

TACTILE CREASE

The Embodiment of Anti-IVF Discourses in Poland

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In Poland, in vitro fertilization (IVF) is often a contested procedure, as it is not accepted by Catholic bioethics. This rejection mobilizes a wide range of views and arguments about IVF, some of which circulate only in the local discourse. A very potent local concept is the “tactile crease” (*bruzda dotykowa*) that is said to mark the foreheads of children conceived with IVF. This term, coined in 2013 by a priest who is also a professor of law, represents one way in which the political discourse shapes the imagined body of the Other. In this paper, the analysis of the origins and resonance of the “tactile crease” in the Polish public discourse is confronted with the results of anthropological research among children conceived with IVF and their families.¹

Keywords: in vitro fertilization, assisted reproduction, children, Catholicism, Poland

“Tactile Crease” – an Introduction

“There are doctors who can recognize an IVF child by the tactile crease² on its forehead, a sign of genetic defect,” argued Franciszek Longchamps de Bériér in an interview with the conservative weekly, *Uważam Rze*, in February 2013 (Krzyżak & Longchamps de Bériér 2013: 84). The interview concerned the bioethical implications of in vitro fertilization (IVF). Longchamps de Bériér, a priest and a professor of law at both the University of Warsaw and the Jagiellonian University, is also a member of the Polish episcopate’s council for bioethics.

These words carried unprecedented strength in their impact on the IVF discourse in Poland. My ethnographic research shows that this single utterance has resonated with various players: doctors, parents, and, most importantly, children conceived with IVF. What Longchamps de Bériér said, can be interpreted as a logical consequence of the manner,

in which IVF has been presented and discussed in Poland in recent years. Thus, the political discourse leads to the emergence of a certain kind of monstrousness (Hanafi 2000) that shapes the imagined bodies of “test-tube”-“damaged” children. But this monstrousness also refers to the actual bodies of people conceived with IVF – those who have to face and relate to the concept coined by Longchamps de Bériér, no matter how much they may object to it. The “tactile crease”, as well as the vivid reaction to it, provoke questions crucial for understanding modern relations between religion and medicine, as well as new forms of exclusion in Poland.

In this paper, I will confront my reflection on the “tactile crease” in Polish cultural imagery, as presented in the public discourse on the development of IVF, with the results of ethnographic research among children conceived with IVF and members of their families. I will examine how the political dis-

course constructs this body-related concept. I will show how it gained a new life in the embodied selves of IVF-conceived people and their relatives. I see the concept of the tactile crease as a lens, through which new forms of stigmatization may be observed.

Methodology

This paper is the result of a wider research project, entitled *New Reproductive Technologies: Perspective of Childhood Studies*, conducted at the University of Warsaw by the Interdisciplinary Childhood Studies Research Team between 2013 and 2018. This project was carried out by a team of researchers who are interested in studies at the intersection of medical anthropology, anthropology of reproduction and childhood studies. In this project, I focused on the socio-cultural meanings of IVF treatment in Poland. Particularly, I analysed how children and young adults relate to the history of infertility in their families, and how they perceive the discourse on assisted reproductive technologies (ARTs) in contemporary Poland. In total, my colleagues and I interviewed 52 children – conceived with IVF or their siblings – as well as 40 parents (20 mothers and 20 fathers), and 9 grandparents. Research with children was conducted individually or in focus groups, using participatory methods based on artistic activities (see also Maciejewska-Mroczek & Radkowska-Walkowicz 2017). The research involving children was conducted in accordance with the Code of Good Practices in Research with Children for the Social Sciences, developed by the Interdisciplinary Childhood Studies Research Team (see Maciejewska-Mroczek & Reimann 2017), which proposes practical solutions and recommendations in anthropological and sociological research involving children, such as access to information about research throughout all of its phases, the requirement of obtaining informed consent/assent, the assessment of risk and gain for participants, and anonymity. Research in focus groups with children was supported by a psychologist. In-depth interviews were conducted with young adults, parents, and grandparents. Interviews were recorded and transcribed. The participants were recruited with

the help of a patients' organization – The Society for Infertility Treatment and Adoption Support "Our Stork" (the biggest organization that represents the interests of infertile people in Poland). Medical specialists in assisted reproduction (doctors and embryologists) were also interviewed as part of the larger project, but this part of the research will not be used directly in this article.

