of the issue. Although what evidence I have does not come from Black, Asian-American and Latina prospective egg donors, upon closer inspection it appears that the lack of egg donors from racial categories other than white in the early 2000s in the US may ultimately rest not on women's refusal to donate their eggs to other women but in their negative perceptions of the medical establishment. Dr. Jackson, the owner/director of a busy clinic in the southern US, is instructive on this point. He specifically reported difficulty recruiting Asian-American donors and read this as evidence of mistrust among women who identify themselves as Black, Asian-American and Latina for egg donation in particular and the medical establishment in general. He told me:

I think that there is a level of mistrust in minorities. I am Caucasian. I think some have a concern that they would have their gametes used or sold at a profit - so that the majority could profit. Minorities might have that feeling. And that they don't want to be used.

Here Dr. Jackson says he believes that Black, Asian-American and Latina
women may consider donating eggs. Although he presents no direct evidence of this, I conclude from his remarks that he feels that appeals for Black, Asian-American and Latina donors may not be categorically dismissed by potential prospective donors. Rather, these women are aware of the need for donors but, ultimately, decide not to pursue this. This decision stems not from a reluctance to help other women but from a belief that their altruistic gesture will be co-opted by market forces. In other words, although a woman may very well believe that she can help another woman by heeding the call of a clinic or agency to consider donation, she rightly sees the institution, and not herself or the recipient, as the primary beneficiary of the donation. Thus, she opts not to participate.

Though it would require significant work in order to properly support the above supposition, there is no question that, as far as the sale of the gametes of Black, Asian-American, white and Latina women in the US is concerned, it is neither the donor nor the recipient, but the clinic or agency that derives the greatest financial benefit. Indeed, the institution profits even when the recipient does not. Arguably it does so to a greater degree and more consistently than either she or the donor ever will. In nearly half the cases in which egg donation is performed in the US (with fresh eggs), it fails to result in a pregnancy. When this occurs, the egg recipient is left to decide whether to pursue this ART again, the donor is left with her fee, and the institution is left with a profit and possibly, depending on the contracts it has with the donor and the recipient, it may also be left with some frozen embryos to sell to someone else at a later date.

Operating through a discourse of altruism in which donors are cast as young, middle-class college students whose primary motivation to donate is not economic necessity or greed but the selfless desire to help other women, many US egg donation programs keep their pay-out to donors quite low. At the same time, there is a counter-tendency to charge recipients more money for eggs donated by "extraordinary donors," women who possess highly valued or relatively "rare" social characteristics. These characteristics include advanced education, athletic ability, beauty, and, on occasion, designations such as Black, Asian-American and Latina. Thus, some US firms stand to profit especially handsomely on the sale of minoritized women's eggs.

Even though Black, Asian-American and Latina women's eggs may be positioned and/or priced within the US economy of egg donation as a "luxury" item, as stated above, images of Black, Asian-American and Latina women are almost nowhere to be found in the industry's cyberculture. I have tried to show here that a discourse on demography is not an adequate explanation for this. But does positing an unsubstantiated, politically motivated refusal to engage with the industry on the part of Black, Asian-American and Latina women in the US provide an adequate alternative in understanding the reign of whiteness in the US fertility industry's cyberculture? Turning to two web-based advertisements, I will argue that it does not.

Summoning "Ethnic" Donors

Of the five informants I discuss here, only one did not report finding the recruitment of Black, Asian-American and Latina prospective egg donors consistently and significantly more challenging than the recruitment of white donors. Although he was the most forceful of all of my informants in asserting a lack of difficulty in recruiting racialized US women as egg donors, George Reed was not the only one to have made such a remark. Quite unexpectedly, Dr. Jackson also told me that recruiting Black, Asian-American and Latina women as donors was perhaps not as difficult as he may have led me to believe initially. Immediately after narrating his unsuccessful attempt to engage an Asian-American woman willing to donate her eggs to a client and then going on to express his sense that the continued difficulty he encountered in
recruiting Black, Asian-American and Latina women to donate was partially attributable to minoritized women's mistrust of the US medical establishment, Dr. Jackson made a somewhat surprising statement. He said: "We've been able to get minority donors - we just have to search a little bit."

