

Reshaping Relatedness? The case of US Surrogacy

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Abstract

This article compares three different research projects on US surrogacy, covering a period of about fifteen years. We will reconsider processes scholars call kinning (Howell 2006) and de-kinning (Fonseca 2011) as we aim to capture notions about relationships outside of binaries and standard kinship categories. We set out to answer the following question: how and for what purposes do surrogates evoke kinship categories when they do, and what does it mean when they do not? Our findings show that surrogates do not imply that there is actual kinship created through surrogacy, nor do they imply that pregnancy and birth create kinship. On the contrary, they reaffirm the boundaries of the two nuclear families, theirs and the intended parents (IPs).

Key-words: US Surrogacy; Motherhood; Kinship; Relationship; Friendship

Introduction

This article compares three different research projects on US surrogacy¹. The three studies cover a period of about fifteen years. In the first part of the article, we will briefly document the historical evolution of the practice. International developments, such as changing legislation in India, Thailand, and Mexico, redirected some international traffic to the US. In the second part, we will show how ties, relationships, and relatedness (Carsten 2000) are understood by the different surrogates in the studies. While scholars conceptualized some kinship-related practices as kinning (Howell 2006) and de-kinning (Fonseca 2011), we aim to capture notions about relationships outside of binaries and standard kinship categories to show the range of relationships created through surrogacy. We set out to answer the following

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1 Surrogacy is an assisted reproductive practice in which a woman gestates and gives birth to a child for so-called intended parents and gets compensated in the context of a contractual relationship. The genetic material may come from the IPs or from gamete donors.

question: how and for what purposes do surrogates evoke kinship categories when they do, and what does it mean when they do not?

Data and methods

The first of the studies was an ethnographic research on surrogates' discussions on the largest online public support and information forum (www.surromomsonline.com—SMO) between 2003 and 2013². Berend also corresponded with 35 surrogates and asked about their take on contentious discussion threads; these email exchanges provided clarifications as well as confirmations of her reading of the debates. This study focused on the ongoing communications among surrogates, the issues they took up and revisited, the ones they settled, and the changes in definitions about surrogacy-related emotions, behaviors, and standards. The most salient issues discussed were relationships, contract issues, ways to help intended parents (IPs), and ways to cope with disappointments. This research captured a period of growth and change, both of surrogacy and SMO. Surrogates became more informed and vocal, more insistent on careful contract negotiations as the best way to make sure everyone is protected and to ensure the best relationship between the parties. The majority of SMO surrogates were White, lower-middle-class to middle-class married mothers between their mid-twenties to late thirties with two to four children. Many of them were employed in pink-collar jobs or helping professions while some owned small businesses or were stay-at-home mothers. Many surrogates worked with agencies, at least for their first surrogacy. Increasingly often, experienced surrogates matched independently for subsequent “journeys”³, mostly on SMO, and worked out the arrangement directly with the IPs, with the help of lawyers.

The second study was a doctoral research project (2014-2017) on Italian gay fathers who became parents through IVF and surrogacy. Guerzoni followed 18 gay fathers' whole journey from Italy to California. During that time Guerzoni conducted ethnographic research in fertility clinic A in Southern California, interviewing 10 surrogates. The clinic had collaborations with some surrogacy agencies and also recruited surrogates via Internet platforms such as Google Ads and Craigslist. The fathers were in their mid-forties to late fifties, white, upper-middle class, employed in white-collar jobs. Most of the surrogates were Hispanic, in their mid-twenties to late thirties, and many of them were working in small business. The third study is an ongoing research in Southern California, started in 2017 that Guerzoni is conducting in clinic B that has many international IPs as clients

