

Trauma and Motherhood in Contemporary Literature and Culture

Edited by Laura Lazzari and Nathalie Ségeral

Creative Part

Online Supplement

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The Editors

Laura Lazzari is a researcher in the field of motherhood studies and the medical humanities. She is a scholar at the Catholic University of America, at Franklin University Switzerland and at the Sasso Corbaro Foundation for the Medical Humanities, Switzerland. She holds an M.A. and a Ph.D. from the University of Lausanne, a Master of Studies in Women's Studies from the University of Oxford, and an M.A. in Teaching from the SUPSI (University of Applied Sciences and Arts of Southern Switzerland). She taught at the universities of Lausanne, Fribourg and Franklin in Switzerland, at George Washington University and at the Catholic University of America in the USA. She is the 2015–2016 recipient of the AAUW (American Association of University Women) International Postdoctoral Fellowship in the Department of Italian at Georgetown University. Lazzari is an affiliate member of the Motherhood Project at Maynooth University and of the Centre for the Study of Contemporary Women's Writing (CCWW) at the University of London. Her current research revolves around representations of pregnancy, birth and postpartum in Western contemporary cultures and societies. She has written a monograph on Lucrezia Marinella in 2010. In the last few years, she has been working extensively on motherhood and taught courses, written articles and organized interdisciplinary conferences related to this topic. Among her publications is a special volume on "To Be or Not to Be a Mother: Choice, Refusal, Reluctance and Conflict. Motherhood and Female Identity in Italian Literature and Culture" (*intervalla* 1, 2016). She is working on a textbook on *Reproductive Justice and Literature* for Palgrave Macmillan.

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List of Contributors

Marta Baiocchi was born in Rome, Italy, where she lives. As a researcher in stem cell biology, she received part of her training in the US, and later worked for several private and public research institutions in Italy. She holds a position at the Italian National Health Institute. Aside from her scientific activity, she writes fiction and non-fiction books. Her novel *Cento micron* [One hundred microns] was published in 2012 by minimum fax, and her popular-science book, *In Utero*, was published in 2018 by Sonzogno.

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Carlo Antonio Borghi was born in Cagliari in 1949. He studied Archeology and Art History. He put his skills into practice by founding cultural and countercultural cooperatives. A situationist performer, body artist and metamorphosist, he exhibits and stages sequences of narrative art, in which the protagonist is the artist's body. From 1979 to 2003 he directed the Cultural and Editorial Activities Office for the Superintendence of Cultural and Environmental Heritage. He writes for cultural newspapers and magazines, and collaborates for Radio Rai and for television, theater and urban dance. He writes screenplays for fiction and documentaries.

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Adalgisa Giorgio holds an Honorary Lectureship in Italian Studies at the University of Bath after recently retiring from a Senior Lectureship at the same university. She is a member of the Steering Committee of the Centre for the Study of Women's Writing (CCWW) of the Institute of Modern Languages Research (University of London). Her research is on post-1968 Italian women's writing, especially Fabrizia Ramondino and Marosia Castaldi, with a focus on motherhood and the mother-daughter bond; post-1993 narratives on Naples; and Italian migration to New Zealand. Her recent publications on motherhood have ensued from the activities of the AHRC-funded "Motherhood in post-1968 European Literature Network" of the CCWW (directed by Gill Rye): a co-edited special section of *Women's Studies International Forum* (2015) on mothering and migration in Europe; a special section of the *Journal of Romance Studies* (2015) on motherhood and work in Italy; a co-edited volume *Motherhood in Literature and Culture: Interdisciplinary Perspectives from Europe* (Routledge 2018). Her articles on Māori-Italian identities have appeared in the *New Zealand Journal of Psychology* (2019) and *Social Identities* (2020).

Alexandra Kimball is a journalist and author who lives and works in Toronto. Her essays and journalism regularly appear in Canada's top publications, including *Hazlitt*, *The Walrus*, *Toronto Life*, and *The Globe and Mail*. With a background in academia (PhD, Western University, 2007), she uses feminist literary theory and history to interrogate myths around infertility, motherhood, and femininity from her personal standpoint as a survivor of infertility and a parent via third-party reproduction. Her essay on miscarriage and feminism, "Unpregnant," was a finalist for the Canadian Newspaper Award for best long feature and was the second-most-read feature on *The Globe and Mail* website for 2015. Her first book, *The Seed: Infertility is a Feminist issue*, was published in 2019 and was widely discussed by feminist and mainstream media online,

including *Nylon*, *Bustle*, *Rabble*, *CBC*, and the *Toronto Star*. An excerpt from *The Seed*, “The Loneliness of Infertility,” was anthologized in *Best Canadian Essays 2020*. She is currently working on a second book about the mythology of the “natural mother” in digital-era pop culture.

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Eliana Maestri is Senior Lecturer in Translation Studies and Director of the Centre for Translating Cultures, University of Exeter. Her research focuses on the interplay between translation, mobility, gender, and visual culture. She was the recipient of a British Academy Rising Star Engagement Award to co-organize the 2019 Exeter Translation Festival and of a 2019 Europe Network Grant (Global Partnerships, Exeter) with KU Leuven, Belgium, to study street art. Previous awards include a EUOSSIC Erasmus Mundus Post-Doctoral Fellowship in European Studies, University of Sydney (2011-12), and a MEEUC Research Fellowship, Monash University, Melbourne (2014). She has published on interpretations of Europe among migrants in Australia, on translations of mobile traditions into Italian Australian folk music (with Rita Wilson), and translations of languages and cityscapes into the visual arts. Her monograph *Translating the Female Self across Cultures* appeared in the 2018 John Benjamins Translation Library.

Eleonora Mazzoni is an Italian actress and writer. She holds an MA in Literature from the University of Bologna and graduated in Acting at the School of Theater of Bologna. Her first novel, *Le difettose* [The Defectives], sold more than 15,000 copies. The play based on the book made its debut in 2014 – directed by Serena Sinigaglia, casting Emanuela Grimalda – and is currently on tour. In Germany, the play *Die Defekte* was directed by Guido Versteegen and staged with Doris Gruner. In 2018, her novel was translated into French by Paola Casadei with the title *Les Fivettes*. In 2015 she published *Gli ipocriti* [The Hypocrites], and, in 2016, *La testa sul tuo petto* [The Head on Your Chest]. Mazzoni collaborates with several Italian magazines and writes screenplays for TV series.

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Nicoletta Nesler and Marilisa Piga are two Italian authors and filmmakers. They met in Sardinia in 1991. That same year, they started a collaboration, first in Rai radio studios, later by making a few documentary films for Rai Tre's series "Storie Vere" [True Stories]. The authors share a common passionate search for an innovative language to deal with major social topics – particularly the condition of people with disabilities. In time, the scope of their work has widened to follow new pathways to represent reality, by casting light on relationship stories and experiences. Their main project is currently the *Lunàdigas*, focusing on women who are voluntarily childless. As childfree women themselves, the authors explore the reasons for a choice that is never light-hearted, but barely talked about, or that is kept hidden. *Lunàdigas* is a Sardinian word used by shepherds to define female sheep that do not bear lamb.

Filmography on Childlessness

Nesler Nicoletta and Marilisa Piga, dirs. *Lunàdigas*. Italy: Pierrot e la rosa. Kinè.

The *Lunàdigas* Project. <https://www.lunadigas.com>

Daniela Travaglini is a qualified freelance translator and subtitler, who graduated from the Institute of Linguists in London. She mainly works with audiovisual projects and loves to engage with the authors directly, in order to find the best rhythm between text, images and sound.

Alice Warshaw was born in Los Angeles, USA and grew up in Santa Cruz, California. She graduated from Grinnell College and moved to Rome, Italy where she has lived for the last 30 years. Her professional life includes translation and language instruction.

Part 1

The Lasting Trauma of Miscarriage and Infertility

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**Laura Lazzari & Nathalie Ségeral
in conversation with Alexandra Kimball**

What was your agenda (if any) when you started to write your article (“Unpregnant”) and book (*The Seed*)?

I wanted to explore my own feelings around grief and loss and why I felt particularly conflicted around these feelings as a feminist who had been very involved in my generation’s activism for reproductive rights. Both miscarriage and infertility were socially taboo subjects for women because of the history of misogynistic thinking around women’s bodies and reproduction. Yet, both topics had been neglected by not only the mainstream feminist movement, and the reproductive rights platform, but also by feminist discourses that were specific to health, like the second wave health collectives. Why? I wondered if I were to trace the history of feminism and infertility, if I might get at the complicated nature of my grief. And of course, I was interested in adding to the stories that were already out there about these forms of loss, because they had helped me tremendously in my own grief. I wanted to write one of these stories myself, to add to the dialogue that was already out there about loss and infertility, by telling my own story in my own way.

Your essay “Unpregnant” and your book *The Seed* constitute hybrid texts that mix autobiography, essay, and have a clear feminist agenda. What is the best definition of the genre of these writings: autofiction, creative fiction, cross-genre/hybrid genre...?

That’s a great question! I think they are essentially personal essays, or literary non-fiction. I tried to use my own story as an entry point for discussing larger cultural issues, and a bit of history and mythology. To some extent that was necessary for these pieces, because miscarriage and infertility are both highly intimate, personal experiences as well as cultural flashpoints for collective anxieties around femininity, reproduction, and motherhood.

Autobiographic accounts are common in readings about motherhood, infertility, miscarriage and childlessness. Autobiography is also central/instrumental to your work. What are the strengths and drawbacks of autobiographical accounts related to stories of motherhood and non-motherhood?

Everyone has wildly different experiences of infertility, miscarriage, childlessness and motherhood. So, on the one hand, the first-person voice is really the only available mode for a writer to discuss something so individual and variable. In the *Seed*, I explore the work of Catherine Opie and Frieda Kalho through the lens of their childlessness, and it’s obvious that they had very different experiences with it: different preoccupations, different concerns, their grief was colored differently according to who they are as women and artists. You can’t learn about childlessness per se when viewing their art, but you can learn about what childlessness meant to each woman.

In a way that's more important, because it highlights how much influence things like culture of origin, class, race, sexual orientation, and era can have on how and why we want the things we want, including motherhood.

On the other hand, the first-person voice in essay writing, insofar as it is generally associated with women and things that are generally associated with women are taken less seriously, I think there's a risk in over-emphasizing the personal aspect of miscarriage and infertility narratives. Framing infertility as a "personal journey," as people frequently do, can depoliticize it, and obscure all the power relations that are in play every time someone wants to have a child but cannot. For example, with the exception of a few limited services, there is a lack of funding for fertility treatment in Canada, which has a public health care system. Black women in the US face higher rates of infertility than white women and the conditions they disproportionately suffer from are under-researched. When there's a strong "personal journey" angle to writing on miscarriage and infertility, it can obscure urgent issues like these. I tried to do both in *The Seed*: be very intimate and centered within my own experiences, and treat these issues as "serious," "objective" issues of broad policy and ideology.

Your writing discusses the role and importance of online support groups. These groups had a big impact on your own life when you went through miscarriages, ART and surrogacy. Twitter and Facebook have created alternative spaces to give a voice and offer support to women who had been previously silenced. However, instead of bringing women together, create empathy and understanding, antagonism is often emphasized in order to prove that a certain lifestyle is better than another. You have often been attacked for your opinions and had to defend and justify yourself for your choices. Will women eventually find a common ground and respect choices made by other women even when they are different from theirs?

I think as long as motherhood is seen as the pinnacle experience of womanhood, we're not going to see a lot of co-operation and support among mothers, or people who are struggling to become mothers (or choosing not to become mothers, for whatever reason). The stakes are too high, because when we're discussing reproductive choices, or parenting choices, we're actually discussing the ways in which we've decided to be a woman. Dismissing or disparaging another woman's choices around fertility and motherhood is a very old way of questioning their femininity, and therefore, asserting one's own. What if these choices were decoupled from the big feminist question of what a woman is? What if the choice about whether or not to breastfeed or co-sleep was seen as being as personal and largely meaningless as whether or not to, I dunno, have a waffle or cereal for breakfast?

That said, I think the "all choices are valid" form of market-friendly mainstream feminism has manifested in some deeply anti-feminist ways, and I never saw this more clearly than when I was in those ghoulish infertility groups on Facebook. Everyone — including me— was there to overcome some sort of medical obstacle to have a baby. But unlike other medical support groups online, which I've also been in, there was no sense of collective action against the disease, absolutely zero discussion of this as a complicated social problem that was larger than any individual's personal struggle. The groups functioned more like little purgatories, or holding pens, for women who were waiting for their pregnancies and babies, and the dominant ethos was to do "whatever it takes" to "fulfill your dream" of motherhood. What that meant, in turn, was that

members were required to support other women's feelings and choices around their treatment no matter what. I remember one harrowing conversation in an infertility group in which a woman was trying to get pregnant, despite this being discouraged by her doctor for medical reasons, because she "needed to give [her husband] a son," and everyone else just had to support that and cheer it on. That really clarified for me how the nominally-feminist discourse of women having choices, and supporting other women in all their choices, was not only meaningless but possibly harmful without there being a simultaneous awareness of the political and social context – in this case, the historical construct of motherhood as the pinnacle female experience – in which these choices emerge.

I'll note that, though I didn't discover it until the end of my treatment, that there is a very feminist and smart infertility community on Reddit; it's the one I recommend to people who are looking for online support. It's a younger group of infertile women, which gives me a lot of hope for how the discourse of infertility is changing among patients.