Public discourse is another source of knowledge used in this paper. I followed and analysed it throughout the entire project. I also examined public discourse, especially print and internet media, from 2007 when the debate over IVF intensified in Poland and onwards. Since then, many processes of stigmatization of IVF-conceived children have been observed, resulting in the appearance of the concept of the tactile crease, as well as other ideas. In the course of my study, it turned out that the tactile crease had become a principal conceptual tool for organizing popular thinking about IVF. Accordingly, analysis of this tool might contribute to a better understanding of the cultural and political aspects of assisted reproduction in contemporary Poland.

IVF in Poland: Research and Practice

The development of assisted reproductive technologies in the last decades has inevitably changed reproductive strategies and practices in various socio-cultural contexts throughout the world. Anthropologists who have studied the subject (see e.g. Kahn 2000; Inhorn 2003) have pointed out that new developments in reproductive medicine along with how they are understood are embedded in the mores, values and religious rules characteristic to a given community. IVF is a well-established method of advanced infertility treatment, approved of and highly valued in the scientific world (the ultimate symbol of recognition was a Nobel Prize for one of its developers, Robert Edwards, in 2010). Simultaneously, IVF constitutes a meaningful cultural fact with numerous implications. The development of assisted reproductive technologies has prompted many questions about family and state. It has also inevitably led to many controversies (on controversies in Western countries, see Banchoff 2011).

In Poland, ARTs figure at the centre of the debate on the nation's values, responsibilities, and its future. Strongly disputed, ARTs serve as a kind of prism, through which various players perceive such concepts as modernity, science, religion, or family (Radkowska-Walkowicz 2012; Mishtal 2015; Korolczuk 2016; Korolczuk & Gunnarson Payne 2016). The development of ARTs coincided with the political and economic transition in Poland. From a communist state dependent on the Soviet Union, the country shifted into a liberal democracy with a free market economy, now evolving in relation to liberal market forces with a new national ideology, strongly influenced by the Catholic Church (Holc 2004; Mishtal 2012; Radkowska-Walkowicz 2014). But research on families with the experience of assisted reproduction has been scarce in Poland. Thus far, no research has examined the perspectives of IVF-conceived persons themselves; this paper aims at filling this gap.

IVF has been carried out in Poland since 1987 (9 years after the birth of the first IVF-conceived child, Louise Brown, in the UK), with good medical results. There are approximately 45 medical centres in Poland offering a wide range of procedures available to modern reproductive medicine. Access to them, however, is restricted due to the fact that none of the ART procedures are subsidized by the state. The Polish state does not take on the responsibility of financing this branch of medicine. One exception was the National IVF Reimbursement Programme, available in 2013–2015, which was ended by the government after the conservative party Law and Justice (PiS) won a majority in the parliamentary elections. Local programmes financed by municipal authorities to support IVF treatment have been introduced as a partial remedy to this withdrawal of state funding, but they are rare, limited to certain cities and not systematic.

In June 2015, due to the requirements of the European legal system, the Fertility Treatment Act was passed, therefore Polish law now regulates ARTs. The act itself was introduced in order to make procedures safer, although it served to restrict the rights of single or non-heterosexual patients (Radkowska-

Walkowicz 2016), and those of children born thanks to gamete or embryo donation (Krawczak 2017).

Most Poles are positively inclined towards IVF, with an acceptance rate of 76% for the use of ART by married couples (CBOS 2015). At the same time, IVF is often a contested procedure, especially in public debate, due to the fact that it is not accepted by Catholic bioethics. Various arguments against IVF are proposed in official, generally-accessible Vatican documents. There is also, however, a wide range of views and arguments about IVF that are not part of official Catholic teaching, but which circulate on the level of local popular discourse in Poland. I will first outline some of the main aspects of the Catholic Church's stance towards IVF, and then present some local dimensions of this stance, as expressed by Catholic officials in Poland.