Seemingly rendering Dr. Jackson experientially closer to Reed than to Dr. Cole, Young or Green, this statement might be read as contradicting his earlier assertion that he did in fact find it hard to recruit Black, Asian-American and Latina women to donate eggs. He no sooner makes that point then he moves on to maintain that, although it may require slightly more attention than is the case with their white counterparts, matching a Black, Asian-American or Latina prospective egg recipient with a racially similar prospective egg donor is well within the realm of the possible. All that is required, Dr. Jackson seemed to say, is a bit more work.

That work is the subject of this section. In what follows, I track the effort to recruit Black, Asian-American and Latina egg donors in the hope of locating visual representations of such women in the US fertility industry's cyberculture. I seek to find out what kind of search is required in order to recruit women to donate eggs for Black, Asian-American and Latina women who have requested racially similar donors. Wanting to know what the search consists of and how it manifests itself, I ask by what means it is apprehensible and to whom. In asking such questions, I wish to learn how this need to search a little more thoroughly for certain types of donors sits alongside the racial whiteness which, as I have been arguing, dominates visual representations of egg donation in the US fertility industry's cyberculture. Having most clearly articulated this need to expend more effort in order to recruit Black, Asian-American and Latina egg donors, Dr. Jackson's discussion of his recruitment practices provides a starting place for this investigation.

According to Dr. Jackson, the extra work required for the recruitment of Black, Asian-American and Latina donors involves chiefly the creation of a tailor-made advertisement. The text in the advertisement is designed to target women possessing the specific characteristics deemed desirable by the egg recipient. Concerned with the costs his clients incur in their pursuit of egg donation, Dr. Jackson does not refer those of his prospective recipients who cannot find a match amongst the donors already enrolled at his clinic to another program. Instead, he asks them what they are looking for in a donor and then designs a tailor-made advertisement.

Two advertisements from Dr. Jackson's website reveal that at his clinic the additional work required to recruit Black, Asian-American and Latina egg donors involves, among others, foregrounding - and hence reinscribing - racial difference by calling attention to ethnicity. That is to say, it is by ethnicity that race is articulated. As I discuss, this is the case with Dr. Jackson's advertisements and, based upon comments made by other informants and the similarity of their institutions' cyberculture to Dr. Jackson's, I propose - albeit speculatively - that it is the case as well for the wider US industry. As I turn to informants' comments, it also becomes clear that while the racial category "white" can be and is visually represented - with its ubiquity rendering "white" unmarked as a racial category - the same is not true of other racial categories. These, it appears, are spoken about and taken up to a significantly greater extent in firms' written texts than in their visual texts. In other words, as I show below, clinics and agencies appear to prefer to speak about Black, Asian-American and Latina women than to picture them.

Two examples of the visual convention "Images of the Child" are similar in a number of ways. There is marked similarity across the two images in terms of the written text. Each image presents the same list of three bulleted qualifications a woman must possess in order to be considered as an egg donor; if, the list concludes, you have these qualifications,
"then you may make a wonderful egg donor!" Additionally, each image reproduces - with only the slightest variation - the rhetoric of the dream. In the first, the prospective donor reading the advertisement is told that "With egg donation, an infertile couple's dream may be fulfilled!" In the other, the reader is told that the same ART has the potential to fulfill "an infertile woman's dream." But, regardless of whether the dream the prospective donor may help to come true belongs to a woman or to a couple, this rhetoric of the dream is reproduced visually. Somewhat hazy and indistinct, the two small pictures of white infants in the first image can be seen to serve as visual manifestations of the content of the infertile couple's dream of a child. These babies are representations of that of which each member of the couple dreams. In the second image, the presence of a white doll and the way the white girl cradles it visually attest to the fact that the girl dreams of becoming a mother. What is more, the image shows that this dream of motherhood is no ephemeral desire only whimsically taken up later in a woman's life. On the contrary, the advertisement's reader is clearly shown that the dream of motherhood is deep-seated. Formed during childhood, it is no fleeting fancy but constitutive of the woman the girl will become (or the girl the woman still is).