2 For a detailed discussion of methods see Berend (2016b).

3 We use surrogates' own term to describe the surrogacy arrangement.

from China, Australia and Europe. This research currently involves 50 surrogates, most of them Hispanic and African American, mostly employed in small business. Clinic B has been collaborating with some surrogacy and egg donation agencies, and has a so-called “in house” program, i.e., the clinic recruits some surrogates via current and former surrogates, often their sisters or friends. Clinic B used social platforms (Craigslist, Facebook and Instagram) and organized events for surrogates and their friends (lunches and parties paid by the clinic itself) as part of an internal surrogate referral system. Every week, all the “in house surrogates” received a computer-generated message reminding them of \$1,000 bonus for each potential surrogate they successfully recruit for the clinic. These campaigns emphasized monetary compensation for helping another family. The surrogates recruited are medically screened (the psychological evaluation is made by an external psychiatrist) and matched by the clinic itself. Clinic and agency professionals, i.e., doctors, fertility specialists, psychologists, lawyers, and staff members inform and advise IPs and surrogates about procedures, possible outcomes, and risks, although not always fully. They also introduce them to a specific language in which to talk about third-party reproduction.

US Surrogacy

Surrogacy is a relatively recent phenomenon. It is based on three medical technologies: artificial insemination, in vitro fertilization, and embryo transfer. In 1985, just four years after the first birth via IVF in the United States, the first child was born to a surrogate (Andrews 1989; Meinke 1988). At the beginning, the reproductive market developed around traditional surrogacy (TS), using artificial insemination. Between the end of the 70s and the beginning of the 80s, surrogacy was unlegislated (Annas 1990; Spar 2006). There were no formalized contracts; in some cases, the surrogate received payment, in others only medical costs were covered (Jacobson 2016). In the late 1980s a few agencies emerged and controlled the surrogacy process (Ragoné 1994). Progressively, with increased success rate for IVF and embryo transfer, TS has been supplanted by gestational surrogacy (GS). Between the 80s and the early 90s, only fifteen states had specific legislation on surrogacy (Andrews 1992; Markens 2007).

Today, there is still no federal legislation of surrogacy contracts. In some states, such as New York, Michigan, and Washington, commercial contracts are penalized. In others, as in Arizona, Indiana, and Nebraska, surrogacy legislation is not clear-cut, and there may be legal hurdles and contracts may be unenforceable. A few states, such as California, Connecticut, and Oregon are “surrogacy-friendly”, meaning that the law acknowledges intent in determining parenthood and intended parents can acquire a legal document

assigning parentage before the birth of the baby (“pre-birth order”) (<https://www.creativefamilyconnections.com/us-surrogacy-law-map/>). There is no federal oversight of surrogacy agencies and fertility clinics; they operate according to a free market model.

Since its beginnings about 35 years ago, US surrogacy has changed dramatically. The Internet offers opportunities for surrogates and IPs to match online, without intermediaries. Numerous new fertility clinics, surrogacy and egg donation agencies have emerged and new professionals, such as counselors, coordinators, and lawyers specializing in assisted reproduction have an increasing role in this growing sector. However, all these intermediaries have much less control, or do not even seek control, over the whole process of surrogacy compared to agencies in the late 1980s and 1990s. They typically facilitate and coordinate the beginning stages, often in a cooperative arrangement with other actors (e.g. clinics cooperating with agencies or lawyers), although there are parallel practices, such as Internet matching or “in-house surrogates” recruited directly by clinics.

Literature review

Although the United States has become one of the privileged destinations for many people looking to have a child via surrogacy (Nelson 2013), not many studies that have focused attention on US surrogates’ experiences. Helena Ragoné’s (1994), pioneering study analyzed traditional surrogates’ experiences and the way in which the parties understood and represented surrogacy. Elizabeth Roberts (1989a; 1989b), explored surrogates’ meaning making, how they derived a sense of self-worth from carrying babies for others, and also the way they made sense of technology in this assisted practice. Heather Jacobson (2016) focused on surrogates’ reproductive work. Elizabeth Ziff (2017) studied military-spouse surrogates and described the specific meanings they derived from surrogacy and the narrative parallels between their surrogacy and military experiences. In all these studies surrogates were asked some questions about their relationship to the fetus or the resulting baby and in all cases, they declaimed motherhood, comparing surrogacy to babysitting or watching a relative’s child. Berend (2016a) explored surrogates’ understanding of relatedness and relationship and their use of kinship terms. None of the studies fully analyzed surrogates’ views about kinship or their use of kinship terms; they generally related lack of motherhood claims to the prevalence of intent as the defining feature of parenthood.