IVF in Catholic Bioethics

An exhaustive presentation of Catholic bioethics in association with the development of reproductive medicine exceeds the scope of this text. Here, I will only outline some major elements of the stance on assisted reproduction. The main document published by Catholic authorities concerning ART is the *Instruction on Respect for Human Life in its Origin and on the Dignity of Procreation; Replies to Certain Questions of the Day Donum Vitae* (hereinafter *Donum Vitae*), issued in 1987 – incidentally, the birth year of the first Polish IVF child (Congregation... 1987). IVF is not accepted within this bioethical system due to varied reasons, some of which I will outline later in this text.

The dignity of human life from its very beginning, that is, from the moment of conception, constitutes the first argument. According to the authors of the *Donum Vitae*, IVF violates the innate dignity of a zygote, and therefore it cannot be permitted:

Thus, the fruit of human generation, from the first moment of its existence, that is to say, from the moment the zygote has formed, demands the unconditional respect that is morally due to the human being in his bodily and spiritual totality. (Congregation... 1987)

In the view of Catholic bioethics, a zygote is endowed with dignity, both in body and in spirit. According to them, IVF conception is inherently wrong, as it supposedly acts against that dignity (with no explanation of the mechanism by means of which this violation occurs). It is worth noting, however, that attributing humanity to zygotes or foetuses is not limited to Catholic bioethics; it constitutes a more general phenomenon (Steinbock 2011; Dubow 2011), strengthened by the development of ultrasound and other visual methods in medicine.

In Catholic bioethics, IVF is juxtaposed with abortion, a medical procedure forbidden and strongly stigmatized by Catholic authorities. The concept of “abortion mentality” was used in *Donum Vitae*, referring in general to all attempts to influence human reproduction. While the concept of “abortion mentality” requires deeper probing, the relation of IVF and abortion in the Polish context has already been the subject of analysis (see Mishtal 2015). Although linking IVF and abortion may seem counterintuitive (since one procedure might lead to the birth of a new human being, and the other aims to avoid birth), in Catholic bioethics both are not only considered wrong, but are also believed to bear negative consequences for both individuals and the entire community. In this context, eugenics is evoked, stirring up the imagery of infamous events and ideas of twentieth-century history.

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

Eugenics is used here as an example of ultimate evil, which arises from human interference in life’s beginning and end. Although most of those who undergo or pursue IVF do so in order to treat infertility, according to the authors of *Donum Vitae*, radical eugenics makes for its logical outcome. Although the

word “radical” is not explained here, one can assume that it means reproduction completely controlled by mankind.

Another important reason for the objection to IVF by the Catholic Church is that conception takes place outside of sexual intercourse.

In homologous IVF and ET, therefore, even if it is considered in the context of existing sexual relations, the generation of the human person is objectively deprived of its proper perfection: namely, that of being the result and fruit of a conjugal act in which the spouses can become “cooperators with God for giving life to a new person”. (Congregation... 1987)

Yet another reason is added to the more general context: the lack of “proper perfection” in IVF conception, even when the future parents do have sexual relations. Between a married couple and God, there should be no other party to influence conception through sexual intercourse. These arguments mutually reinforce one another and can be summarized in this simplified manner: human dignity, as attributed to a zygote, is said to be violated when found outside of a woman’s body, at any time. That this place is the cold, scientific setting of the laboratory serves to further exacerbate this violation. Conception, which is not pursued through sexual intercourse, not only sullies the dignity of a zygote, but is also seen as humans attempting to play God.

Catholic teaching on IVF is therefore clear-cut and leaves no space for negotiation: no form of IVF in humans is allowed. Those who do undergo such procedures, despoil basic norms and position themselves against human dignity.