In pronatalist societies, negative stereotypes on childfree and childless women are still widespread. Feminist discourses have traditionally supported and promoted a revolt against maternity. Infertility, however, has not yet been part of the discussion and your book is filling this gap. If childfree women seem to have found their place in feminist groups, infertile women still struggle to make their voice heard and were failed by mainstream feminism. A similar fate awaits mothers who make parenting choices that are not in line with mainstream feminist ideals, such as extended breastfeeding and attachment parenting, to mention just a few. Which challenges does feminism need to face in order to represent/include all women in our contemporary world and societies?

I think intersectionality here is very important. In *The Seed*, I brought up how Reproductive Justice activists, Black and Indigenous women, mostly, critiqued the narrow focus of the white feminist reproductive rights movement, and sought solutions for women, largely women of color and poor women, whose options for maternity were limited. For example, there is a history of forced sterilization of women of color and poor women, forced adoptions, and larger social conditions that make it difficult for them to have and raise families. It's not random that women of color in North America and abroad have higher rates of infertility, because of systematic lack of access to proper health care, and the fact that medical research is conducted on patients of private fertility clinics, who tend to be the women who can afford these clinics, e.g., white middle class women. Listening to Reproductive Justice activists, for white feminists, means listening to stories about women who — in contrast to the standard reproductive rights discourse, which stresses not becoming pregnant or mothering — want to become mothers, who want changes that will help them conceive, birth, adopt, and parent safely. Similarly, transgender feminists have done tremendous work around very key questions of essentialism and bodies that I basically never see in mainstream discussions on infertility. Trans-feminists are brilliantly deconstructing the idea, which is very harmful to infertile people of all genders, that a woman is a working womb, and that motherhood is an instinctive biological imperative. The vision they offer is one of a truly liberated politics of reproduction, one in which a person's capacity for pregnancy or birth or parenting is not a function of sex or gender, and I think that's exactly where all feminists need to be on this topic now. When we incorporate these different perspectives into our thinking about infertility, I think

we automatically start moving away from the very limited construction of motherhood = patriarchy = bad.

According to Blook and Pebley (1982) childless women are divided into three different categories: childfree (voluntary childless); temporarily childless (do not have children but will have them in the future); involuntary childless (unable to have children). What are the differences in the way childless and childfree women are perceived in today's society? What are the challenges faced by these women?

Society is still largely organized around the nuclear family, and there is the sense that a proper citizen, if not a proper person, is a parent. This can be very invalidating for anyone who does not have children, whether by choice or circumstance. People who are involuntarily childless have their own personal grief on top of this, but I think all childless adults are somewhat marginalized in societies that valorize the nuclear family. I think a lot of people still think that a household of one or two people aren't a "real family," for example, and that women without children are lacking a certain experience of bonding or love that qualifies them to care about issues involving children or other vulnerable people. I'd love to see more general respect and care for adults without children, regardless of the reasons they don't have them.

Trauma related to childbirth, childlessness, miscarriage and infertility is common. In your opinion, how could trauma be avoided in the first place and/or healed?

I can't speak to childbirth trauma, but in Canada and the US, fertility treatment is private, though there might be limited coverage through insurance or public health care plans. But generally, you have to pay for treatment. What happens when fertility treatment is considered non-essential, I think, is frame miscarriage and infertility less as legitimate health issues than frivolous desires. Getting IVF is like getting a boob job, and that adds to the general sense of shame and taboo around the topic, and that itself can be traumatic. I remember a comment on one of my stories, which addressed the lack of funding for fertility treatment in Canada, which really summed up the common attitude towards infertility among the (fertile) public: "we should not pay for people to have children because no one is entitled to a child." I was really curious about the word "entitlement," because usually we use that word to describe people who want very extravagant or unusual things, not things as basic and common as a functioning reproductive system or a family with children. I doubted that this same person would argue against providing wheelchairs to people with disabilities because "no one is entitled to mobility," for example. What the word "entitlement" showed me was that people see infertility as a type of malaise of the privileged instead of a legitimate medical complaint, and I think it's absolutely a result of the fact that fertility treatments are not funded in the way other medical treatments are. This is a long, roundabout way of getting at the fact that when infertility or miscarriage grief is invalidated — seen as frivolous and unimportant compared to complaints around other losses or medical issues — it leads to shame on top of all the other feelings, and that's a recipe for trauma.

Your book and article are inspired by your own personal and traumatic experience. Could you talk about the process of recovery? How the act of writing and talking openly about your own experience helped you in the process of healing?

I am prouder of how I dealt with my miscarriages and infertility than I am of anything else I have done in my life. I hope that doesn't sound arrogant to say, but when I look back at how both I and my partner approached it — by talking about it openly with each other, our family and friends, and eventually publicly through my writing — I'm pretty amazed at how we were able to maintain our integrity through all the grief and longing. It didn't destroy us; I think that's really amazing. I didn't think I was capable of that kind of strength and persistence, but I was.

This is a very unpopular idea, because the dominant sentiment in infertility spaces is that having a child doesn't solve infertility, but the truth for me is that having my son did resolve my grief. My own trauma had less to do with not being able to experience birth or biological parenting than it did with not being a parent, so when my son came along (via donor eggs and surrogacy), it really took care of the sense of disorientation and deprivation that made up the bulk of my own trauma. However, I know other women who used third party reproduction to have their babies and they still feel a lot of grief, because for them, what they really wanted was to have a biologically connected baby, carry a pregnancy, etc. Having a baby helped them but didn't resolve the main thing they were grieving. But it did solve mine, and I feel reasonably certain that had we not had my son, I'd be generally ok but would have ongoing issues with trauma and grief.

At various points in my life, I've had to recognize that often trauma will indeed go away, leaving only a faint trace, when I got what I wanted. This is something we don't like to acknowledge about trauma, because I think we're invested as a society in the idea that grief is this universal leveler, something everyone experiences similarly regardless of who they are or what positions they occupy in society. It's a kind of a fairy tale narrative of trauma and grief, a way to get something good out of these experiences by imagining that they link us to all of humanity. Like there is a fundamental human experience of sorrow that unites us all, and by extension, a fundamental human experience of recovery, which is never quite complete, because grief is more or less "natural" and beyond our control. But the more difficult reality is that I had to grieve a lot less than most other women who go through what I did, because I had the financial and social resources to get what I wanted, which was to be a parent. Being able to actually get what I wanted had a far larger impact on my emotional state than all the counselling or community support in the world. And that's unfair, that something like grief should be so dependent on one's position in a capitalist economy. I think that's why we cling to the romantic idea of universal and unsolvable grief. If we pretend that grief is something that is so big and natural nothing can ever solve it, we can avoid having to challenge the social structures and conventions that make it very easy for people like me to recover but impossible for others.

That said, writing helped me process my trauma as well, and it always has. I'm sure psychologists would be able to tell me more about why, but it really is something I've always done, and make a point to do whenever something even minor is on my mind. Usually, the writing process helps me zoom in on a very deep, key issue that was hidden, for example in this case, the persistent invalidation of or derision towards infertile women. When I was able to identify that and research it and write about it, it felt like I had a say about this discourse that had such an influence over how I was experiencing my infertility and childlessness.

Part 2

Healing the trauma of IVF

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The Defectives

Eleonora Mazzoni
Translated from the Italian by
Adalgisa Giorgio and Eliana Maestri

August 2020¹

I wrote my debut novel, *Le difettose* [Defective Women], while I was trying for a child who was taking a long time to come. It was a way to claim as mine an experience that continued to elude me. I also wanted to tell the story of the many women who had accompanied me on this journey. In forums, hospital waiting rooms, in everyday life, I came across hundreds of women in my situation. An apparently invisible world of underground, almost clandestine people, but, in reality, a densely populated world, vibrant, multifaceted, transversally diverse from a cultural and social point of view. And bound to grow more and more. It's a fact: one couple in five in the so-called industrialized countries struggles to procreate, so much so that the World Health Organization has defined infertility as a social disease.

That's why I created the character of Carla Petri, a woman who at the age of thirty-nine years and two months has almost everything, except a child. Her body, refusing to perform one of its primary functions and betraying the will of the person who inhabits it, gave me the opportunity to delve into themes that were important to me.

First of all, the theme of time, which is so closely bound with femininity and so relevant to our times. From the 1970s onwards, that is to say since motherhood became a choice and was no longer the inevitable destiny it had been for centuries, we have been freer to make our own decisions, more aware and more in charge of ourselves. We want to study, to fulfil ourselves at work and in society, to be independent, financially and in other ways. In short, we want the place in the world that has been denied to us for a long time. And we often also want a child.

But nowadays, no, we no longer think about having children when we are twenty, when there is still so much that we want to explore. At the age of thirty, when the biological clock starts sending out signals that we can no longer ignore, it is often the case that we don't have a house yet, or a proper job or a good enough salary. And often we don't have a man. Sometimes we have a job, but it isn't the right one, or we might have the right job, but the man is missing. And when

¹ The first piece in this section was written by Eleonora Mazzoni specially for this volume.

there's a man, he isn't the right one. Then, when the right man turns up, the time is no longer right.

The fact is, our life expectancy has increased significantly, but our fertility has not: it is still the same as that of the cave women, reaching its peak between the ages of twenty and twenty-five. After this, it starts to decline. Slowly and inexorably: you cannot have an ovarian lift the same way you get a face lift. And that's not all. Pollution, stress, too much estrogen in the meat we eat, too many electromagnetic waves in the air we breathe, plus a few more little things that we haven't quite worked out yet, have severely reduced our reproductive capacities.

It is for this reason too that, when a diagnosis of infertility is unexpectedly flung at us, we are hurled into a tangle of emotions that is difficult to unravel. Used as we are always to be in control and always to be the winners, we imagine that we can obtain, eventually and with a bit of effort, everything we desire. We are, therefore, surprised, astonished, almost incredulous, when we discover that we are inadequate to perform what is, apparently, the simplest thing in the world. We get angry, despondent, frustrated. We feel resentful. We don't think we deserve such an unfair treatment. We see ourselves as the missing link in a centuries-old chain, we feel excluded from the flow of life. We don't know who to blame; sometimes we blame ourselves, other times our partner or fate. We lose our usual self-esteem. We drown in a pain as intense as when we suffer a bereavement. The loss of a "potential life," of a child who has never existed except in our thoughts, cannot easily be shared with others. But, if it remains unspoken, if it is lived in solitude, without consolatory rites, it can unleash a sense of incompleteness so strong that it may even trigger suicidal thoughts.

Moreover, in archaic societies pregnancy and birth were considered propitious events, associated with fecundity of land and abundance of crops, whereas infertility, like famine, was considered God's punishment. It was always the woman who was at fault, who was ostracized, who could be repudiated and replaced. These are centuries-old legacies which we, emancipated women, still carry on our shoulders.

But today there is a new aspect to the question. And so, I now move on to the second theme on which I think it is useful to focus our attention, namely procreative practices in the third millennium. Our era has fought the atavistic punishment reserved to women with especially powerful weapons. In the past we used to accept the pain caused by failed motherhood as inevitable, with resignation, whether we liked it or not: it was perhaps more tragic, but also simpler. Today's medicine has, instead, made tremendous strides, offering us new and unprecedented possibilities and bold solutions.

We no longer take for granted, for example, that we are the genetic owners of our children and, thanks to male and female gamete donation, we are now in the middle of a dynamic process of genomic miscegenation. For centuries we have had in place only one model of woman-mother-family, but this is now crumbling fast, making space for new forms. New ways. New worlds. Our dictionary doesn't include entries that conceptualize relationships that didn't exist until a few decades ago. Single mothers. Lesbian mothers. Surrogate mothers. Donor mothers. Recipient mothers. Legal fathers. Biological fathers. These terms convey too little. We also need new words.

Considering all of these scenarios, it is wise not to harbor false anxieties. And not even false hopes. Why does one embryo implant and another doesn't? Why did it work for her and not for me? Although science offers so many opportunities, there is no guarantee of a result. Medicine has pushed its boundaries but has not removed them. Conception and birth do not only obey

statistics, probabilities, percentages, calculations, strategies: they are free, abounding in possibilities and unpredictable. It is crucial to know how to move through this delicate space of high emotional resonance, without blindly surrendering our bodies to a team of doctors. It is crucial, instead, to mobilize our own personal resources because it is only through them that we can overcome the sense of failure that we may experience and be led to a deep self-reflection.

And here I come to the third and, in my opinion, essential point. Desire. To desire a child so badly, what is it about? Is it a deep-seated need or only foolish stubbornness? Is it a genuine feeling or is it induced by society? Is it a whim? And can it turn into an obsession or, worse, into a pathological condition?

The desire to have a child, always complex and ambiguous, is without doubt a special desire. Even though motherhood is not necessary for women to feel complete and is not a need felt by all women, even though it may be realized in different ways and not only through giving birth to children, having a child is a huge, irreversible and irreplaceable experience, an experience that reaches into the depths of our female identity and is in fact one of its biggest and most articulate expressions. As a result, failing to fulfil this desire is not the same as not realizing other desires. At one time people were prepared to buy newborn babies. Even to steal them. And although today not to have children has become more acceptable and carries less stigma than in the past, the issue has not gone away.

This is also because, in a society that considers children sacred, how can we accept that we are incapable of fulfilling a desire that is so basic and within everybody's reach? How do we bear the burden of not "making it?" How do we manage our frustration? How do we face "the disappointment of disappointing" our own and other people's expectations? We, who are asked to be so productive and performative?

In *Le difettose*, I gave Carla two special guides. On one side, there's her grandmother, who, having gone through a real loss, that of her first-born child, finds the inner strength to overcome the long breakdown that she suffered as a result and moves on to a new life. On the other side, there's Seneca, with whom Carla engages in imaginary dialogues which are, in fact, dialogues with herself and with that part of herself that is wounded and battered, a part of the self from which it is so easy to become disconnected. We must also look the possibility of not becoming mothers straight in the face. This is very painful. But we must face up to reality, even a hostile one. And be capable, in spite of it all, to feel compassionate and understanding towards ourselves. We must also summon up a bit of love for our frailty, instead of striving to be always indomitable and ready to fight. We must readily accept the imperfection of our existence. There are two fundamental life principles that fight against each other: one that transforms and modifies things for the better, the other that "takes it as it comes." We need both. Without improvement we become passive and negligent. Without acceptance we fall into obsession.