Qualitative research on US surrogacy is limited compared to the normative scholarship critical of this practice. Critics of surrogacy have long worried about outsourcing reproduction from wealthier countries to the

“Global South”. However, the US has for years been a destination for many international couples. With recent restrictions on surrogacy in India, Mexico, and Thailand, among other developments, the US has become one of the favorite destinations for reproductive solutions (Nelson 2013). US surrogacy fits into the transnational reproductive landscape in which local and global are intertwined, given the influx of international IPs, embryos created abroad and shipped to the US, as well as some foreign egg donors coming from the Czech Republic, Ukraine, South Africa, etc. These changes have increased the demand for and produced a proliferation of agencies and clinics that offer assisted reproductive services for each type of client. These agencies often recruit surrogates and promise comprehensive services to clients, yet do not oversee the whole surrogacy process.

Ethical debates

Ethical debates about surrogacy often focus on questions of exploitation and commodification (Anderson 1990; Ketchum 1992; Rothman 1989). In this context, critics see the contract as a tool to force surrogates to perform their “job” specified in the signed contract. However, our findings as well as new scholarship (Berend 2016b; Berk 2014; Jacobson 2016) show that surrogates and couples see the contract as protection for both parties. Surrogates and IPs most often understand the contract negotiations as a way to work out mutual expectations and obligations. SMO data show that increasingly, surrogates acquired more information and informed surrogates had more say about what they wanted to specify in the contract. Women also compared compensation amounts and payment structures, taking some of their cues from agency websites.

Critics also frequently assume that surrogates have maternal feelings for the baby they carry. Some critics go as far as calling the surrogate the mother of the baby, no matter where the egg and sperm come from (Rothman 1989). Our findings, however, show that surrogates understand desire for a child and parenting that child as the bases of parenthood, rather than genetics, gestation, or birth. Surrogates generally disclaim motherhood; they emphasize intent, desire to be parents, and sometimes genetic relatedness as the bases of parenthood. It is, however, somewhat hard to know how important the issue of motherhood is to them, given its prominence in surrogacy news and public debates. Critics often read such disclaimers through the lens of false consciousness or manipulation (Radin 1996; Rothman 1989), asserting that all pregnant women develop a specific attachment to the child they carry. One of the most common assumptions in public debates, both nationally and internationally, is the identification of pregnancy with motherhood and, consequently, a rejection of the idea that a woman

can be pregnant without developing a maternal relationship to the fetus she carries. The essentialism of maternal attachment and the primacy of pregnancy over any other experience related to motherhood have been articulated in scientific and non-scientific discourses⁴. Critics sometimes reference the legal concept, *mater semper certa*, that characterized legal practice from Roman times until 1978 when the first child was born through in-vitro fertilization. For example, Daniela Danna (2015, p. 180) writes in *Contract Children. Questioning Surrogacy*: “Parenthood is no way a simple biological fact—but pregnancy is, and the supremacy of the birth mother in establishing families must be recognized, especially by feminists”. Identification of pregnancy with motherhood is fairly common, and, consequently, the idea that a woman can decide to carry a pregnancy without maternal bonding seems “unnatural”.

Motherhood and nurturing

In the following, we will take up motherhood, one of the most debated questions, as our first exploration of surrogates’ use of kinship categories. Our data indicate that surrogates take up the problem of motherhood because they daily encounter variations on this question: “How can you give up your baby?”. A typical SMO post explained:

I got asked this a lot. I could answer them a million times, but it was really like they didn’t believe me. And then no one talked to me after I delivered, they all called my mom to ask if I was OK...my mom would assure them all that I was fine - I don’t think they believed her either.

SMO discussions proliferated with questions such as “what do you say when people ask you?” or “how do you explain that you’re not the mother?”, as women sought advice from fellow surrogates. The surrogates interviewed by Guerzoni received similar questions, and they replied with analogous answers such as “I am just an oven”.