The Catholic Church in Poland and Assisted Reproduction

Hierarchs of the Catholic Church in Poland accept and propagate the rules on IVF. They also take sides in the public debate on assisted reproduction, using the episcopate’s official letters, sermons, press articles, media interviews, etc. In recent years, the debate over IVF has been polarized, and the anti-IVF

movement has received strong support from Catholic officials, right-wing politicians, and conservative media. Some public statements that contributed to forming anti-IVF imagery in Poland have also served to fuel the debate. In large, such statements are based on the rhetoric of fear – the foremost tactic used in the discourse concerning new reproductive technologies (Mulkay 1993). I have analysed the Polish debate on IVF elsewhere (Maciejewska-Mroczek & Radkowska-Walkowicz 2018), and here I will only provide some examples that are relevant to this discussion.

A key anti-IVF argument that should be mentioned when presenting the Polish discussions departs from the idea that this wrongful method of conception reveals itself in the damaged bodies of children, who are in turn portrayed as somehow monstrous. Monstrosity, supposedly visible in the form of a mark on a child's body, is the effect of non-normative and sinful conception. Analogies can be found in history: for instance, in the tale of the monster of Ravenna – a popular sixteenth-century creature who was the outcome of sexual relations between a nun and a monk (Wieczorkiewicz 2009). The parents' sin is also said to leave a mark on the bodies of IVF children, however, in modern times, the negative result of wrongful conception is presented within the framework of biomedicine. A more recent example of such a creature is Frankenstein's monster, who embodies the fears of science and of human intervention in nature (about the figure of Frankenstein in the modern debate on ART, see Mulkay 1996; in the Polish context, see Radkowska-Walkowicz 2013). Some conservative Catholic-affiliated doctors and geneticists support this notion of IVF-conceived children as possibly "damaged", that is, allegedly having genetic defects, which are the outcome of medically assisted conception (see Bortkiewicz 2013). Other arguments against IVF refer to psychological damage: children conceived in this way are alleged to feel the burden of wrongful conception. Accordingly, they are supposedly distressed by the feeling that they were "produced", and not conceived with love. They are said to suffer from "survivor syndrome" – they survived,

unlike their "brothers" and "sisters" who were not born (a term that refers directly to post-Holocaust imagery). Further, it is claimed that they pose a danger to society since their imperfect status might spread to future generations: they will not be able to reproduce without the help of medicine (thus perpetuating infertility), and will pass on the genetic diseases, to which they are prone (on this imagery see Radkowska-Walkowicz 2014; Maciejewska-Mroczek & Radkowska-Walkowicz 2017). It is my argument that the concept of the tactile crease should be understood as a logical consequence of building the image of IVF-conceived children in a way that serves to stigmatize them.

The "Tactile Crease": (In)visible Monstrosity

From the very moment that the interview with Longchamps de Bériér – in which he used the term "tactile crease" – was published, it became widely recognized and cited. In reaction to virulent outrage brought on by the idea, the weekly *Uważam Rze* decided to publish a series of interviews and articles in support of priest Longchamps de Bériér and his concept. One such interview was conducted with Alina Midro, a geneticist who underlines her connection to the Catholic Church, and who strongly backed the priest's allegations (although not very succinctly):

[...] it is possible to recognize a given syndrome, if one knows this syndrome. And geneticists, who know that the presence of some complexes of traits indicate the presence of a genetic illness, and that the occurrence is higher in children who were conceived using IVF, are able to ascertain it with high probability. (Krzyżak & Midro 2013)

Here, a clinical gaze (Foucault 1973) is used in order to screen some aspects of reality and impose certain meanings on it in turn. According to the view of the cited geneticist, a "real" expert knows, just by touching a child or even looking at him or her, whether the child is "normal". The authority of biomedicine can be used to ascertain what is good and what is wrong. Such authority is especially important, because "there is no such thing as morally good in

vitro fertilization,” argued Longchamps de Bériér in the interview cited earlier.