Nowadays we only value fullness, satiation, gluttony. The society of efficiency demands results. If we don't get results, we feel insignificant. Instead, our finitude is the foundation of life. Our limits must not be understood as a deficiency to be overcome at all costs, but also as that which distinguishes us as human beings. We must therefore learn to make space for what we don't have and turn it into a growth engine. Anxiety should not be sanitized, as Rilke said, because *what ultimately protects us is our being without protection*.

In a Japanese tale, an elderly couple without children discovers by chance the fountain of youth. When the wife sees the beautiful transformation of her husband after he drinks from the

fountain, she thinks that she too can go back in time and finally become a mother. And so, she goes to the spring, and greedily drinks, drinks, drinks. In the end, instead of a rejuvenated wife, the husband finds a frightened and shy little girl hidden behind a bush. Knowing the exact amount of water we should drink is certainly not always easy. Life runs on the thin edge of a blade.

At the end of the novel, Carla does not get pregnant. I did in real life. It happened a few weeks after I sent the novel out to the publisher. I chose not to change the ending: in the last pages my protagonist reaches the point of no longer feeling “defective.” She gives birth to herself. By her side she has the children she has given birth to with her heart rather than her womb. She teaches Latin language and literature, and her children are her students, her books, a renewed relationship with her partner, her reconciliation with her elderly mother, of whom Carla becomes almost a mother.

At the end of the day, we can say that we have won the battle only when we no longer think of ourselves as either lacking or deficient. Or guilty. And the transformation of a great difficulty into a beautiful opportunity seemed to me the most appropriate happy ending.

18 January 2013²

Carla Petri, the protagonist of *Le difettose*, almost has it all: she is beautiful, has a great partner, a stimulating job (she is a professor of Latin literature), but she has not yet managed to bear a child. For a woman like her, so used to getting what she wants, this failure is the cause of ongoing pain that leaves her helpless. Furthermore, she is already thirty-nine years and two months old and is aware that her biological clock is ticking. She must hurry up and act before it is too late.

Carla is undergoing IVF treatment. She puts herself through doctor’s appointments, blood tests, hormone injections, anesthetics, egg collections and embryo transfers, in the hope that science will correct a defect of nature.

Defective women: Carla, Licia, Katia, Paola, Emanuela and all the other women, even younger ones, who fill up the waiting room of the assisted reproduction unit, are hopeful. But, while they have high expectations, they also have to reckon with heart-breaking disappointments. Defective women: that is to say, women unable to fulfil the role for which they have been biologically programmed.

However, here, in their world, the “fivettare” [the “IVFers”] experience friendship, understanding, comfort and mutual support. A real form of sisterhood. Like a big family. When they realize that they are not alone, that there are so many other women in their situation (one couple in five experiences fertility issues), they start feeling a bit less “defective.” You only need

² The short piece by the author and the passages from *Le difettose* that follow were originally translated for an author-reading event of the Centre for the Study of Contemporary Women’s Writing of the Institute of Modern Languages Research (then Institute of Germanic and Romance Studies), University of London, on 18 January 2013. The event was part of the third Workshop of the AHRC-funded “Motherhood in post-1968 European Literature Network” entitled “Changing Models of Motherhood.” Eleonora Mazzoni’s participation was funded by the Coffin Trust. The original translation, intended for the live event, has now been revised by Giorgio and Maestri for publication. The event consisted of a brief presentation of the author and the novel by Adalgisa Giorgio, Mazzoni’s own short introduction to her novel, her reading of selected passages in Italian, and Eliana Maestri’s reading of the same passages in English. The podcast of the event is available online at: podcast.ulcc.ac.uk/accounts/SAScasts/writers/4_2_MP3_for_Audio_Podcasting.mp3.

to tell someone what you are going through to find out that your friend's sister or a friend of a friend or your sister's friend is going through the same experience. There are online forums and chatrooms where one learns, vents, and follows these women's daily lives. They are a colorful group of eccentric and stubborn women, strong and fragile at the same time, that have become unpredictable as a consequence of the fertility drugs they are on, bloated by hormones like battery hens, and constantly at war with the stork. But despite all of that, they are always ready to comfort and listen to one another.

Carla's desire to have a baby grows out of control and becomes an obsession. It is her one and only thought, the only thing that keeps her going.

On her journey in search of motherhood and in the attempt not to lose her sanity, she relies on two special guides: Seneca, the subject of her research, with whom she has imaginary conversations on time, disease, old age and death. And grandmother Rina, brave and unconventional, who has used the pain encountered during her life to turn from a fragile twig into a solid oak.

Le difettose is not just a novel about artificial insemination. It is a book about our desires, the difficulty of making them come true, why we pursue and abandon them, the price we are willing to pay. It is about feeling fulfilled, about willpower not being enough to achieve our goals, and about the relationship with the imponderables that control our lives, what we call destiny, karma, or God. Or luck, as defined by the Latins.

Carla embarks on the path towards knowledge: in her quest for a child, she ends up finding herself.

Excerpts from *Le difettose* [The Defectives]

Chapter 2 (Mazzoni 2012, 9-10)

For us, IVFers, "code red" or "nasties" stand for menstruation, "gynos" simply for gynecologists, "homework" or "the marathon" for timed intercourse. After the embryo transfer, we say that we "sit on eggs" and on the tenth day after ovulation we start to "pee on a stick." In our language, we don't get pregnant, we "are pecked by the stork," also referred to, with a touch of disdain because she doesn't peck very often, as "the feathered creature," and when she finally pecks us, we say that we become flesh of her flesh and are "storked." And off we go with acronyms of all sorts: IVF, IUI, ICSI, EUP, ACU, PO, PM, PGD. We sound like schoolgirls speaking a secret language of our own to exclude grown-ups who don't understand our world. Every day I get obsessively bogged down in online forums for women that are trying for a child. Their conversations sound like teenage diaries, pouring out frustrations, shocking secrets, mutual support, "girls-I-love-you-all," "I-am-fumbling-in-the-dark-but-thanks-to-you-all-I-go-on" and "now-I-am-sad-and-empty-but-luckily-you-are-all-there-for-me." To hell with all those insensitive little doctors who erect barriers around themselves to block out our worries and fixations of women who can't procreate.

I have surfed the net as "Kikka75" (the number is the year I was born, sort of: I have knocked five years off my age) and found out that you can adopt embryos, that is to say you can carry an egg-cell that is not yours and has been fertilized with sperm that is not your husband's, or you can have your egg-cell fertilized with the donor sperm of an unknown man, have

an egg-cell of an unknown woman fertilized with your husband's sperm, and have your egg-cell fertilized with your husband's sperm and then have it implanted into the rented womb of an unknown woman who will carry your child to term. If you are in a lesbian relationship, your eggs may be collected and fertilized with donor sperm and then implanted into the womb of your partner. Or if you are a gay man, the egg of a donor can be fertilized with your sperm and be implanted into the rented womb of another woman: after nine months you take home a baby, complete with official certificates. And if you're single or don't want a partner, with a bit of cash you'll be able to make a baby all by yourself.

Nowadays five per cent of the human species is conceived in this heterogeneous and promiscuous lab. This is so crazy. You'd expect the family bandwagon to go off like a firecracker any minute. And after it has exploded, who'd be willing to pick up the pieces and put them back together?

Chapter 13 (Mazzoni 2012, 117)

My mother had her right ovary removed before her second child because of an ectopic pregnancy. She then went on to give birth to three more children with no effort or trouble. My rotund mother was a brood mare, a maker of the human race, an icy, sacrificial White Heifer immolated on the altar of the family for the sake of the multiplication of the species. I have spent my life protesting against her.

I remember the day when she forced me to wear a velvet outfit: green trousers, green jacket and matching tartan shirt.

"You look really smart," she said.

I didn't think so. My outfit felt too tight and yet too childish for my pre-teenage body that she insisted on viewing as that of a child. And, besides, I was a girl, I wasn't a boy, even if she cut my hair short because it was easier to keep.

I was so angry at her shortsightedness and for the embarrassment caused by that outfit which seemed to attract the curiosity of all passers-by. I detested her. I saw her clearly in her mediocrity, crushed under an avalanche of self-inflicted chores, choked by her conformist pronouncements, "this-is-allowed" and "this-is-not-allowed." I had no other wish than to move away from her, as fast as I could.

Chapter 16 (Mazzoni 2012, 139-143)

The whole of Northern Italy is covered in snow. The landscape outside the train window looks unreal. All trains are delayed and so are planes and other forms of transport. I have no commitments or deadlines and I welcome with pleasure this sudden brake on the pace of life.

My great-grandparents never left their native town. They healed their wounds by applying soil to them. They would dig up the rhythm of the universe with the rhythmic strokes of the sickle. My grandmother Rita was constantly told: "Where ya going? Stay home." Instead, she kept on grinding out the miles. Just like me. And I have often ended up nowhere.

Sitting opposite me are two fat guys of non-definable age squeezed into the seats. Even their voices are bulky. Beside me is a black woman surrounded by plastic bags, paper bags and rucksacks.

I travel light. The newspapers and magazines which I bought at the newsagent's are only meant for me to nestle into my seat more comfortably and disappear.

My attention is soon caught by the news of a showgirl now in her menopause who is about to give birth.

– I don't believe a word of it, – declares Katia resolutely on the phone.

– She claims she only got a little help, – I whisper, my head leaning against the windowpane and my hand covering my mouth.

– I've heard. A little hormone boost and then nature did it all. A lot of bonking and nothing else, no egg collection, no embryo transfer, no nothing. Who does she think she can fool? A friend of mine says she saw her in Spain, for the egg donation.

– But why would she lie?

– Because women like her do. They feel ashamed, the bitches! I can't stand them. Last week a journalist came out with a lot of nonsense about IVF on TV. She knew nothing. And she didn't care either. For her, IVF was just a fashionable topic. She made me so angry. I phoned up the TV program: "Shame on you. You should interview me, Carla or Licia. Stop talking rubbish." I screeched like an eagle.

– They must have thought you were mad.

– I'm sure they did. But believe me. That woman has some Spanish private clinic to thank.

In Italy, artificial insemination by donor is forbidden, but abroad you can buy the healthy eggs of a young donor at the peak of fertility. They are perfect for infertile women, those who are too old, cancer survivors or carriers of serious genetic diseases. You don't even need to be bombarded with hormones.

It's difficult to talk about this in Italy. If you are under pressure to keep quiet about IVF with your husband's sperm, imagine donor insemination: total silence. But many Italian women do resort to it. The secret remains behind the closed doors of family homes.

Nowadays, you must refrain from making such comments as: "The baby looks like his father" or "She's just like her mother," because the baby might be the child of the man but not of the woman or the other way around, or it could be the child of neither.

– Women in the public eye should come out in support of the cause, but they're too cowardly to do it. And they have lots of money. They get on my nerves. Do you have any idea how many couples have to give up trying at some point because they run out of money? Believe me, money is crucial for IVF. The more money you have, the higher your chances of having a baby.

– I suppose so...

– The sister of a friend of mine from Catania has just given birth after buying eggs in Barcelona for 15,000 euros. They own two pharmacies and have plenty of money. But they are members of the Catholic organization Opus Dei and they have kept it very quiet in order not to lose face.

Maybe, in future, the idea that you genetically own your children will sound ridiculous. Children will be the product of many and various intersections and daring cross-breedings. There will be an active hybridization of genomes, like the hybridization of races already underway. And, after all, what's wrong with that? There are so many dangerous and crazy parents out there looking perfectly normal. Shouldn't we be worried about them? If I'd had a baby at the age of fifteen, what kind of horrible natural mother would I have been?

A new human race will be conceived in factories that manufacture life. Every embryo could have two mothers or two fathers. Or two fathers and two mothers. Or even three mothers: the woman that decides to be a mother, the one that donates the egg and the one that rents out her womb. Men and women will no longer be singular but plural and composite. Children will be loved, desired and imagined in the hearts and bodies of many different people. There will be a multiplication of affections, an explosion of origins, a number of mysterious, nameless and absent donors vs. present and responsible parents. Stepbrothers and stepsisters unknown to one another will be scattered across the five continents. Genetic monotheism will be a prehistoric affair.

My grandma Rina used to say that one child out of three has a different father from the official one. Her next-door neighbor was nicknamed “the priest’s daughter,” because her father “ain’t the baker but the priest.” The difference is that now everything will be out in the open. There have always been babies who were “made” and then sent immediately to wet nurses, babies who were nurtured and raised by relatives and carers. Now all this will be carefully regulated.

I myself have had two mothers. My grandma is the mother I have chosen. She didn’t give birth to me but never abandoned me either.

You choose the children that you don’t manage to conceive. You choose the mothers that you don’t have.

And then, let’s be frank. We’ve already seen everything under the sky.

Rachel, Jacob’s wife, is the first woman to become a mother with the help of another woman. She is the first woman in history to hire a womb. Or, better still, Sarah, Abraham’s wife, who, before giving birth to Isaac, gives her husband a slave, Hagar, and then raises their son, Ishmael, as if he were hers. And there is Leah, Rachel’s sister and Jacob’s first wife, who straight away dishes out four sons for him, but when he no longer goes to her, she offers him her slave Zilpah, who gives him Gad and Asher. Leah then becomes old and eats mandrakes. And what are mandrakes if not hormones of olden times? And thanks to them, she churns out a few more children one after the other.