We argue that because of the constant questioning, surrogates often preemptively answer other people’s concerns. They most often are very clear about their relationship to the baby: they are nurturers but not mothers. Time and time again, surrogates articulate their stance in ways that are similar to this SMO post: “We know for the most part this is not our baby and really are prepared for that.” They discuss how to respond to lay questions: “I just usually say something along the lines of it’s not mine, I’m just the

4 See Guerzoni and Motterle (2018).

babysitter for 9 months. I don't get attached to my surrobabies because for me it's a mindset knowing it's not mine, so it doesn't bother me."

The interview data also indicates that surrogates do not consider themselves the mother and consider the IPs parents (Guerzoni 2018). Respondents made arguments similar to SMO surrogates, underlining the importance of "mindset": "It is not my baby, I didn't have intercourse with my spouse, the baby is not a result of that, but it was done in the lab. You have to already know that it is not your child and you know that from the beginning, because I felt that my family was complete."

SMO surrogates found the following shorter formulation very satisfying and reported using it to answer questions about "the baby": "I'm not giving it away, I'm giving it BACK!" Surrogates also sympathize with fellow surrogates' frustration at having to deal with constant misconceptions: "They don't understand you're not giving away a baby (it's not yours to give away)...you're taking care of someone else's baby for 9 mos." They maintain that babies belong to the IPs because of their intense desire for a child: "by being a surromom i am...giving life to the dreams of our IPs."

Some of the surrogates interviewed by Guerzoni talked about nurturing in concrete terms while also distinguishing between their body and the pregnancy:

You really don't feel that your pregnancy is your own. Yes, you are carrying with your body. Yes, you make sure to eat right, keep things healthy, make sure that these babies grow. But your pregnancy is not your own. You are only getting compensated for it, you are not paying into it. You are not taking any responsibilities, expect for your body. And in that way, I've never felt that these babies were mine.

SMO surrogates also frequently remarked on the lack of bonding: "I love my surrobaby and his parents deeply, but I never for a moment felt motherly or attached to him" reported a SMO surrogate. Many others voiced the contentions that "it's the IPs' baby, so it's their pregnancy". However, while SMO surrogates also often discussed their responsibility for a healthy pregnancy that is not their own, they never mentioned payment as a reason for it being someone else's pregnancy.

Surrogates do not describe themselves as birth mothers, nor as people belonging to a circle of relatives of the child they carried. We need to consider the shaping influence of public assumptions and accusations about the role of monetary payment to understand the binary framing of relatedness in this context. Our contention is that surrogates react to public comments and assumptions, respond to interview questions, and defend themselves against accusations of "selling" their own babies. Thus, surrogates disclaim

motherhood to fend off public accusations, rather than to engage in “de-kinning” (Fonseca 2011).

Scholars coined the terms of kinning and de-kinning in analyzing kinship formation in adoption. Signe Howell (2006) analyzed transnational adoption in Norway and described the efforts of adoptive parents to make adopted children their own. Kinning describes the process through which an adopted child is inserted into a meaningful and permanent relationship with the adoptive family, and, at the same time, placed at the center of a wider kinship network. Kinning suggests an active process; its precondition is that the child goes through a de-kinning process (Fonseca 2011), which means the child given up for adoption is stripped of any type of preexisting family connection. De-kinning suggests a process of erasing kinship ties and kinning means the re-composition of the social body of the child.

Critics of surrogacy such as Rothman (1989), Anderson (1990), and Danna (2015) worry about such acts of de-kinning even if they do not use this concept. They consider the surrogate to be the lawful mother of the child and criticize the practice of erasing her “motherhood” and stripping the baby of any association with her in order to designate the IPs as parents. However, our findings indicate that surrogates consider the IPs the babies’ parents from the very beginning. In their accounts, it was the IPs’ desire to become parents that started the surrogacy process. Thus, we do not conceptualize surrogates’ narratives that the babies belong to the IPs as act of de-kinning. They are not stripping the children born via surrogacy of former kinship ties, rather, they are insisting that kinship ties to IPs are preexisting ties that surrogates respect and actualize by gestating the IPs’ baby. Mandy’s post is a typical expression of a common stance: “You went into the agreement with the intention to make a child for another family”.