Where the two advertisements do noticeably differ is less in terms of the kind and more in terms of the degree of information each one imparts. Thus, the more text-dependent image enumerates precise reasons why a woman may need an egg donor (cancer, oocyte quality, age) while the other does not. The one area where this general tendency for one image to give more textual information and the other to give comparatively less is reversed has to do with donor reimbursement. While the more text-dependent image simply states that "Egg donors are reimbursed for their kindness," the other indicates that donors stand to earn US$2000.

This effort to differentiate between the two advertisements in terms of the degree and not the kind of information each one imparts also provides a useful rubric for consideration of the ways in which they address the issue of ethnicity. Immediately before the two slightly different formulations of reimbursement, each advertisement reproduces what is essentially the same statement about ethnicity, which does nonetheless contain a minor variation in terminology. The more text-dependent image advises its readers that "All ethnic backgrounds are needed," while the other states that "All ethnic backgrounds are desired." Although it is important to point to the difference in terminology here, this is a minor point and the difference should not be thought to be relevant to my argument.

What is relevant to this analysis is the clinic's stated need for donors from what it terms "all ethnic backgrounds." In the more text-dependent image, however, no further textual information is given to explicitly reveal what is meant by the term "ethnic backgrounds." The absence of elaboration forces the question of what precisely it is that Dr. Jackson's clinic is seeking. This is a key point for two reasons. First, albeit indistinct, the babies are both white and the pullout ad, the text box titled "Looking for just the right donor..." and located on the right side of the image, imagines a white woman. Second, it appears from remarks made by informants that the term "ethnicity" can serve as a synonym for race within contemporary discourse in the US. This is evident in my conversation with Dr. Cole. Seemingly rehearsing a formulation of race wherein whiteness is unmarked and therefore unracialized, in the segment of the interview reproduced above, he switches between the use of "ethnicity" and the use of terms such as "African-American" and "Asian-American." These latter would seem in current parlance to identify specific racial categorizations. Reed makes a similar shift. In the segment of our conversation reproduced above, he initially responds to my question about whether or not he
encounters difficulty recruiting Black, Asian-American and Latina donors by indicating that he does not have difficulty recruiting "ethnic" donors and by the end of the segment he has switched to the use of terms such as "African-American." Thus for Dr. Jackson, as well as for some of my other informants, I would argue that the term "ethnicity" is, for all intents and purposes, interchangeable with the term "race."

It therefore appears that the use of the term "ethnic" in the latter image can also be used to indicate race. In the absence of any other textual or indeed visual information as to what this term might be referring, the advertisement's reader is left with the little girl. She, of course, is white. Could, then, the advertisement be saying that, despite the fact that the little girl is white, donors of other races are needed as well? This is in fact how I read this image.

In the former image, the prominent text box that appears on the right of the page represents the additional work that a practitioner like Dr. Jackson has to do in order to attract specific types of donors. The donor specifically requested here is of medium height, of light complexion and has a high school diploma. She, as stated above, is white. What I find striking about this is the highly complex way in which race is articulated within the US fertility industry's visual culture. Whiteness can be visually or textually depicted. Racial designations other than white, however, tend not to be visually depicted. Spoken about but only rarely seen, reference to the racial categories Black, Asian-American and Latina appear almost entirely in a textual context. Hence, in the guise of ethnicity, racial formations other than white cannot be imaged but they may be referred to verbally in advertisements (and in interviews with informants). Although the contemporary US fertility industry can and does speak about race, the only racial category it images with any regularity is the category "white."