I wonder what it would be like to carry inside me a child conceived by my partner, Marco, with another woman. To have somebody else’s egg in my body would be like having the kidney of a donor. It’s better to have a good donor egg than a rotten tangerine of your own. Nowadays we transplant hearts, lungs, livers, kidneys, stomachs, pancreases, skin, corneas, hands, guts, jaws, windpipes, even faces. It’ll soon be the turn of wombs and ovaries. The baby that will come about would still be mine. I wouldn’t care that it doesn’t look like me. I would go ahead and bring it into the world.

I nearly conceived a baby with Gino last night. What would it be like for Marco to have a child that I’d conceived with an unknown man? Many fathers unable to have children would be happy. Marco, instead, wouldn’t be happy even with a child conceived by himself with an unknown woman. Not out of ethical concerns. He wouldn’t even go down the adoption route. He was the one who initially wanted a child at all costs. I wasn’t so bothered. With the passing of time he has come to terms, quite naturally, with the fact that we won’t have children: “We are not managing a child, but our love has grown. We’ll be enough for each other, you’ll see,” he has often said to me lately.

As soon as I come out of the station in Rome, the wild roar of the city brings me down to earth immediately. In order to get home faster, I catch the metro. When I emerge from the escalator, I see Marco standing a few steps away. He’s on his way home too. I decide not to call

out to him. I follow him instead, I simply want to watch him from a distance, as I'm not used to watching him, not too close, not too far.

He's so good-looking, so tall. When he walks, he's as elegant and steady as a nobleman, even though he dresses casually. In his blue overcoat bought at the Roman market of Porta Portese, he looks as if he has stepped out of a novel by Balzac. He has the kind of beauty that, when associated with intelligence, can be intimidating.

I continue to walk and watch him. Two girls run past me. Their giggling and the tapping of their heels on the pavement attract Marco's attention. He doesn't realize I'm there and turns to look at the prettier of the two, the one with slim and well-formed legs under a skimpy skirt.

If he were a teacher, loads of pupils would have a crush on him. And a smile escapes my lips.

Laura Lazzari & Nathalie Ségeral
in conversation with Eleonora Mazzoni

What was your agenda (if any) when you started to write your novel (*Le difettose*)?

When I started to write my book, I did not know where it would take me. At that time, I used to work as an actress and writing was a kind of sublimation for me. For some years I had been trying to conceive without success. I had been juggling scheduling my commitments all over Italy with my attempts at getting pregnant both “naturally” and through IVF. This was quite complicated.

One day I found out I was pregnant. The first time was a short joy, because I lost the baby almost immediately. The second time, a couple of years later, it happened at the end of the first trimester: while I was shooting a scene (which was very quiet) of a film, I suddenly felt blood dripping between my legs. I was immediately hospitalized, and dilation and curettage were performed. At that point I said to myself: “This is enough. I will stop trying for a year and see what happens.”

But creativity didn’t stop. And that part of me that could no longer express itself on stage or on a set, instead of sitting quietly and waiting, prompted me to write. Not only about a woman who was looking for a child who never came but also about the eccentric, variegated and lively gynoeceum that I had met, both online, and in real life. A topic still hardly discussed, let alone published, that I was eager to tell.

Autobiographic accounts are common in readings about motherhood, infertility, miscarriage and childlessness. Autobiography is also central/instrumental to your work. What are the strengths and drawbacks of autobiographical accounts related to stories of motherhood and non-motherhood?

My novel starts from a personal experience but is not strictly autobiographical. I have undoubtedly chiseled my protagonist as an alter ego that contains several psychological and existential aspects that are mine. But there is much more to it. The same is true for all the other characters and for the entire plot. In the character of grand-mother Rina, for example, some elements actually refer to my maternal grandma, while others are taken from a transgender singer with whom I have worked for a long time. Plus, a nice pinch of imagination.

A novel is always a complex reworking of ingredients taken from reality and turned into figments of imagination. I often find books revolving around the biographical self, boring and not very intriguing; in the same way I find texts that are too “literary” to be too distant and cold. I prefer when the author’s life permeates the pages in a more discreet way. When he or she enters the narration with grace and modesty and maintains an evocative dimension: only this way will the story and its characters take on universal connotations.

The role and the importance of online support groups has been growing in the last few years. Twitter and Facebook groups are now discussing topics related to pregnancy, miscarriage, ART and surrogacy. Social media offer alternative spaces to give a voice and support to women who had been previously silenced. However, instead of bringing women together, create empathy and understanding, antagonism is often emphasized in order to prove that a certain lifestyle is better

than another. Will women eventually find a common ground and be able to respect choices made by other women even if they are different from theirs?

Unfortunately, there is always a risk of shifting toward a “cult.” On the one hand, blogs and forums make it possible to discuss, find information and guidance on important issues with a high emotional resonance rate, often overlooked by more official channels. On the internet, however, we talk about everything. You will find answers or suggestions about every possible question. And you feel welcomed and understood. On the other hand, each group has a precise and rigid line of thought. If you go wrong or deviate a little, you are out. Instead, the world of motherhood is diverse, contradictory, ambivalent, it inevitably contains different points of view.

I have experienced this kind of hostility. My novel had just come out and nothing was known about me yet. Some readers wrote in a rather aggressive way on a medically assisted procreation forum that, if I had decided to have Carla give up so quickly, “only” after three attempts at ICSI, I was certainly talking about things I had not experienced, and I did not know. For this reason, it was better if I shut up. On the other hand, some bloggers among the active mothers on the web who, using irony, talked about the challenges and difficulties in reconciling motherhood, house chores, friends and work, have confessed to me the discomfort of writing a review about my book since I was telling about a different reality of motherhood unknown to those “super” women, mothers, wives, friends and workers, almost perfect, and very competitive.

I hope that starting from personal choices and events that deeply affect ourselves, we can succeed in establishing a more profound dialogue, by learning new ways to listen to one another without judgment or prejudice. There are “bridge-words” and “territory-words.” “Territory-words” are used by and with those who share the same symbolic space. When you meet a foreigner, you need to get rid of “territory-words” and build new ones: bridges. I do my best to work in this direction every day. The play based on the novel and the TV series we are preparing right now, arise from a commitment among very different women: mothers, childfree, childless, postponers. And it is a wonderful enrichment.

In pronatalist societies, negative stereotypes on childfree and childless women are still widespread. Feminist discourses have traditionally supported and promoted a revolt against maternity. Infertility, however, has not yet been part of the discussion and Alexandra Kimball’s book is filling this gap. If childfree women seem to have found their place in feminist groups, infertile women still struggle to make their voice heard and were failed by mainstream feminism. A similar fate awaits mothers who make parenting choices that are not in line with mainstream feminist ideals, such as extended breastfeeding and attachment parenting, to mention just a few. Which challenges does feminism need to face in order to represent/include all women in our contemporary world and societies?

Feminist reflection, despite not being homogeneous and in agreement in expressing a univocal judgment, has greatly underestimated the issue of infertility and has never been too tender towards procreative technologies, considered by many thinkers as the last frontier of power that men exercise on women. According to their thinking, men, envious of women’s ability to bear children and guarantee the continuation of the species, would have appropriated the reproductive process by controlling the operations that the new techniques involve, in order to participate to

an event from which they were originally excluded. The artificial uterus would represent the extreme attempt to produce children without women.

I would say that, after having demystified the traditional maternal role – the main cause of female oppression and submission – it is now necessary to rethink motherhood in its various facets. Feminist thought has created gaps. Now it is time to fill them.

It is necessary to transform the skepticism towards science and the fear of an unregulated commercialization of the reproductive process, into a curious and proactive attitude. That would help to interpret the unprecedented and at first glance daring solutions that medicine makes available today, by eliminating both false illusions and fears regarding techniques that are currently required by millions of people around the world, and that are bound to become more and more part of our contemporaneity.

According to Blook and Pebley (1982) childless women are divided into three different categories: childfree (voluntary childless); temporarily childless (do not have children but will have them in the future); involuntary childless (unable to have children). What are the differences in the way childless and childfree women are perceived in today's society? What are the challenges faced by these women?

Both childless and childfree women are victims of similar stigma. Society is normative, so it pushes those who do not want children to have them, and those who want them but cannot to accept their destiny. Our society considers couples who – for some reasons – do not desire to procreate as abnormal, narcissistic and selfish. Exactly like those who want children at all cost. We need to acknowledge that motherhood is a vocation like many others. It should be chosen freely, not imposed, as Anaïs Nin (1969) argued.

In the Western world, the number of those who turn to science to try to correct the defects of nature are growing parallelly as that of childless and childfree people. Moreover, today's postponers and childfree women represent the most educated, trendy and well-to-do segment of the population: from a Eurisko³ research it emerges that most childfree women between 18 and 55 years old work, have higher-than-average education, higher incomes, and their choices are carefully thought through.

A painting of Roy Lichtenstein, very eloquent in this regard, as well as funny, is that of a woman with tears streaming down her cheeks, a hand in her hair and the cloud that reads: "I can't believe it. I forgot to have children!" Because one thing is certain, as Badinter (2012) states, from the 1970s onwards, thanks to contraception and abortion, a child is no longer a destiny, but, for most, only a possibility.

Getting rid of the rhetoric of motherhood and the dogmas related to it is still an important achievement to be made, especially in Italy. "Maybe it is because I remained a child myself," this is how the Italian astrophysicist and scientific disseminator Margherita Hack explained her choice to remain childless. Adding that his/her pupils had been the children she hadn't had. This shows that we can be mothers and fathers in many ways, not just by giving birth.

³ This research was commissioned to the Italian Demographic Institute by Marilisa Piga and Nicoletta Nesler, authors of the *Lunàdigas* project.

Trauma related to childbirth, childlessness, miscarriage and infertility is common. In your opinion, how could trauma be avoided in the first place and/or healed?

It may seem obvious but the first step to healing from trauma is to acknowledge it. How many times instead do we behave as if nothing has happened and carry on, pretending to be as strong and determined as before? It is only by listening closely to our authentic emotions that we can take care of that feeling of helplessness, inadequacy, anger, pain, disappointment that these events inevitably carry with them. This is the first step toward a process that will eventually enable us to feel again affection, understanding and tenderness for oneself.

In order to heal, self-acceptance of one's fragility is needed. Failures are unavoidable: we are imperfect human beings, but lovable and loving, nonetheless.

Your books are inspired by your own personal and traumatic experiences. Could you talk about the process of recovery? How the act of writing and talking openly about your own experience helped you in the process of healing?

Infertility is often experienced as an unexpected "existential trip" and is capable of causing excruciating crises. Self-esteem and trust are lost. People begin to believe they are worthless. We are ashamed and isolated. And we risk being more and more alone. This way personal sterility leads to social sterility and silence.

"If I were to start a file on things nobody tells you about until you're right in the thick of them, I might begin with miscarriages. A miscarriage is lonely, painful, and demoralizing almost on a cellular level. When you have one, you will likely mistake it for a personal failure" confesses in her autobiography the "winning" Michelle Obama (2018, 188), who also went through the experience of infertility and miscarriage. "What nobody tells you is that miscarriage happens all the time, to more women than you'd ever guess, given the relative silence around it. I learned this only after I mentioned that I'd miscarried to a couple of friends, who responded by heaping me with love and support and also their miscarriage stories" (Obama 2018, 188).

My novel had a double function. On the one hand, it helped me to express my most hidden feelings, to elaborate my anxieties, to clarify the meaning I attributed to the idea of having a child. And it led to benevolent self-acceptance. On the other hand, thanks to the fecundating power of words, always fertile and capable of revitalizing, it allowed me to open up to the outside. I started talking about my long-standing but secret problem to friends and family. And I met many people who were also touched by it, often unsuspected. Sometimes people who were very close to me. I felt I was not alone. In fact, I was part of a large community.

The book grew inside me like a pregnancy. It healed and filled gaps and shortcomings. Its ending was similar to childbirth. In addition, it allowed me to experience a sort of "parenting:" I felt that it could benefit others. It is no coincidence that I chose a sentence from Seneca's *Moral Letters to Lucilius* (22. 1) addressing the importance to discuss topics that could be beneficial both to ourselves and others as an exergue to my novel (Mazzoni 2012, 1). And it is no coincidence that many women later contacted me, sharing important and exciting pieces of their lives with me. Almost all their messages began like this: "Hi Eleonora, I'm a defective too ..."

Part 3: Maternal Trauma and Dystopian Literature

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Technological Reproduction in Fiction: Escape from Dystopia

Marta Baiocchi

Infertility is recognized by the WHO as a disability and occurs in about 10-15% of people in the Western world. The rate has steadily been increasing during the last few decades. For many women it causes psychological trauma and distress, with feelings of loss of identity, personal failure, stigmatization and isolation. Assisted reproductive technologies represent important treatment options. Today, 40 years after the birth of Louise Brown, and with about 6 million IVF children and young adults living around the world, assisted reproduction has proved a safe procedure for both mother and child, and remains a developing field. Among many advancements, the intracytoplasmic sperm injection technology can now solve the majority of male-caused infertility; oocyte donation has rendered manageable the decline in fertility of women of “advanced reproductive age,” and the recent methods for egg freezing may grant the possibility of reproduction to older women, while avoiding the ethical and psychological concerns that often surround oocyte donations.

It is therefore somehow surprising that assisted reproduction, while actively discussed within the scientific, bioethical, and philosophical communities, is rarely analyzed realistically in literature as the most effective approach to counteract infertility. Indeed, while women’s trauma in facing infertility has been widely represented in recent literature, the impact of reproductive technology has given rise to a relevant bulk of dystopian fiction yet is poorly represented in its concrete aspects or in real life, particularly among female authors.