One interviewee in Guerzoni’s study articulated a similar detachment from the baby: “I am not related to them (twins), I am just an oven... Since you start the process you set this idea in your mind. You see the transfer, you see that the babies are already made, you didn’t do anything to create this life, they are already there”.

“Babysitting” and “oven” are terms very often used by surrogates in all three studies; they highlight the non-generative role that surrogates generally wish to communicate.⁵ “Oven” does not have negative meanings for the surrogates in our studies; on the contrary, it underlines lack of maternal attachment. Being an oven, when the term is used by surrogates, means welcoming, caring for, and nurturing a life already created. Surrogates’ bodies become a safe place for the embryos created outside of and inserted into their wombs. Babysitting also implies that the cared-for baby is someone

5 Elly Teman (2010) reported similar use among Israeli surrogates.

else's child. Whether women call surrogacy babysitting or liken it of being an oven or not, they generally disclaim attachment to the baby.

I didn't feel any bond. It has nothing to do with me, because it is not my child. I know he is not mine. When you are pregnant with your children, you feel bond with them, you can't wait to feel it. With this baby is different. I care more to see the parents happy. We are in touch, they care a lot about me. [Surrogate in Guerzoni's study]

Surrogates in our studies often articulate similar notions of their role as nurturers, but those who do not participate in support forum discussions use more imaginative and unique expressions for nurturing. Guerzoni's interview-based research projects show how surrogates creatively employ concepts to make sense of their paths. Karla, a three-time surrogate, used a Jewish concept in describing her nurturing role while also underlining the boundaries between her own and the IPs' family:

Just the other day R. came to me and hugged me saying: "I was in your tummy!". Also, my son knows that I did that so other families can have what we have. I am Jewish, and we use Chavah, that can be translated in "Mother of All life". So, we use this word and they call me Chavah, because they know they were in my tummy".

The first meaning of the word is "Mother of all life". Chavah embodies both the essence of life and the creative ability to grant that life to others. This idea expresses not only the ability to physically give birth, but also to create, nourish, and enhance life. This is the ability to take something from the state of potential, develop it, and bring it to actualization through her creative abilities. Chavah is a word that can be used to describe the surrogate's role.

The surrogates Guerzoni interviewed also articulate a key notion so many SMO surrogates discussed and embraced: the idea that the baby predated its physical conception. SMO surrogates often use terms such as incubator, oven, and babysitter. Such imagery presents the baby as a preexistent entity that belongs to the IPs and only needs a warm, welcoming place to be actualized. The surrogate only helps by nurturing and thus allowing the IPs' "baby" to grow. Interview data reveals less standardized ways of expressing the same idea. One respondent called herself a "body builder" to indicate that she was shaping material that had already been created. Another surrogate used the analogy of being a "kindergarten teacher" to say that she was taking care of the baby in the beginning while it was the parents' responsibility to take care of the baby for the rest of its life. SMO surrogates were using "surrosion/surrodaughter" and increasingly often "surrobaby", but interview respondents in Guerzoni's studies came up with unique phrases

such as “belly buddy” to refer to the baby they carried. “I considered the baby my belly buddy. I walked him for a bit, but the parents will have to take all the decisions for this baby, not me.” While much less uniform than SMO language, such descriptions reflect the same idea that babysitting and being the oven do, i.e., that surrogates are responsible for bodily care for a while, but their involvement is limited and not related to any parental role.