The concept of the tactile crease brings medical terminology to mind and indeed, in Longchamps de Bériér’s interview it was articulated in line with many actual medical terms: names of syndromes which, according to him, are supposed to be far more frequent in children conceived with IVF, for example Angelman syndrome or Prader-Willi syndrome. In reality, no evidence exists of an increased risk, of any statistical significance, of the incidence of such syndromes in IVF-conceived children. Indeed, a slightly higher risk of some adverse medical outcomes, like low birth weight or premature birth have been observed, but they are rather attributed to the parents’ infertility than to the method of conception.³ Nevertheless, it is not medically-diagnosable reality, but cultural imagery, that plays the main role here. The accumulation of medical terms is intended to make this narrative reliable, reasonable and, therefore, undisputable. Medical facts are difficult to argue against. They come from a different order than bioethical arguments; they are endowed with the value of objectivity.

The “tactile crease” itself functions in a manner that resembles actual, existing medical terms; it calls to mind symptoms of diseases, which can be seen and diagnosed. What makes it different is the fact that it cannot be seen or diagnosed in any other way, as it exists only in the discursive field of the anti-IVF debate. At the same time, IVF-conceived children are presented as different from “normal” children, as monsters of sorts. This goes in line with what Zakiya Hanafi has said about monsters:

The monster is a concept that we need in order to tell ourselves what we are not... Monsters do exist whenever people mention them or describe them, even if they may not exist in the real world... Most monsters exist by dint of being repeatedly described in words rather than by being sighted in the flesh. (Hanafi 2000: 218)

The tactile crease and the children who are said to bear it, also exist only in words, not in the real world.

There are, however, real, living IVF-conceived children and their families, who are pulled into the world of this concept.

The words of Longchamps de Bériér about tactile creases have resonated strongly within the broader society in Poland. One means of dealing with them was to attempt to find the sources of this concept. The most prominent, proposed by *Rynek zdrowia* (Health Market), a popular portal that concentrates on health issues, links the tactile crease with the single transverse palmar crease, which occurs among 45% of people living with Down syndrome, but also among 5% of the rest of the population. This anomaly brings to mind some meanings expressed by Longchamps de Bériér: the very shape of the crease and its connotation with genetic disorder. This is, however, a trait located in the palm, and not written on the face. Another possible source of the concept of the tactile crease is the epicanthic fold that characterizes the eyes of people of Asian origin, as well as those affected by some genetic disorders (Down syndrome, Turner syndrome and several others). This sort of trait is visible at first glance, especially for an experienced geneticist. It is not, however, a crease. The phenotype of people with Prader-Willi syndrome, a genetic disease mentioned in the interview just before the sentence on tactile creases, makes for another clue. But although this syndrome leads to facial malformations, none of them take the shape of a crease. Attempts to link tactile crease with biomedical reality prove futile by definition. The tactile crease was forged using biomedical language, but it does not exist in any medical terminology and therefore does not need any reference. It can only be understood in the context of the anti-IVF discourse.

This concept is designed to single out IVF-conceived children, label them as strange and distinguish them from the rest of society by attributing to them a trait that marks this difference. Goffman’s classic understanding of stigma serves to best describe the nature of this process:

When a stranger is present before us, evidence can arise of his possessing an attribute that makes him

different from others in the category of persons available for him to be, and of a less desirable kind – in the extreme, a person who is quite thoroughly bad, or dangerous, or weak. He is thus reduced in our minds from a whole and usual person to a tainted, discounted one. Such an attribute is a stigma. (Goffman 1963: 25)

IVF-conceived children are said to have marks on their foreheads, which also makes for a reference to the basic character of stigma in ancient times. Otherness is written on the face. It conveys the threat posed by such children; different from the healthy rest of the population, they are supposedly weak, and somehow dangerous (in this case, because they might spread their weakness to the next generations).

The Power of the “Tactile Crease”

Since it was first brought to light, the tactile crease, however vague, unclear, and probably articulated *ad hoc* by its creator, has been enjoying a long and powerful life. Various players have used it in numerous contexts, including politicians, doctors and journalists. Importantly, in the public discourse it has been mostly employed in “pro-IVF” argumentation, serving as an example of the cruel and soulless attitude characteristic to IVF opponents.