In this essay, through a brief review of some widely known works dealing with the technological reproduction (from here TR) of human beings, I will show as a generally negative, and even frightened look has crossed the majority of fiction, either mainstream or genre-based, from its beginnings to very recent times.

In the second part, I will describe how, from my position, at the crossroads of my work as a cell biologist and my literary interests, the lack of more pragmatic points of view was particularly striking and brought me to reflect on which would be the reactions of real women, facing new technological possibilities, that may promise to solve their own infertility issues through unprecedented approaches. This line of thought eventually led me to conceive a novel, *Cento Micron* (Baiocchi 2012), in which two female characters undertake together a quest to retrieve the lost embryos belonging to one of them, determined to overcome any obstacle, be it practical or ethical. Based on my personal experience of the power of narrative to explore a wide range of implications of TR, I conclude that a wider contribution of women and science people in this field may provide invaluable realistic inputs on such an evolving narrative theme.

The origin of the dystopian point of view on TR is certainly connected to long standing vitalist perceptions, that can be traced back to the ancient times, according to which metaphysical

events participate in the generation of animals and, even more so, of human beings, in a manner distinct from the physical laws that govern inanimate objects. This implies that any attempt by humans to take possession of the process of constructing themselves or other creatures is doomed to result in failure, damnation, or both. On these bases, human-built beings will expectedly be outcasts condemned to loneliness and isolation, misshapen monsters or evil creatures fated to rebellion, or otherwise destined for human use as working or war machines, or for organ harvesting to supply spare parts to their creators. Another recurring fear is that of dehumanization and the loss of an idealized state of nature.

Early vitalist theories, however, come to a sudden challenge with the development of modern science, when the possibility of grasping the mechanism of life by technological methods at once appears closer, reawakening feelings of both hope and dread. A well-known case is the series of attempts to bring back to life dead animals and people through the then newly discovered electricity, which lasted several decades between the end of the 18th and the beginning of the 19th century. The observations by Luigi Galvani, that had described the contractions of the muscles of the frogs upon touching them with metal tools, produced a general uncertainty regarding the nature of such phenomena. It was harshly debated, in particular, whether the animal's apparent signs of life corresponded with the reawakening of some inner vital force or whether, as we know today, they were induced by chemical processes taking place within the metals, which were then transmitted to the muscles. In the subsequent confusion regarding cause and effect, the study of so-called animal magnetism, or mesmerism – borrowing the name of the German doctor Franz Mesmer that initiated it – enjoyed not only a long-lasting interest among scholars, but also a widespread popularity.

It is in this context that the first and most popular novel on the technological generation of a human being – *Frankenstein* (Shelley [1818] 2005) – was written. The enormous success of the novel, which has not diminished to this day, derives from its multi-faceted narrative. While the authoress enunciates the positivist, revolutionary idea that man is now ready to reclaim the act of his own creation, she simultaneously depicts quite convincingly two of the key fears I introduced above: not only the social dangers of the monster, but also the psychological pain of a being created differently from all the others, and thus fated to be excluded by other humans. The characterization of the outcast's desperation, in fact, remains one of the most powerful aspects of this novel.

With Shelley's book, the theme of the TR of man takes its first major step in dystopian fiction, to the point that, today, the phrase "the myth of Frankenstein" refers to the dangers linked to the manipulation of nature by man. It is interesting to note that Shelley's predictions and fears are substantially the same as those expressed about a century and a half later towards the first children born from *in vitro* techniques. In fact, many different sources, both medical and non-medical, initially predicted that they would be more prone to malformations or diseases, or else that they might suffer from social exclusion due to the different way they were conceived. Forty years after the first *in vitro* fertilization births, none of these hypotheses has come true; many studies, however, continue to investigate whether there may be forms of psychological damage, in children or mothers, associated with birth through heterologous fertilization [in which embryos derive from sperms and/or eggs of donors unrelated to the recipient parent(s)], or surrogate pregnancy.

In fact, concerns about TR precede its realization by several decades: the best-known and most prophetic novel on extracorporeal reproduction, *Brave New World* (Huxley [1932] 1995), is actually one of the very pillars of dystopian fiction. Here, factory-made reproduction marks the final extent of the dispossession of human natural rights and free will, and the detachment of women from their maternal role has now reached a point of no return; in fact, Lenina, the main female character, no longer finds the possibility of natural reproduction to be acceptable. In turn, Linda's incapability to face her unexpected and unwanted motherhood will damn her to the condition of an outcast both in the natural and in the "civilized" world. Noteworthy, more than thirty years separate the publication of this book from the enormous developments in the science and technology of reproduction of the second half of the 1900s. Still, it prophetically anticipates some important focal points of the opposition against assisted reproductive techniques that will be developed by a relevant part of feminist movements since the 1960s, namely the dispossession of women's control over their own bodies, and the loss of their very gendered identity.

Since the 1950s, the discovery of DNA structure (1958), *in vitro* fertilization techniques (1961), surrogate pregnancies (1986), and finally reproductive cloning (2003) will generate – or in some cases will be shortly preceded by – an enormous amount of science fiction and mainstream literature. Here, few representative examples are summarized.

In *The Midwich Cuckoos* (Wyndham [1957] 1975), published just a few months before the discovery of DNA, all the women of a small British village find themselves fertilized simultaneously in the course of a single night. The children born from these pregnancies will turn out to be beings between the human and the non-human, endowed with collective thinking and telepathic skills, generated by an alien civilization to gain control of the planet. Although the novel expectedly ends with the violent elimination of the children, the narrative repeatedly hints at bonds of affection that a few of the carrier mothers have established with their babies, despite being fully aware that they are not their genetic children, nor fully human beings.

The Boys from Brazil (Levin [1976] 2013) explores the theme of cloning for eugenic purposes: in the plot, a Nazi hunter is committed to stop Doctor Mengele's attempt to recreate a copy of Adolf Hitler. Indeed, as it turns out in the book, Mengele had generated a whole series of Hitler's child-clones several years prior and has since done his best to subject them to an upbringing as similar as possible to that which the actual Hitler experienced. The book's open ending encourages the suspicion that the plan may eventually succeed, at least in one of the children. Quite interestingly, the underlying theme of the book is the so-called "nature versus nurture" debate: the question of the relative weight of an individual's built-in genetic determinants versus education and experience, in determining her/his traits. This question remains unsolved by science, even though converging knowledge indicates that a cloned individual would never fully reproduce the psychological and emotional characteristics of his double, just as identical twins express individual personalities, despite being raised in the same family and environment.

Finally, the highly praised novel *Never Let Me Go* (Ishiguro [2005] 2020) narrates with desperate tones the hopeless discovery of a group of young people that they exist only for the purpose of providing replacement organs to the privileged classes.

In this literary landscape, as mentioned before, female voices are almost totally absent. For this reason, one cannot fail to mention the rare exception of *The Handmaid's Tale* (Atwood [1985] 2019). Even though, in this case, reproduction is not technologized in the strict sense, still

the authoress depicts a future in which reproduction and motherhood are under the full control of an Establishment, and women's condition is reduced to that of essentially reproductive machines. The main subtext is that of the power exerted by society on women's choices regarding their own bodies, and in general on their freedom to manage their own gender identity. These themes are strictly connected to the aforementioned debates within feminist studies that, beginning in the 1960s, investigated the way in which reproductive technologies could develop into tools by which capitalist society, and men in particular, seek to gain power over women's bodies. In this perspective, it is no coincidence that Atwood creates in her novel a dystopian atmosphere reminiscent of that of Aldous Huxley's or George Orwell's narratives.

The historical focus of fiction on the negative consequences of TR outlined up here begins to shift toward the end of the 20th century. The international uproar generated by the Dolly experiment in 2003, in which a sheep was successfully generated through reproductive cloning, switched the general awareness from a landscape of theoretical conjectures to an acknowledgment that new technical possibilities were becoming more and more close and feasible. In this context, a subtle change in point of view can be identified in the book *Les particules élémentaires* [*The Elementary Particles*] (Houellebecq [1998] 2001), which preceded the Dolly experiment by a few years. In the novel, perhaps one of the most interesting literary works about the relationship between science and society of the last decades, the author analyzes the theme of mankind's self-manipulation with a genially oblique gaze. The future modifications to the methods of reproduction are envisioned as no longer avoidable; yet, at the same time, they are not recognized as capable of worsening society *per se*. Conversely, the author ambiguously states that an irreversible genetic modification of all men and women may represent the only effective way to change the intrinsically human condition of pain. At the end of the novel, the author evokes such a mutation, deliberately induced by humankind in his descendants, when he dedicates the book to human beings: "This species which, for the first time in history, was able to envision the possibility of its succession and, some years later, proved capable of bringing it about" (Houellebecq [1998] 2001, 64). This is no longer a critique of the potential negative consequences of these technologies, but rather a statement about human nature itself, that will not be changed through modifying the order of the physical world, nor by attempting to advance the society. Only in manipulating the biology, if not on the very chemistry, of the human species, might men and women achieve a better ethical condition. Houellebecq then soon challenges his own conclusions in his subsequent novel, *The Possibility of an Island* (Houellebecq [2005] 2007). In it, Daniel and two of his clones, living in different, successive timeframes, unleash the same bitter gaze on their own existence regardless of the time they live in and the events that happen around them. The novel concludes on the notion that not even the deepest biological modification can change man's emotional core; technology, in turn, is just a great collateral event that can change everything without changing anything. This is a particularly suggestive reflection for a scientist, as it subtly addresses the sense of powerlessness, or at least of uncertainty, always permeating scientific research, regarding the question of whether it is actually capable to guarantee a greater share of happiness (or unhappiness) to human beings.

To conclude this summary, I cannot fail to mention the TV series *Orphan Black* (Fawcett 2013), for its exceptional originality in addressing the issue of TR compared to the works cited up to here. In this story, a young woman discovers she has a whole series of identical twins. As the story unfolds, it becomes clear that these women are in fact clones, generated by a biotech

through reproductive cloning and surrogate pregnancy. In order to maintain control over them, the company has implemented a series of technical mandates, including making the women sterile, and programming into their genome a disease that constantly threatens their survival. Despite all this, the women will eventually be able to come together, developing bonds of affection and collaboration thanks to which they will eventually recover full control over their lives, therefore regaining their very human condition.

There are several noteworthy points in this story; first, the dystopian element here is practically absent, as the plot takes place in the present time and in our world as it is. Moreover, the existence of clones in itself is not foreseen to make the world worse than it is, at least as long as they can manage to escape from external control. In this context, one may consider that the control that biotech wants to exert on the girls is not different in principle from the control that markets try to exercise on the members of any capitalistic society. Another important point is that the clones, regardless of the method by which they were generated, each possess a full individuality and all the peculiar emotional and psychological characteristics of any human being. In fact, much of the story is dedicated to depicting their emotional differences despite their identical genetic background. There is among them a scientist, a murderer, a lesbian, a policewoman, and many other characters, all different from one another. The story follows the bonds of friendship and affection, but also the conflicts that arise between them as they meet and grow to understand their situation, until they develop a common, and successful, defense strategy. In short, the series leads the viewer to feel a growing empathy towards these characters, and to consider the technology by which they were generated completely irrelevant compared to their evident humanity. These aspects deserve to be emphasized, because they mark a complete departure from the myth of Frankenstein: here the fiction clearly states that a technologically produced human being is not necessarily defective or ethically deviant, nor is it inevitably condemned to dehumanization or exploitation. Importantly, the scientific advising for the series consistently proves itself to be – despite rare moments of overreaching – extremely competent and up-to-date: a script, in essence, in which the contribution of highly qualified scientists is clearly perceived not only from a technical, but also from a theoretical point of view.

Finally, a common aspect may be noted, crossing otherwise completely different works, such as the *Orphan Black* series and Houellebecq's novels, namely the underlying premise that even though technology can (and most possibly will) change the ways in which humans reproduce, it will not change their intrinsic nature. In this perspective, it is no coincidence that *Orphan Black*, which embodies this concept to the extreme, was produced so recently. As advanced TR technologies progressively leave the hypothetical realm, becoming more and more real and established in our society, it is not surprising that their narration begins to abandon futuristic and catastrophic visions and to relocate to the real and the present.

It is now clear that recent developments in biology already allow, or will allow in the very near future, possibilities that were unthinkable until recently. It is no longer just a question of *in vitro* fertilization – whether homologous or heterologous – or of surrogate pregnancy, whose technologies have been established for several decades. A number of potentially revolutionary approaches are currently being studied, if not already implemented. The most striking example is the invention of the CRISPR technique, which allows the selective modification of single genes within an individual being, whether a microbe, a plant or an animal. Such a manipulation can be performed leaving no trace of the process, so that the modified individual may be indistinguishable

from its natural counterpart. It may soon be possible, for example, to substitute into an embryo a gene coding for a hereditary disease with its healthy counterpart. In this context, it must be underlined how the criteria that distinguish between what is “natural” as opposed to “unnatural” becomes leaky. A revealing example is the different position taken by the US versus the European regulatory agencies on the definition of an organism modified by CRISPR. In fact, the FDA has established that an organism will not be considered as genetically modified (GM) when its manipulation replaces a gene with a variant that other individuals of its same species naturally possess. Conversely, EU has decided to classify this kind of organisms as GM regardless of the fact that they may not in any way be distinguishable from other “natural” members of their species. Obviously, an enormous debate is ongoing as to the possibility of genetically modifying human embryos using CRISPR. In fact, a genetic modification introduced into an embryo would propagate within all the cells of the adult, including gametes, eventually spreading to its progenies. This topic is not speculative, as it is being actively pursued in several research laboratories around the world, albeit under the constraint of a series of ethical indications, the first being that it must exclusively be performed for therapeutic purposes, and in no cases for “improving” the embryo’s traits.