Relationship hopes and kinship idioms

While surrogates give very similar answers to questions about motherhood, our research findings show that the different populations of surrogates in our studies have different ideas and goals in terms of the relationship with IPs. The SMO data revealed a widespread desire for a friendly and close relationship with IPs during the journey and, maybe in a modified form, also after the birth. SMO surrogates wanted the IPs to want such a friendship; they did not think contractually specifying contact was useful. Most discussions about the topic show that surrogates could not easily imagine that IPs would be uninterested in friendship and tried to explain and find excuse for some behavior by listing previous emotional hurts, caution, or insufficient communication as hurdles to overcome.

SMO advice almost invariably urged surrogates to be open and honest about their feelings with IPs. Lorraine’s advice to an intended mother is revealing:

Unless your [surrogate] specifically stated up front that she did NOT want a close, friendly relationship, my advice is to go for it and enjoy your relationship together to the fullest!! There is nothing more rewarding! ... I could almost guarantee [she] will love that and cherish every moment of time you spend together...!

SMO surrogates also advised newbies to let the relationship develop spontaneously; however, their stories usually suggested that such spontaneity leads to close a friendship. After “not wanting to intrude” on her IPs and keeping a little distance, Kitty explained that closeness simply followed. “My IM said I was now a part of their family, and I better get used to it! We became so close and I am truly grateful for the relationship will still have today. Just let things take their own course.” When things took a different course, surrogates were quite disappointed.

Guerzoni’s interview data does not point to such a uniform expectation. The surrogates interviewed in the clinics did not express specific expectations regarding the relationship with the IPs. They said they did not particularly want to build relationships because they became surrogate for other

reasons, i.e., to make babies rather than have new friends. Those who had little contact during pregnancy claimed it would have been a different experience had there been more communication, without, however, evaluating the difference. The surrogates emphasized that the relationship during the journey and after the birth was up to the IPs. Most of the interviewees maintained that since the IPs were the parents, they should make all the decision about their new family including future contact with surrogates. They reported that sharing some pictures over the years could be welcome, but they said it was the IPs' decision. "I respect what my IPs will choose. We are in contact now that I am pregnant, we are having a wonderful journey. Who knows what will happen later?"⁶

Our data point to a main difference between the social organizations of surrogacy in our respective studies that may explain some of the differences in our findings. SMO surrogates were able to bring various frustrations, hopes, questions, conflicts, and solutions to the discussion boards for collective scrutiny and debate, and as a result, read a lot about the intimacy of the journey and the resulting friendships and developed ideas and expectations about the relationship. Disappointments, although frequent, were explained by referencing either people's dishonesty or their inability to show appreciation and gratitude. The surrogates in Guerzoni's studies did not have that extensive and easily available support system and were not able to compare experiences and form collective ideas about the journey. Some of them attended small group meetings to discuss ideas, expectations, frustrations, and problems during their journey, or were following the journey of other surrogates on social platforms like Facebook or Instagram⁷. However, these connections did not result in a convergence of expectations about relationship outcomes.

In the following, we wish to focus on relationships of surrogacy and the complex meanings of connections among people in surrogacy arrangements. We want to shift the inquiry from binary questions about kinship, about kinning and de-kinning, since our findings show that the parties are not primarily concerned about relatedness. Our findings indicate that it is the relationship the parties have, wish to have, or do not expect to have that shape the way surrogates use kinship terms. In the following, we examine how surrogates make sense of relationships and relatedness beyond the binaries so prominently present in debates about surrogacy.

6 In both clinics the staff member and the agencies involved in matching surrogates with IPs take into consideration surrogates' and IPs' response to questions about future contact and make matches accordingly.

7 During the fieldwork in Clinic B, Guerzoni witnessed the creation of a support group as a forum for surrogates to discuss their experiences. However, very few attended compared to the number of surrogates who were working with the clinic at the time.

Michael Lambek argued that kinship is “carried out in acts that are meant and that have meaningful consequences” (2013, p. 247). SMO surrogates in Berend’s study maintained that IPs act on their desire to become parents and these acts make them parents. Surrogates also see their own actions as meaningful contributions to actualizing IPs’ parenthood. Findings from Guerzoni’s interviews also show that surrogates understand IPs’ actions as constitutive of parenthood and their own role as helping IPs become parents. Some of the interviewees referenced compensation payment as relevant for parenthood claims, as we saw above. Mentioning payment underlines the contractual nature of the relationship; frequently there was not much personal contact during the pregnancy, thus familiarity has not developed between the parties brought together by the clinics.