One of many examples of its reception and use is an open letter by Agnieszka Ziółkowska, the first Pole conceived with IVF. The letter was written in reaction to growing brutality in the discourse on assisted reproduction, and was published by the largest Polish daily newspaper, the liberal *Gazeta Wyborcza*. In her letter, Ziółkowska writes:

No. In vitro is not a sophisticated kind of abortion (...), no, IVF-conceived children are not handicapped, nor do they have developmental defects because of the method of conception and no – they do not have special tactile creases on their foreheads. And no, they were not conceived in a disgraceful manner. (Ziółkowska 2013)

The tactile crease is also used in a broader context, outside the area of reproduction, as an example of

unscientific, reactionary attitudes towards modern medicine. For example, the rector of the Warsaw Medical University, Mirosław Wielgoś, made use of this concept in his opening speech in the academic year 2017/18, making it an example of the work of anti-modern forces:

We had to deal with attempts at questioning approved oncological therapies and suggestions to treat seriously ill, dying people with things like beetroot juice; we heard of creases on the foreheads of children who were conceived with assisted reproduction methods, we also hear that vaccines are wrong and kill people. What is wrong is foolishness and we have to oppose it every day here, at our university. And this is what we are going to do, because it is, among others, our mission. Out with superstition, ignorance and witchcraft from the Middle Ages! (Wielgoś 2017)

Although Wielgoś interprets the tactile crease as the effect of reactionary movements, like witchcraft and ignorance, he does not see how strongly this concept is embedded in modernity, based on the modern fears of uncontrolled science on the one hand, and built using biomedical imagery on the other. It is not unusual for religious principles to be forged using medical language, or for them to refer to new developments in medicine, especially in the field of sexuality and reproduction (Peperkamp 2008).

The tactile crease appears to be a very sturdy cultural fact, the life of which extends not only into the future, but, ironically, also into the past. Even past events can be framed using this term. In 2007, the theatre play *A Ball on Planet Earth* was put on, with professional actors performing side-by-side with children. The event was organized by the Polish patients’ organization “Our Stork” together with a fertility clinic, and was addressed to families with the experience of IVF. In a metaphorical manner, the play presented the discussion on IVF in Poland at the time. It showed the story of a girl conceived with IVF (by Mother Earth and

Father Sun), who had to overcome many obstacles, including accusations that she had no soul. On her journey through the world, she discovered her own strength and the value of parental love that lead to her birth.

I interviewed one of the young actors seven years after the play was staged. The now 22-year-old man told me, using an anachronism: "Its goal was to show that these are not different children, with some signs on their faces, some IVF monsters, but they are normal, normal children, normal people." The spectacle took place before the term "tactile crease" was coined, but could be interpreted to have grown out of opposition to it. This example testifies to the concept's power.

Responses to the Concept of the Tactile Crease by IVF Children and their Families

IVF-conceived children are important actors on the stage where the meanings of ARTs are formulated and played out. Although biologically they are not different from any other child, ideology hails them as subjects of suspicion (Maciejewska-Mroczek & Radkowska-Walkowicz 2017). The responses of families, in which a child was conceived with IVF, are varied. Some families decide to hide the IVF history from their children, because they are afraid of stigmatization. Obviously, I could not include those children in my research. I talked only to children and young adults who were aware of the role of medicine in their conception.

Some parents talk with their children about IVF, but do not know if and how they should protect them from voices of disapproval. Below, I cite a passage from my field notes, written after an interview with one of these families, showing the difficulty of handling the knowledge. The couple has a nine-and-a-half-year-old daughter, Lena, who was conceived with IVF. Renata, the mother, was at some point in her life an activist with the patients' organization "Our Stork", and has a very emotional attitude towards the discourses on IVF in Poland. The father, Marcin, was rather inactive, but supportive of Renata in this conversation.