Other technological horizons that have opened in recent years, although not as immediately feasible, appear even more ethically problematic. I will only mention here research on the possibility of exploiting cellular plasticity, to produce eggs or spermatozoa starting from mature cells of the organism. Such techniques would not only allow any infertile or sterile individual to reproduce, regardless of age or disease, but would also open the possibility of generating oocytes from mature male cells, or vice versa, therefore making it possible to achieve reproduction between same-sex individuals, and even self-reproduction.

To conclude, throughout their history women have had to confront two major traumas related to motherhood: finding themselves forced to conceive unwanted children on the one hand and not being able to conceive on the other. The first has been solved or attenuated through the possibilities of contraception or abortion. As for the trauma of infertility, the woman’s decision is still not free from physical constraints related to age, illness, or economic conditions. At the same time, it seems likely that new technologies are poised to offer an ever-wider range of possibilities, if women choose to use them.

The advancements of TR foreseeable in the next years or decades obviously open the way to an infinite series of narratives, in which the power of fiction, as compared to non-fiction, to grasp the deep emotional and psychological consequences sparked by the appearance of new TR technologies themselves is invaluable.

Still, some important perspectives on this topic are generally scarce in narrative, the first of which is an awareness of the actual material processes by which new technologies have been conceived, developed and diffused within our society up to now, and how they can be expected to do so in a close future. Even more importantly, female voices remain definitely too scarce, in a world where they still represent the central actors in the haptic aspect of human reproduction, as well as in the early care of newborns.

I have perceived for a long time the great relevance of all the different aspects, scientific, ethical and narrative, connected to TR. My reflections on these themes eventually led me throughout the conception and writing of my first novel. In my book *Cento micron* [One hundred microns, the actual size of the human egg just fertilized] (Baicocchi 2012) I have attempted to envision and depict the relationship of women with a new, revolutionary technique for extra-

womb pregnancy. The main characters of the novel are female: Bibi is a rich and spoiled young woman who has lost her husband in a car accident. At the beginning of their marriage, the couple had attempted IVF with no success, but she still has several leftover frozen embryos, which she now wants to transfer. To her dismay, she finds out that the newly delineated Italian law prohibits post-mortem implantation. Refusing to accept the clinic's head's rebuff, she turns for help to Eva, her childhood friend. Eva works as researcher in biology and has many acquaintances among clinicians and fertilization biologists; she decides to help Bibi in her quest for her embryos not because she is convinced that Bibi will make a good mother, but because she strongly believes in women's right to pursue motherhood against any restrictive and imposing law. Eventually it turns out that Bibi's embryos, together with many others, have been stolen. A third female character appears toward the end of the story: an older woman, the owner of a powerful Swiss biotech, who has been physically incapable of conceiving children. She is funding secret offshore research to develop a revolutionary technology for child birthing, driven by mixed reasons that include the desire to add a lucrative innovation to her company, and the implicit desire to solve for other women the problem she could never solve for herself. This woman and Bibi will eventually make a deal through which Bibi will get her own newborn in exchange for granting the company secrecy until the technology is further developed and for consenting to have tests run on the child during its development until adulthood. In the perspective of these three women extra-womb pregnancy, rather than a path toward a social dystopia, ultimately represents a new alternative in which many, and perhaps all, women may one day choose to participate.

In writing this novel, I could personally experience the expansive potential of fiction to depict the struggles women are willing to face to fulfill their own deep desires. I could freely investigate the processes through which a new technology, even if it may appear concerning and even troublesome at its inception, may be easily assimilated with time by our society and culture once it becomes readily available, particularly when it promises to answer to real people's needs, one of which is definitely to escape deprivation trauma in motherhood.

A growing contribution to the narrative of TR by its main actors, i.e. women and science people, would definitely widen the frame within which TR narrative has been moving from its origins to our days, allowing this theme to escape its dystopian boundaries, joining the fields of the possible and the real.

One Hundred Microns

Marta Baiocchi

Translated from the Italian

by Alice Warshaw and Marta Baiocchi

Chapter 6 (Baiocchi 2012, 39-43)

"Eva, I need help. I really do."

"What happened?"

"I was at Villa Boccioli, yesterday."

The breast, that is it, I knew it.

"You are sick."

"Don't you remember? Villa Boccioli? You sent me there."

"Me?"

"To that friend of yours, Bianca."

"The fertility clinic!"

The fertility clinic, yes. Right. But that was four years ago ... or more?

"Eva, I need help. I really do."

"I couldn't remember its name anymore. And forgive me, you have been there to ...?"

"I saw the professor and ..."

"But what for?" Eva still does not understand.

"I wanted to try again, uh?" Bibi snaps, an angry tone.

To try again? Bibi wants to try again? Bibi wants to try an implant again.

"Eva, I have no alternative, do you understand? It is my only chance. The only one!"

Chemo. Chemo, yes. Can no longer have children.

Bibi's cheekbones look as sharp as the knobs of a pinball machine, her lips two thin, bruised slices.

"Because of the ..." Eva doesn't feel like saying the word.

"Because of the chemo, yes. My eggs are gone, and if by chance there were some left, who knows what the hell may come out of them. I can never get pregnant again. I have only those embryos left. I have only those." Bibi's voice is flat, as if she were talking to a judge, to a lawyer, to someone who must be convinced of the ineluctability of what she is saying.

The embryos, yes.

Now Eva remembers, it seems that geological eras have passed.

"And he said no, do you understand? He had the guts to say no!" continues Bibi, her voice now shrills. "Because their father is gone, and this new law allows the implantation of embryos only when both parents are alive, and so my embryos, our children, must rot at the bottom of their damn freezer, and ..."

"Sorry, Bibi, I didn't realize you were thinking of ... something like that. I mean ... Marco, he's been dead for four years now. I thought you were starting to get over it, and ..."

"... but those are my children, you understand, they are my children! My children and Marco's children! He was my husband, we got married, we wanted children. And we made them! Do you have any idea," Bibi speaks fast, angry, "of what it means, to go through all the procedures

for in vitro fertilization? Can you imagine, months of analyses, and examinations, dozens of interviews. To let them turn you inside out, like a sock. And then, hormone treatments, and egg withdrawals, and implantation, and then you sit there, waiting to see how it ends ...”

Eva opens her mouth to say something, but then realizes she does not know what to say.

“Not to mention the money, yeah, all the money it cost. And now,” Bibi’s voice breaks, “my embryos are locked in there, getting older by the day. No!” she raises her voice again, in the tone of somebody who will not accept any other possibility “the embryos are mine! Marco’s and mine. They are the children we wanted when we got married, and they are the ones I want now!”

Eva has understood, now.

Bibi’s husband.

That imbecile *pariolino*,⁴ son and nephew of *palazzinari*⁵ and cementifiers.

...

But in spite of everything, she could never have imagined ...

Only twenty-four months had passed since the wedding when Eva received that phone call in the middle of the night: Bibi was in the emergency room, screaming and in shock. Marco had crashed into a wall, in his brand-new Porsche, coming home from a beer party post soccer match. And game is over.

Eva sighs within herself, now she remembers better: just a few months before, he and Bibi had tried their first cycle of *in vitro* fertilization.

Chapter 9 (Baiocchi 2012, 60-63)

Eva felt dizzy, but Bianca had already palmed the test tube from the rack. “Come,” she said, “Let’s go.”

Eva followed her through a short corridor: ah, here’s the laboratory.

Within the lab where the eggs are fertilized were three or four people, Bianca’s colleagues, in paper coveralls and masks, working quickly with rapid gestures. Bianca tipped the ovules from the tube onto a small plastic dish and looked at them under the microscope, counting. The microscope view is projected on a screen and Eva can see what Bianca is doing as she does it.

“Yes, there are three, they’re all there, see?” Eva can see them, encased in a kind of membrane. “Now I’ll release them,” she said. Holding a thin glass syringe, she drew in then squirted them out one by one, each egg released from its sac.

There they are, now they seem exactly like the cells that Eva works with every day. Mouse blood, rat brain, they look almost identical. So round and translucent like tiny soap bubbles, it would be impossible to say these aren’t the cells of a frog, a mouse or a zebra – but they are.

These are the eggs of woman.

⁴ Slang, derogatory. From Parioli, a bourgeois and snobby neighborhood in Rome.

⁵ Slang, derogatory. Building speculator.

Eva watched it all. She saw Bianca choose the sperm in their frenzied rush within the dish, her eyes planted on the microscope she chose three, one at a time. With a blow she broke off the tail of each to immobilize them then drew them in with that fine glass tip.

And now, this is the moment, she injects them into the ovules.

Each of the three ovules was punctured and injected with a spermatozoon.

Eva watched it on the monitor.

Just like it's shown in videos.

But completely different when you see it with your own eyes.

So different – Eva wouldn't be able to say why, yet it's incredibly, infinitely different.

Bianca's colleagues are performing the same operation with the eggs of the morning women. There had been ten on the list, taking the doctors a couple of hours to retrieve the eggs which Bianca and the other biologists are now inseminating. They'll soon be done. The eggs, each in its tiny plastic dish, immersed in a drop of nutritious rose-hued liquid, will be placed, initialed and lined up, on the metal racks of an incubator that regulates temperature and humidity.

It will soon be time to begin the transfers. There's a new list of afternoon women who will be transferred with eggs inseminated three days ago. Actually, no longer eggs but embryos which have had three days for the cell to replicate itself and divide. From one comes two, and two make four. In that manner here they are, the embryos, a cluster of four cells, gleaming, glossy and distinct.

They have a hypnotic fascination to the eye, thinks Eva.

It may be the symmetry, their almost magic regularity. It may be the wonder that, from something so small, an entire life could originate, the infinite weight of a mind, gestures, thoughts, memory. And yet, so small. Eva looks at them, enlarged upon the screen, but they are so small, she thinks. Only 100 microns. Fractions of a millimeter, the thickness of a page of a notebook. Bianca is quickly checking the embryos, photographing them under the microscope and, occasionally, discarding one.

She discards the ones that didn't make it, and rather than a uniform and tidy group there's only an inert and dying ovule that wasn't able to advance. She eliminates the ones that aren't four round, shiny cells but three or five or seven instead. Asymmetrical, minuscule or gigantic.

Eva recalls those female fish that eject millions of eggs into the sea, infinite clouds of eggs that disperse in the water like spirals of smoke waiting for the sperm that will fertilize them. Only few will encounter the sperm in the infinite sea.

A third of all-natural pregnancies in normal women abort before the woman herself even realizes she is pregnant.

Nature abounds and squanders. Nature doesn't conserve, rather, it acts in random ways.

Law would now have it that prescribes that all that is retrieved and fertilized be implanted. Those lawmakers, reflects Eva, have never taken the trouble to come here to see these cells so strange that Bianca eliminates them with decisive and precise movements.

Bianca's colleagues are doing the same; white shadows bent over microscopes checking the embryos soon to be transferred to the women on this afternoon's list, anxiously waiting their turn outside.

Inside they work quickly.

So, Eva thinks, this is what I expected, yet until you see it with your own eyes you don't really understand, you don't realize that.

The gestures used to create a human being are no different than those a jeweler uses to thread a string of pearls.

Chapter 10 (Baiocchi 2012, 64)

"You have never seen the embryos," said Eva, looking directly at the Writer, her voice terse. "But I have, I've seen them."

Chapter 48 (Baiocchi 2012, 275-277)

The plane for Italy took off with a violent rumble like the roar of a wild beast.

Eva watched through the window as the city with its smog and skyscrapers and billboards shrank into forests and fields until the entire country disappeared.

Up there the sky was violet and infinite, a gigantic sun blushing deeply below.

Some tenuous exotic music plays on the speakers. The flight attendant passes out small, very soft white hand towels dampened with warm scented water. Eva twines it between her fingers with pleasure and lowers the back of her seat. It's a long flight back to Rome.

When everybody does it, she thinks.

When all babies are born in the petri dish.

At first, people will be afraid.

They'll say that it's contrary to nature.

As if man were something distinct from nature.

As if everything that is human and all human activity were not, by definition, the result of the same nature that produced and continues to produce it.

They'll say you cannot steal fire from the gods.

These children are the devil's offspring.

They are cursed, and sooner or later they will be struck down.

Damned the children and those that create them.

Then, as time passes nothing will happen to those children.

Absolutely nothing.

No lightning bolt will strike them, no curse will bring them down, the heavens are impassive as they have always been.

The children will be healthier than others because they were so costly and required so much attention.

The company will have already patented both the imaginable and the unimaginable; the technology will be their domain for many years. They will make a horrendous amount of money.

Women. It will be they who resolve the issue.

Someone will do it because she doesn't want to quit working.

Someone will do it because she can't quit working.

Someone will do it because her body won't, and someone else because she doesn't want stretch marks.

Then, many will do it because everybody else around them is already doing it.

In time, over the years, the idea of carrying a living being trapped within another body for nine months will become frightening, disgusting and ever more unapproachable.

And then, Eva thought, in years to come, in some future that she can only attempt to imagine, even the idea of carrying a human being within the desires and the nightmares of some woman or man may become entirely unacceptable.

Time might even bring women and men to fear the absolute power that nature gives to the powerful over the weak, the defenseless. The last of the absolute powers to survive, in our civilized world.

They will fear this Nature that consigns new minds to be formed and informed to humans at random, blind and entirely unaware of the entity and the effects of their power. Oblivious of the inextricable instincts that propel them toward the atavistic function of bringing up their young. New lives to pour and tap out, just to gain vital energy for their own selves.

Thus, in a future that is just barely discernible, the very idea of maternity will be cast aside like all bygone ways.