Conclusion

By way of a conclusion I return to a question already posed: why does the contemporary US fertility industry overwhelmingly represent its egg donors as racially white in its cyberculture? I propose that it does so not because each and every fertility clinic and third party agency is a crudely racist organization driven solely by the conscious desire to increase the white population as quickly as possible. Instead, I posit that the industry represents egg donors predominantly through images of white women because a decade after Hartouni's work ART - in spite of seeming ever-increasing demand for it and its normalization - remains problematic within US society. However prestigious, no firm can appear to go about blithely attempting to impregnate any and every woman who says she wants to try to become pregnant and give birth to a child. Debates about "legitimate" and "illegitimate" reproduction are not simply a part of contemporary US public discourse on reproduction; under the rubric of "legitimate" reproduction, these twinned concepts are the axes upon which debate about reproduction turns. In other words, it is currently impossible to have a debate about reproduction without entering into discussion of its legitimacy. US fertility clinics and third party agencies must negotiate this issue if they are to survive. Whiteness offers them one powerful means of underscoring their concern with "legitimacy." This is the case because, as Patricia Williams (1995) makes clear in relation to US reproductive discourse and practice in general and Dorothy Roberts (1997) demonstrates in relation to ART in the US, non-white women, especially Black and Latina women, have consistently been figured as so-called "illegitimate" mothers while their white counterparts are viewed as so-called "legitimate" mothers. Thus, what the contemporary US fertility industry is doing in its cyberculture is drawing on a longstanding visual shorthand of whiteness to proclaim its own legitimacy. As many feminist critics make clear, even though reproductive technology itself may have advanced in the sense that there exists a
seemingly ever-increasing number of biomedical interventions to enable a woman who otherwise may not be able to do so to conceive and give birth to a child and even though means of practicing these and disseminating information about them may be new, there is actually nothing that is new in terms of who counts as a mother and who does not. In the US, white, middle-class women are urged to mother while Black, Asian-American, Latina and poor white women are, figured as "breeders," urged to control their fertility and depicted as being unwilling and unable to care for their children who, allegedly, are not wanted by themselves and are a burden to the society in which they live. As a result, it would appear that the only things that are new about the US fertility industry's cyberculture is that, in disseminating a very old discourse in a very new way, it puts the idea of a monolithic womanhood to the lie. In the contemporary US race (and class) are central to reproduction. At least until white, middle class women's reproduction is no longer privileged at the expense of that of all other women, it remains impossible to speak of women's reproduction in general.

Endnotes
1. See Thompson (2005) for excellent discussion of how and why US fertility clinics report success rates for specific procedures. For actual rates of success for egg donation and other ART, see Centers for Disease Control and Prevention, "ART Success Rates: National Summary and Fertility Clinic Report" at www.cdc.gov/ART/index.htm. As of 2005, the most recent year for which data is available, the success rate for egg donation using fresh eggs (e.g., not frozen) was 52.3% (Centers for Disease Control and Prevention).
2. My concern here is neither with the business practices of individual clinics and agencies nor with the US fertility industry's clients. In terms of the latter, Thompson (Cussins 1998) offers an extended and insightful discussion of fertility patients' often difficult experiences of fertility medicine and Thompson (2005) discusses how, already challenging, the pursuit of fertility intervention can be made more difficult by the fact that not all US insurance companies cover ART. In terms of the former, because it is considered private, I was unable to get information on individual clinic and agency profits.
3. In what follows, my remarks pertain to the practice of egg donation as opposed to egg freezing. In the latter, a woman essentially donates eggs to herself which are then frozen for later use. One problem with egg freezing is that eggs do not store well and ART using frozen eggs does not have the same rates of success as ART using fresh eggs.
4. To donate eggs, the donor takes a series of hormones to hyperstimulate her ovaries. This results in the maturation of multiple eggs which are then surgically removed.
5. The visual detection of genetic relatedness or the lack thereof is impossible. As the geneticist Devin Scannell (2002) explained to me in a personal interview, "genetic relatedness is determined by demonstrating a DNA peculiarity shared by parent and child that is so rare that it is unreasonable to maintain the two people are unrelated."
6. As was pointed out by one reviewer, "Images of the Donor" also work to convey donors' genetic health. In one image, the woman's conventional beauty, even features and the fact that she does not wear eyeglasses can be understood to attest to her "good" genes.
7. For foundational feminist critique of ART and race see Arditti et al. (1984); Corea (1984 & 1985); Van Dyck (1995).
8. All names, including that of Dr. Jackson's clinic, have been changed.
9. I thank the anonymous reviewer who called my attention to the way the ad imagines a white woman.
10. Following my anonymous reviewer and given that this ad within the ad imagines a white infant, it could be argued that the ad as a whole goes even further than I have
claimed. It could be read to not just visually but textually erase any race but white from "the composition of the American population."

References


Williams, Patricia. The Rooster's Eggs: On