Lena was at her friends'. I was talking to Marcin and Renata about their daughter. They told me that she has known "since forever" about herself being IVF-conceived, but they wondered whether she realizes that IVF is a controversial subject in Poland. Her mother said that she noticed some first signs of such knowledge, so she felt that she would have to talk to her daughter about it, and shared with me her uncertainty on how to do it. I asked what Lena understood from the fact that she was IVF-conceived; what does it mean to her, according to the parents. At that very moment Lena came back, so the parents proposed that we ask their daughter. Lena agreed to join the conversation [...].

Her mother asked: "Lena, what do other people think about in vitro in general?" Lena: "Depends on who it is. Because deeply religious people, they think that it is wrong, I guess, because this is what the Church thinks. And those who know only a little about it, they maybe think that it's a little bit weird, but it's ok." Renata replied: "I didn't think you knew such things!" Renata was visibly surprised and moved by her daughter's knowledge on anti-IVF discourses. (Field note)

Thus, knowledge about the "tactile crease" also permeates into the worlds of children and young people. In my research, I never asked directly about the crease. The term, however, was mentioned by a vast number of interlocutors. They talked about it, interpreted and related to it in diverse ways. I will present some examples of the ways in which young people spoke about the crease, pointing to their variety and the different meanings that arise in consequence.

One way is to both acknowledge and at the same time ignore the concept; a teenage boy told me:

There were people, who talked about some sort of scar that appears on the forehead, or that something might be wrong with the leg,⁴ but I don't think anything of it. (Tadeusz, 14)

Tadeusz's response is unemotional. He not only recognizes the concept of the tactile crease, but also uses it

as a known instance of anti-IVF discourse. At the same time, he refuses to attribute any meaning to the idea.

Some other young people used logical persuasion, discussion with a real or just a virtual opponent, and attempted to use rational arguments based on their own experience.

And then people change, change their view on in vitro, cause they see [...] that this is real. That I am an example, that I don't have a crease, all these crooked arms; yes, I heard varied opinions. I'm not Frankenstein's child, I'm a normal person. (Olga, 21)

In my research, I heard numerous examples of logical persuasion. Some interlocutors used themselves as living evidence of the fact that IVF-conceived people are not marked by any crease. Young people also used their knowledge about medical aspects of IVF (acquired in family conversations about the history of their conception) in talks with their peers, teachers, or other people whom they recognized as misinformed about IVF. Rationality was perceived by many of my interlocutors as a way to surpass inadequate understanding of the consequences of IVF.

Similarly, this young man uses logic, and common sense, together with irony in order to relate to this concept:

One shouldn't brush off totally what people say, but if there are statements like that I have creases on my forehead... Every day I look in the mirror and I don't see anything. (Maciej, 20)

Here, rationality is not enough. Maciej relates to the notion of the tactile crease in a way that shows both disapproval and distance. He suggests that those who talk about differences in IVF children are not worth his attention although he still recognizes the crease as a concept, and it makes him take some kind of action, albeit ironic (looking in the mirror and checking).

For some families, a way to deal with the stigmatizing idea or concept of the tactile crease is mockery

and humour. This is a strategy used to dismantle the anti-IVF discourse, and to protect the family:

... when a friend comes to Olga, and asks her: where's your crease, show it! We are not laughing at in vitro, but at the political situation. (Helena, Olga's sister, 18)

For many of my interlocutors, however, the idea that somebody might think that they have marks on their foreheads because of the way they were conceived, does not prompt laughter, but rather anger. My research shows that even children and young teenagers do relate to this concept, treating it as the epitome of the whole set of anti-IVF arguments present in the public discourse in Poland. Here is an example of a young teenager referring to stigmatizing concepts:

People seem to think that this method of conception, it influences a child, that it is disabled later on. I am really not disabled, or anything like that. But then I hear on the radio that they say something, something that we have creases and crooked legs and other things like you said... they're idiots. (Sylwia, 13)

Sylwia, like many other children and their relatives, clearly sees the concept of the tactile crease as a form of stigmatization. She recognizes it, cites it, but also refers to it as to something harmful and anger-provoking. She uses both rational and personal argumentation in saying, "I am really not disabled," and an emotional response, as she contends: "they're idiots!"