Like the votive pictograms painted on a rock a million years ago.

Like a sacred stone in a paleontological museum.

Like a virus for which a vaccine has been found.

Like a disease eradicated from the earth.

Laura Lazzari & Nathalie Ségeral
in conversation with Marta Baiocchi

What was your agenda (if any) when you started to write your novel (*Cento Micron*)?

I would not say I had a precise agenda when I started writing the novel, rather, at that time, I was deeply reflecting on a series of events happening around me. First, the very bad and unfair law on assisted fertilization that had been recently enacted in Italy. Among a wide series of vetoes, this law prescribed to fertilize a maximum of three eggs in a cycle, banned embryo freezing (today representing a crucial tool for IVF efficiency), and any kind of genetic screening for inheritable diseases on pre-implantation embryos. In addition, it forbade heterologous fertilization (i.e., the use of donated sperm or eggs), post-mortem embryo implantation, and surrogacy.

I had some knowledge on the subject, having worked for a few years in a biotech company, leading in the field of fertility, and it was evident to me how this law contained a series of gross inconsistencies, not only regarding the rights of women to reproduction, health and choice, but also on a simple technical level. It looked like the law's drafters had never really understood "how it really works." In particular, the obligation to fertilize a maximum of three eggs, and then to implant all eggs fertilized, together with the ban on freezing embryos, clearly violated the clinicians' obligation to best practice, as I knew it. Indeed, most, but not all of these vetoes were later invalidated by the Italian Constitutional Court, that recognized them as detrimental to the health of the woman and the embryo. A process, however, that took many years. The ban on implanting embryos after the death of the man who had provided the sperm, which is still in force today, also struck me for its inconsistency.

As an atheist, I knew that the law had been enacted under a conservative government, inspired by catholic principles considering that new life must be protected at all costs: such a strict prohibition to implantation seemed to me incoherent even for a catholic. In Great Britain, for example, both partners in the couple declare, before undertaking assisted fertilization, whether they want the procedure to be continued in the event of their premature death. This system has always looked to me much more respectful not only of the parents' free will, but also of the embryo's rights. In an attempt to force the inconsistency of this point, along with the ban on scientific research on embryos also stated by the law, Adele Parrillo, whose partner was killed in the attack in Nassirya, started a legal action asking to donate to science the embryos she had conceived with her partner before his death. The Italian courts denied the authorization. The total veto on the use of abandoned embryos for research purposes, in turn, particularly afflicts me as a researcher; on the one hand, because I fully perceive the waste of possibilities, on the other hand because drugs and therapies developed on embryonic cells in foreign countries are legal and widely used in Italy. Elena Cattaneo, appointed to the Senate of Italy as a Senator for life in 2012 by then President Giorgio Napolitano, is a prominent Italian researcher who had worked several years abroad, on human embryonic stem cells. Upon her return to Italy, according to current regulations, she could bring with her the cells she had produced, and continue her studies on those, but was not allowed to generate new ones. This too cannot but seem an unfair, hypocritical and incoherent state of things.

Together with these considerations, at the time when I wrote the book (and still now) the very poor conditions of scientific research in Italy were very obvious to me. Science indeed has

always been a sort of poor sister in the face of a national culture historically based on humanities, and often even contemptuous of technology. The description of Eva's professional condition, where she finds no space to expand her intellectual capacities, reflects very common situations in Italy, for young people in general and young women in particular.

Finally, as a woman, I could not elude the issues related to late pregnancy and/or infertility that more and more women are confronting nowadays in the western world. Also, on this point, my professional background tends to take over the more sentimental or theoretical considerations. In fact, I was fascinated by the possibilities that technological advances can produce, even on events mostly regarded as deeply "natural," such as the sense of motherhood for women. Yet, history has shown us how the advent of contraceptive methods, abortion, or assisted fertilization, has been accepted by women and acquired in society very quickly. What would happen if pregnancy itself were no longer an ineludible passage of human reproduction?

Autobiographic accounts are common in readings about motherhood, infertility, miscarriage and childlessness. Autobiography is also central/instrumental to your work. What are the strengths and drawbacks of autobiographical accounts related to stories of motherhood and non-motherhood?

I recognize that I am not particularly attracted to novels about motherhood, nor, after all, to other topics, with a strong autobiographical component, unless they have intrinsic literary qualities. Certainly, the use of personal elements can create empathy in readers, but on the other hand, my mindset brings me to prefer general approaches and external points of view. I know perfectly well, however, that autobiography, in its broadest sense, is an inevitable component in the work of any author, if it is true that one can only speak about what she/he knows, as fictional or immaterial as it can be. In the specific case of my book, I believe that the more marked autobiographical components were those that contributed to create the character of Eva, especially with regard to her condition within Italian research. In fact, although none of the events narrated in the book happened in reality exactly as told, still each one of them could have happened. Eva's difficulty in obtaining acknowledgment, or even just in being able to carry out her projects in a serene atmosphere, is quite characteristic of Italian academia, especially for women.

Eva, however, is not only a researcher, but also a woman, who has now reached a time in her life when she will soon have to face the question of motherhood, and possibly also that of infertility. This makes her a character at the crossroads, and precisely for this reason, she makes a perfect witness, and the one who draws the conclusions. She is the one who has a knowledge allowing her to fully investigate all aspects of infertility: not only the technological ones and those connected to desire and personal choice, but also the ethical and legal issues, the latter of which are, as I said, particularly troubled in Italy.

The role and the importance of online support groups has been growing in the last few years. Twitter and Facebook groups are now discussing topics related to pregnancy, miscarriage, ART and surrogacy. Social media offer alternative spaces to give a voice and support to women who had been previously silenced. However, instead of bringing women together, create empathy and understanding, antagonism is often emphasized in order to prove that a certain lifestyle is better

than another. Will women eventually find a common ground and be able to respect choices made by other women even if they are different from theirs?

Social media have demonstrated an amazing ability to bring out the worst of human relationships. I say this despite having drawn many good from relationships born on the internet, both in terms of intellectual exchanges, and of real friendships. In spite of this, I believe that the lack of physical contact leads the less advanced users to disembodiment of the interlocutor, turning him into an avatar of their own fears and weaknesses, and of their internal anger. Often in witnessing violent and even cruel dialogues, I thought that the contenders would have kept a rather different tone, had they physically faced each other.

In my book, the two main characters have completely different personalities: Eva, a researcher, is a character dominated by rationality, while Bibi is the spoiled girl from a wealthy family, used to getting everything she wants. She is determined to recover her lost embryos with a blind obstinacy, dominated by a sense of possession. Still, the two of them are tied by a strong friendship and by a bond of solidarity, which was born during their school years and has survived over time, perhaps just because of the attraction between opposites. In the course of the story, Eva will decide to help Bibi to pursue her intention to retrieve her lost embryos, even beyond the limits of the law, although she is not fully convinced that an inalienable right to motherhood exists, nor that Bibi may really make a good mother. However, she will do so, not only for her personal hatred of an irrational and unjust law, as was and still is the Italian law on assisted reproduction. Also, just because Bibi is her friend: a woman with whom she has shared a long stretch of life, and to whom, only for this reason, she cannot deny her help. This, I believe, is the way to understand others: to have the possibility, or the ability, to see them as real persons in a real world, rather than as simple shadows of a principle or an idea. As far as I am concerned, I have no problem saying that some extreme possibilities now opened by reproductive technologies leave me suspicious, as a woman and/or as a biologist. Despite this, I have learned how easily we can change our own mind about the correctness of a given action, when we personally experience the circumstances that may bring a loved one, or even ourselves, to face that choice in reality. For this reason, compared to when I was younger, today I have learned to consider all my opinions as provisional, and abstain from definitive judgments. This is something I believe, that may render women's positions stronger and more united: a capability to detach from rigid and defensive positions, but to acquire a perspective that is plastic and changeable, just like the reality in which we all live.

In pronatalist societies, negative stereotypes on childfree and childless women are still widespread. Feminist discourses have traditionally supported and promoted a revolt against maternity. Infertility, however, has not yet been part of the discussion and Alexandra Kimball's book is filling this gap. If childfree women seem to have found their place in feminist groups, infertile women still struggle to make their voice heard and were failed by mainstream feminism. A similar fate awaits mothers who make parenting choices that are not in line with mainstream feminist ideals, such as extended breastfeeding and attachment parenting, to mention just a few. Which challenges does feminism need to face in order to represent/include all women in our contemporary world and societies?

I must admit that I am not really into the more subtle feminist questions, which sometimes seem to me to disperse energy away from the fundamental points, the first of which is to demand and obtain equal rights and opportunities, in the face of a world still dominated by men. In this context, it is not acceptable that a woman's condition, whether mother or non-mother, and even less the circumstances for the one or the other condition, may constitute her distinctive trait in the eyes of society.

As a matter of fact, nowadays, in our real world, the desire for motherhood can involve a number of difficulties, and more and more often women are forced to consider the possibility of having children too late in relation to their biological age, so that, eventually, infertility becomes both a consequence and a cause of distress and difficulty. As we know, in most Western countries, and in Italy more than in any other, childlessness is constantly increasing, for economic and logistical reasons. It is therefore imperative to give all women the choice to have children if and when they want to, without having to postpone or give up motherhood for issues related to competitiveness at work or wages. This is I believe one of the most important things women must ask from societies and governments.

There is another point, however, I want to mention, namely the fact that in the more economically advanced Western countries, perhaps precisely because of the ever-decreasing birth rate, an attitude that I would define as proprietary towards children is developing. This is actually the key in which I see some practices, whose soundness for the health of women and children is quite doubtful, and which in my opinion go beyond the limit to which it is desirable to extend solidarity and inclusion. I am thinking not only of the extended breastfeeding and attachment parenting you mentioned, but also of even more extreme practices, such as the refusal to cut the umbilical cord, or the preservation of the placenta. I am also thinking of some extreme practices of assisted fertilization, about which it is hard to reach definitive opinion, both with regard to their medical safety, and with regard to their ethics, in view of the rights of the unborn, or of the child.

According to Blook and Pebley (1982) childless women are divided into three different categories: childfree (voluntary childless); temporarily childless (do not have children but will have them in the future); involuntary childless (unable to have children). What are the differences in the way childless and childfree women are perceived in today's society? What are the challenges faced by these women?

I believe that my point of view enjoys a positive bias on this issue. For people involved in biomedicine, childlessness mostly represents just one of the many possible conditions in which women (and men) can find themselves. That is, an issue to be resolved or ameliorated to the extent of various possibilities, when it is associated with physical or psychological suffering. When childlessness is voluntary, however, it is simply a personal choice, among the thousands that are possible for everyone. Assisted fertilization, I believe, is not conceptually very different, let us say, from putting braces on one's teeth, or getting a laser for myopia, or being operated on appendicitis. It is just another of the many things that men and women do to attempt to improve their condition. I am certainly not sure that this viewpoint is common in the wider society, but I am convinced that it should be.

In Italy, on the other hand, a most serious problem is our low birth rate: for the past several decades, the birth rate has been only about 1.3 children per woman. This is leading to a shrinking

and aging of the Italian population, whose consequences are already proving quite serious. This problem is to be attributed to the low income of young couples, the discrimination that women with children face at work, and the lack of childcare facilities such as full-time nurseries and schools. Involuntary childlessness, therefore, is not just an individual issue, but also a very serious social problem, that needs to be tackled in the shortest possible time.

The artificial uterus will be a reality soon and biotechnologies are continuously improving, opening new and unexpected scenarios. As a science-fiction writer and a scientist: what are the potential opportunities, risks, and challenges infertile couples will face in the future?

I would not quite say that the artificial uterus is really a development expected to become available in the near future, although there is very active research ongoing in the field, as I discussed in my popular science book *In Utero* (2018). Indeed, the interaction between the embryo and the mother's body involves an endless series of biochemical and cellular processes that our current biotechnological capabilities will not be able to reproduce for long time. Still, we are glimpsing now technologies of different types, capable of bringing even greater changes, from a conceptual point of view, to reproductive methods, in a relatively short time. Among these, I want to mention first the possibility of genetically manipulating the genome of the embryo, using the recently discovered CRISPR technique. The first developments of this method will certainly be aimed to therapeutic uses. This in itself can have a deep impact in society. In fact, we know that many diseases, and especially cancer, are tightly linked to the genetic background of the individual. Cancer remains one major problem for biomedicine, since from the post-war period to today, prevention and cure have not seen the improvements hoped, considering the huge amount of funding invested in research all over the world. When compared, for example, to the cost-benefit ratio for vaccines, cancer research may easily look disappointing. A revolutionary approach to the issue may perhaps one day be to replace the gene variants predisposing to cancer (many are known by now and new ones are being constantly identified in recent years) with less cancer-predisposing variants, in individuals and in populations.

The most troubling development of these technologies, however, is the theoretical possibility to use manipulation techniques in order to produce tailored individuals, i.e. to introduce in individuals and in populations genes "desirable" from an "aesthetic" point of view, or genes that increase performance in specific activities. This is a quite critical aspect from an ethical point of view, and very dangerous biologically, since we know that reducing the genetic variability of a species makes it less able to adapt to possible changes in the environment in which it lives. Finally, other possibilities that seem to open up at the present derive by the recently discovered possibility of manipulating cellular plasticity *in vitro*. Recent studies indicate that it would be possible to reverse differentiated cells of the adult organism – for example, skin or blood cells – bringing them back to the stem cell stages, from which they may then be re-differentiated into oocytes or spermatozoa. If technologies of this kind would become truly feasible, the possibilities associated with reproduction would be enormous. First, any individual could produce gametes up to old age; moreover, reproduction between individuals of the same sex may become possible. Finally, by producing eggs and sperm from the same individual, whether female or male, it may even become possible to reproduce without the genetic contribution of a partner.