SMO surrogates almost never discussed payment as relevant for parenthood claims. They focused on IPs’ desire for a child and their own desire to help. In SMO discussions surrogates often expressed a strong desire to have an ongoing friendship with their IPs, based on the intimate and collaborative surrogacy journey. We found that SMO surrogates often used kinship terms to characterize their relationship with their IPs. Such terms indicate the close relationship surrogates established with the couple or the relationship they hoped to have with them. SMO surrogate Jenna wrote:

We bond more with the couples than the babies!! Surrogacy is in no way just about growing a baby it is about ... caring for parents to be...we must nurture them as well! We guide them through the journey.... Our friendship doesn't end at birth; hopefully it grows into more of a family bond than what is already there! Be an Auntie to the girls and a best friend to your IM!!

Other women describe the relationship in strikingly similar ways. Emma wrote:

I missed the day to day contact with my IPs terribly at first. We still had a great relationship, but things did slow down, after all they were looking after their newborn... My lovely little surrodaughter is almost 8 months. I have gotten to visit her 3 times and it was great each time. They call me Auntie.

“Auntie” is an interesting term that quite a few surrogates used. In Western kinship understandings, an aunt is a sister to one of the child’s parents, thus “Auntie” signals kin-like ties first and foremost to the IPs. Yet Jenna’s post talks about friendship between surrogates and IPs, expresses hope for an even closer future relationship that is “more of a family bond”, and encourages fellow surrogates to be “best friends” to their IM. As this and many similar posts show, surrogates use kinship terms to describe or signal a close relationship rather than attempt “kinning”. The kinship terms they use also

lack “internal reciprocal coherence” that characterizes the Euro-American kinship system (Leaf 2001, p. 74). An auntie to the baby would have to be the IM’s sister or sister-in-law, not her “best friend”.

The above-quoted posts also show the intertwined articulation of feeling the loss of closeness with the couple, the loss of the trusted nurturer role, as well as a desire to see the fruit of one’s labor, the happy family. Surrogates often miss being needed and trusted and many articulate the loss. “I bonded more with my IPs that I did my surroson. I miss my IPs... Your relationship most certainly does change. Things like the everyday contact you had”. Yet many surrogates also insist that surrogacy forges closeness that survives the journey: “You are no longer just friends, you are more like family.” We see a certain convergence of terms on SMO as a result of ongoing collective discussions. Frequent posts such as the following were shaping new surrogates’ expectations: “Surrogacy is soo intimate that it seems hard to envision a journey where you carry a child for IPs and you don’t become friends or like family”.

Surrogates often hope for ongoing friendship but generally recognize that relationships change, especially after the birth. Carsten’s (2013) analysis of “processes of thickening” or “thinning” of relatedness are useful here to think about changes in relationships. Relationships can become less intense, break up and/or be repaired. Throughout the journey and after the delivery there are different degrees of closeness between surrogates and IPs. There is no template as to what the relationship is supposed to be or how it can survive tension or disagreement. Unlike in kinship, the parties can disagree about the very ties that connect them. SMO surrogates cultivated and elaborated ideas about “nurturing parents” and “healing the hurt of infertility” and defined surrogacy as an intimate journey. It follows that, ideally, the parties become close, stay in touch, and be part of one another’s life in some form that resembles “extended family” relations in the sense that they are counted on to continue. Surrogates do not claim kinship ties; rather, they express their desire for a close long-term relationship that has some taken-for-granted elements the way kinship does but involves actions and behaviors that nurture and keep the relationship alive.