Conclusion

IVF might be understood as an infringement upon an existing order of beliefs about how reproduction should occur. Members of modern societies have to face this new reality. As Anthony Giddens (2001) has written, routine plays an important role in maintaining a sense of security, also on the collective, communal level. Accordingly, new medical developments like IVF are treated, especially by

conservative institutions like the Catholic Church, as a threat to these old routines. This possibly explains why reactions to IVF are so fervent and often violent.

The concept of the tactile crease as a cultural phenomenon appears to be unexpectedly strong in scope and power. Especially considering that it is fairly new and that it was coined by a scholar who is neither very popular, nor widely recognized. This concept expanded boldly on the fertile ground of the anti-IVF discourse in Poland. It has provoked further questions, without any clear answers. How to study something that is so elusive, both visible and invisible, both tactile and non-existent? The tactile crease is somehow similar in its structure to other types of difference. For instance, physical differences like the ones claimed to be characteristic of Jews or non-heteronormative people have many similarities: they are also elusive and impossible to trace, although there are “some people” who allegedly can recognize them at first sight. How far and how broadly has the concept of wrongful conception spread? Can we follow it and find out whether this anti-IVF imagery arises from earlier concepts? And, finally, can an opposite mythology be built, and if yes, on what basis, when the rhetoric of hope (Mulkay 1993) is apparently weak and not sufficient?

According to Longchamps de Bériér, the tactile crease marks the foreheads of children conceived with IVF. This is a political category, used in the national debate over ARTs; it is both compelling (because it resonates within the society) and critically weak (because it does not refer to any actual reality). It is not possible to point to any visual representation of such a crease. There are various interpretations of the origins of this concept, but pinpointing its origins would not bring us closer to understanding its salience. Politically-driven otherness materializes here in the imagined “Other”: the body of the IVF-conceived child. This concept is powerful not only due to its similarity to other visual markers of otherness throughout culture. Rather, its strength derives from how it resonates among those directly involved: IVF-conceived children themselves.

Notes

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- 2 Longchamps de Bériér used the term *bruzda dotykowa*, which is difficult to translate because it does not exist in medical terminology. I use here, as an analogy, the single transverse palmar crease, which, as I will show later in the text, is one of possible sources of the concept presented by Longchamps de Bériér.
- 3 Many studies in the medical sciences concerning the health of IVF-conceived children are available. Overall, either there are no differences reported, or they are insignificant. Some meta-analyses show the slightly higher incidence of rare genetic diseases, but it is not necessarily linked with the method of conception, but with the parents' age, due to the duration of infertility (see e.g. Rimm, Katayama & Katayama 2011; Savage et al. 2011; Ericson & Källén 2001). Some research has shown that children conceived specifically with ICSI (intracytoplasmic sperm injection) technology may be slightly more prone to some genetic diseases (Bonduelle et al. 2005). Some differences in health between IVF-conceived children compared to others are caused by the fact that IVF results more often in twin or multiple pregnancies, leading to lower birth weight or premature birth (Hvidtjørn et al. 2010; Friling et al. 2007; Bonduelle et al. 2005). At the same time, research shows that children who were conceived with the use of ARTs develop intellectually, cognitively, in terms of neuro-motor functions etc. just as well as other children, or even better than children from control groups (Place & Englert 2003; Middelburg et al. 2008; Knoester et al. 2007). It is worth noting that IVF-conceived children tend to come from families with higher economic and social capital than the average (especially in countries where IVF is not state-funded), which may influence their wellbeing.
- 4 “Crooked” legs and other “horrible defects” in IVF-conceived children were described by Jerzy Zelnik, a popular Polish actor, known for his conservative views, in a TV interview in 2015. Zelnik apologized for these words, but they strongly disturbed the families who used IVF.

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