Many SMO surrogates in Berend’s study were willing to do the relationship work, including “giving IPs time and space” to be parents to the new baby. They articulate a desire for a linked future in which the surrogate gets to see the family she helped create. “The hardest part for us is the relationship ending or changing with our IPs. We tend to get so close and then the roles change after the baby is born.” SMO surrogates expressed friendship aspirations with their IPs more when the IPs lived in the US than with international IPs, although they often worked hard to become closer even in those cases, using Skype and translation programs to communicate. Also, the more they articulated friendship aspirations, the more they expressed

them in entwined friendship and kinship terms: “We are friends or like extended family.”

Guerzoni’s findings reveal substantial differences in terms of surrogates’ expectations. The surrogates interviewed expressed the desire to stay in contact only if the IPs decided to do so. Most surrogates only wanted to have a yearly update at most. Surrogates with gay European IPs had more contact with their couple than other surrogates with international IPs, but even they very rarely used terms such as “extended family”, preferring to characterize their IPs as “long-distance friends” or simply “my IPs”, even after the birth.

I consider them friend. Long-distance friend. [...] I want to stay in touch with them also in the future because I know they want to tell their baby how he is born. I want to be able to be there too. I am not an aunt or anybody close, because we don’t have any blood relationship and it is more like a long-distance relationship as friends.

Some of the surrogates in Guerzoni’s samples had a strong relationship before and after the delivery; they stayed in contact for months or even years after the birth. Some others never had any contact during the pregnancy and not much at birth. A few surrogates developed some relationship at birth but had little or no contact afterward. These surrogates did not use kinship or family idioms. In some other cases, surrogates were uninterested in contact with IPs since, as some said, “their work ended with the delivery”. In many situations, relationships dissolved over the years, in others it ended after the birth or there was no relationship at all. Despite the complexity of the situations, the interviewed surrogates continue to refer to the IPs as “significant” persons connected to their lives, even when there were few actual shared experiences during the journey. As Lorena said: “I feel that during the pregnancy we haven’t had a great bond. I gave birth to their baby and we are in contact twice per year. They will always have a special place in my heart for the experience that we shared for more than one year”.

Conclusion

With the various changes in surrogacy, including the social organization of the practice and increased presence of international IPs, especially Chinese couples, practices, expectations, and discourses change, too. One unchanging aspect of the practice emerged from the findings of our three different projects, namely, that US surrogates disclaim motherhood. From their point of view, the baby they carried belongs to the intended parents, way before its creation. We argue that surrogates elaborate on their lack of bonding with the baby primarily to counter comments, questions, and criticism

about “giving away their baby”. Left to their own devices, SMO surrogates were interested in the relationships of surrogacy rather than refashioning relatedness and they used kinship terminology to express a desire for an ongoing relationship with IPs that is freely chosen rather than contractually specified.

Guerzoni’s interview data reveal a relative lack of specific expectations of closeness or friendship with IPs and the lack of kinship terms. Surrogates in the clinics Guerzoni studied generally left relationship decision up to their IPs, pointing to a more directly contractual understanding of surrogacy, albeit one that included altruistic benefits to the surrogate.

The proliferation of intermediaries, including unregulated clinics and agencies that coordinate some but not all aspect of surrogacy and the changes in the composition of IPs over the years have led to different and also more diverse demographics of women becoming surrogates. The more varied cultural and economic backgrounds of newer cohorts of surrogates, combined with the fact that they are not immersed in support networks, may well have led to quite different expectations about surrogacy and the relationship with IPs, as evidenced by our respective findings. The newer cohorts of surrogates in the two clinics were also matched more frequently with international IPs with whom they had very little in common culturally.

SMO surrogates used a mixed terminology of friendship and kinship while the interviewed surrogates commonly used the language of friendship, although not always. Different terminologies indicate different expectations and ideas about what surrogacy means. Thus, rather than being acts of kinning, we see the use of kinship terms as a signaling of the desires for a close relationship that is understood as a result of the intimate act of creating children but is also chosen and subject to change. Surrogates do not imply that there is actual kinship created through surrogacy, nor do they imply that pregnancy and birth create kinship. On the contrary, they reaffirm the boundaries of the two nuclear families, theirs and the IPs, often, but not always, hoping for some form of continued contact between the two.

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