It is quite clear that such possibilities would open ethical questions of great complexity, with very profound social impact.

Trauma related to childbirth, childlessness, miscarriage and infertility is common. In your opinion, how could trauma be avoided in the first place and/or healed?

As a researcher, I obviously tend to view advances in biomedical technology as the most important system of alleviating or resolving human distress, regarding reproduction as well as other forms of suffering. On the other hand, I am fully aware that nature does not have the benevolent face that it is commonly credited with, and that its power is infinitely greater than any of our technologies. Life exposes all human beings to varying degrees of loss and trauma. As regards maternity in particular, we all know very well how until a few decades ago pregnancy, and especially childbirth, were events capable of putting women's health at serious risk. In fact, in those days, infertility granted women a great benefit, that is to gain an increased life expectancy. We also know how very high infant mortality led to the loss of a large number of children within the first years of life. From this point of view, I believe that motherhood cannot be considered a right, any more than it can unfortunately be viewed as a right to be born without any deficit in one's body. On the contrary, we know that each of us carries buried in its genome a large number of pathological or lethal genes, which remain hidden only as long as chance permits, but can become evident in particular circumstances of life, or reappear in the progeny. I therefore believe that if despite all efforts, a woman finds herself having to face the unwanted impossibility of having children, she should never give in to seeing herself as a deviant or an excluded one, but keep in mind that nature is built almost only of variability and error. Infertile women (and men) are fully part of a human population in which infinite individuals, all different from each other, each with its strengths and weaknesses, together make up a multifaceted unity, not by chance, but by necessity of nature.

Part 4

Recovering from the Stigma of Childlessness

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Impossible Monologues of three *Lunàdiga*⁶

Carlo Antonio Borghi
Translated from the Italian
by Daniela Travaglini

1. Livia

I am Livia Drusilla Claudia Julia Augusta.

Many women in one, all Roman and patrician.

I am so many women that, speaking as Livia Drusilla Claudia, I can say that I have been a wife and a mother, but I can also say, as Julia Augusta, that I have been a wife but not a mother.

A dual female personality.

I say this because as the wife of emperor Augustus, in fifty-one years of marriage, I have not produced any children. I bore him no Augustan offspring to bequeath the Roman world and the Empire.

The Empire, in fact, went to Tiberius, the child I had had with my previous husband Tiberius Claudius Nero, a cousin of mine.

I married Augustus before I turned twenty. Everyone in town wondered why, in half a century of marriage to the Emperor, I had not borne any children.

Historians, of course, made countless assumptions. Everybody knew I had married him out of political convenience, mainly to ensure that the *gens* Claudia would be related to the *gens* Julia. But it always seemed rather strange that no children were born. From the marriage to Augustus, however, the Roman empire began. No small matter.

Born in 58 BC, I became a wife and a mother around 40 BC, then *lunàdiga* from 38BC to 29AD, the year of my death. We did not have any children and the explanation is very simple: I never yielded to the divine Emperor *pater patriae* and I always avoided my marital duties because he was a bit of a dandy.

⁶ The three monologues have been written by Carlo A. Borghi specially for this volume.

He always preferred the brothels where he entertained himself with young centurions for days.

I did not like any of this. Moreover, I preferred to spend my time going to the theatre with the beautiful and lovely vestal virgins, who surrounded me with affection.

It was the same behavior chosen by nymph Daphne with god Apollo. No children. I understood I had made the right choice.

Augustus was a man with several health problems, mainly with digestion and liver. I looked after his well-being, that is true, and to make him feel better, I always prepared for him infusions and herbal teas extracted from precious aromatic and medical herbs.

My *aromatic garden* was renowned, and I personally tended to it. Equally well known was my *lauretum*, the grove of laurels.

I was still young and beautiful when an eagle flew over me while I was lying in the sun and dropped in my lap a white hen carrying a laurel branch in its beak.

Hence the birth of *lauretum*.

If you want to get to know me better, come and visit me. The address is Livia's Villa, via Flaminia, Prima Porta Cemetery.

It is exactly nine miles from the center of Rome.

Here where I am staying, besides the thermal baths, there is also a swimming pool that we call *natatio*, so it looks like the Great Gatsby villa.

Ave atque vale. I salute you reminding you that I was also the founding muse of a city that in my time was called *Forum Livii* and that is now called Forlì. *Sic transit gloria mundi*.

Rome, May 2020.

2. Teresa d'Avila

¡Adelante, adelante!

I temporarily leave my mystic and intimist ecstasy.

I do not have much time to alert you. You women of your time are dazed by too many images and too much information. You modern and contemporary women find yourselves tossed around in a state of audiovisual hallucination that instead of broadening your consciousness, narrows it down to the point of making it numb.

This is too much, too much, too much!

In my time I relied on one image only, that of the one and only Savior Lord of my body and soul.

He said that it would be my only Book, written and illustrated, and that I should not be sorry for all those beautiful books prohibited by the Inquisition.

I was born in Avila in 1515.

Raphael, the greatest and divine painter from Urbino, was still alive.

I was beautiful, sturdy, tireless.

At the age of eight I had already read many biographies of saints and many chivalric romances. I was a wanderer and hyperkinetic.

I have never been to Sardinia, the island that for so long belonged to Spain and where you women without children have created the *Lunàdigas* project.

You summoned me and here I am to bear witness to my life as a woman and as a saint.
Christ had appeared to me to tell me: *do not lose your heart, I will be your living Book.*
I wrote in return: "*our Lord, in His loving kindness, has educated me in so many ways that I have had almost no need for books since then.*"

Literature is also a form of transcendence.

I have been a *hidalga* like Don Quixote but dressed as a Carmelite and without Rocinante.
We Carmelites used to go barefoot from quarter to quarter, with our feet well on the ground to feel all the harshness.

At the age of ten I ran away from home with my brother.

Even then, all I could think of was preaching, relying on my visions. Moreover, I wanted to convert the Moors.

I am *Teresa de Cepeda y Ahumada*.

I became a saint very early on, only thirty-five years after my death. I spent all my life believing that no man, whether a peasant or a landowner, could lay his hands on my womanly body after I experienced the beauty of Jesus, who chose me among many others. There is nothing better than a spiritual wedding. There is no earthly orgasm that could possibly equal mystic excitement. Chastity is where truth resides.

And now do repent!

Repent of too much food, repent of your morbid and sinful body. Repent of your gaze filled with embarrassing images.

The web is a net set up by Satan who can transform you into *fallen angels* without any possible Transfiguration. It is a trap.

So, listen to me and repent now!

Don Quixote rode on his Rocinante.

I walked barefoot or rode on the back of a donkey to find new convents with twelve nuns and one abbess.

If you wish to get to know me better, try talking to the sculpture that Gian Lorenzo Bernini made of me.

If you succeed, Teresa will tell you some unimaginable stories which have no rhyme or reason.

What could emerge is a Teresita a bit *morosita* and a bit *Carmencita*.

One should always *desconfiar de sí*, that is be wary of oneself.

May God forgive me and have mercy on you, sisters *lunàdigas*, who refrained from crossing the Red Sea of pregnancy and childbirth.

¡Hasta la vista! Even though you know nothing of ecstatic and prophetic visions, it is never too late, and you must have faith.

Good luck with or without moon.

I go back to my psychedelic and ascetic *buen retiro*, where I allow myself to eat one fig. But not every day.

We kinesthetic visionaries see things that you simple creatures cannot even imagine.

You are women from the twentieth century, incapable of sublimating.

You read illustrated magazines, always ready to be charmed by Ikea and Amazon.

Even having children can be considered a redundant act, a praise of the superfluous and of consumerism. Think about it when you read my writings, maybe.

In my *El libro de mi vida*, you will find what you now call *tutorial* to achieve a trance state in your room with your eyes shut.

It is a kind of trance which is not achieved through a man's loins.

Enough with sermons now, I sneak away to enjoy a sangria.

After all, it is always the exception which confirms the rule, including the rule of the Carmelites, barefoot and chaste by choice.

Pope Paul VI appointed me Doctor of the Church, but I never felt much of a lady doctor nor, frankly, much of a Lady of Sorrows.

I have sublimated all my sorrows in ecstasy. I would have done the same also with the pains of childbirth, if I had ever experienced them.

But I never had children. Not even my *El libro* can be considered as my own child. It was merely a collection of autobiographical accounts intended for the Holy Inquisitors who wanted to keep an eye on me.

If I ever made a wrong move, I would have crossed the line with witchcraft.

I must confess that even food can give you ecstasy. I say this from personal experience. I always loved being in the kitchen and cook for myself and for others. So, I have really appreciated that artist Marina Abramović wanted to dedicate one of her performances to myself as a mystic cook. She called it *The Kitchen*.

Marina Abramović belongs to the *Lunàdigas* women in her own right. After all, even we mystic saints can be considered authentic performers. *Adiós* my beloved women, beautiful and sterile, *who were not made to live like beasts yet to pursue virtue and knowledge (also carnal)*.

Remember that my ascetic uterus is not as empty as yours.

My mystic womb is always full of angel curls that came and went as they pleased, giving me so much pleasure from cosmic light.

The matter concerning us women is an open matter.

A narration in the making, an ongoing revelation with the prospect of salvation.

Every uterus is a Tree of plenty and, just like that tree, it generates neither leaves nor fruits, but it is still a symbol of fertility.

I was born while your Niccolò Machiavelli wrote *The Prince* and *The Mandrake*. In those times people were convinced that an herbal infusion could make sterile women fertile. After all, those were the times when people believed that you could get rid of the plague just by sprinkling fragrant perfumes on you.

Buenas tardes, señoras ... vamos con Dios.

Remember to repent at least once a week.

Make an act of contrition. If you had done it more often, you would not have ended up with that terrible pandemic that has turned your lives upside down.

Buena suerte, my lunàdigas.

Alba de Torres (España), June 14, 2020

3. Mafalda

I am a Mafalda. I am that 56-year-old girl Mafalda, born in 1964 from the pen and imagination of Quino, my cartoonist.

Nowadays people in their fifties are expected to make the world and society a better place. It is a great responsibility. I have started to do my share early on. I was rebellious Mafalda, the girl who always wanted to know why the world was full of wars, racism and poverty. I have always asked myself these questions in every comic strip which I populated with my parents and my schoolmates.

I have always thought that there was no valid reason to have children in such a world, although I do understand that children are bodies which belong to the future ... but it is what it is. I never regretted my choice, far from it: now as a 50-year-old menopausal woman, I consider it to be one of the best decisions of my life.

In my native Buenos Aires, there is a square dedicated to myself.

I often go there to listen to the stories told by the mothers and grandmothers of the *desaparecidos*.

I love their brave determination.

I arrived in Italy in 1968. It was the right year to try and make things right in my own way.

Quino used to listen to the radio while he was drawing me.

In 1973, crushed by the dreadful news about the state of the world, he stopped drawing my strips, shortly before the military regime took over Argentina.

The Vietnam war was ongoing. And then came the coup in Chile.

Boy! What a terrible time!

I am contemporary of *Peanuts'* Lucy Van Pelt. But she stayed on the scene much longer. We had in common this urge to ask a lot of thorny questions, although I became a real expert on this.

I have had quite a few admirers.

I know for sure that there is still a poster of me hanging in some house, the one made for UNICEF in 1976.

I never had any children, nor dolls, especially no Barbies. That fake naïve representative of the American imperialism that caused so much pain to my beloved South America.

Thanks, but no thanks.

I hate soups. I understand that ready-made soups are very useful for families in which women are still the ones who must cook and lay the table, but I hate them all the same.

I love *los camarones en escabeche* very much. Even Frida Kahlo used to cook them for that gourmand that was Diego Rivera.

By the way, a question I never asked was about gender gap ...

My mother Rachele used to play the piano and studied at university, nevertheless she had to quit everything to devote herself to her family. And I always felt sorry for that.

Motherhood should be a right. You can always choose whether to become a mother or not. But all women should be entitled to maternity allowance, otherwise only those financially secure can choose to have children.

I am waiting to see my wish fulfilled.

Mafalda is an unusual name. It was never a burden for me to carry it and those who hear it, do not forget it.

It means *strong in battle*, just like me.

Mafalda, your dear hotheaded girl.

Mafalda, the little rascal. It feels like I turned forty a lifetime ago and I am still here, defending the right and the freedom to ask questions.

So, here's another one:

What can we, the Mafalda women, do for the Lunàdigas women?

Buenos Aires, November 2019

Laura Lazzari & Nathalie Ségeral
in conversation with two *Lunàdigas*:
Nicoletta Nesler and Marilisa Piga

What was your agenda (if any) when you started to film your documentary?

We have been working together since the early nineties and from the very beginning we found a deep understanding on how to interpret our role as authors and directors. The first area of research we identified was that of people with disabilities. Our approach from the beginning has been curious and very direct even with regard to the most intimate sphere. It led right away to positive results.

We have always been interested in people and topics that are little explored and considered uncomfortable. The project to which we have dedicated our passion and time since 2010 falls into this category: *Lunàdigas* or about childless women. We have chosen the neologism *Lunàdigas* as the idiomatic title of our work in the absence of an equally incisive term in the Italian language. *Lunàdigas* is a word used by Sardinian shepherds to define female sheep that sometimes do not reproduce. It has been many years since we started thinking about researching childless women. The idea came suddenly, just like an urgency that had been put away for too long.

It immediately seemed like a difficult challenge. The urgency to start to work immediately clashed from the beginning with the rather lukewarm manner in which our requests were met by the women we decided to interview. Our certainties wavered. It took time to acquire, first of all, the right awareness of the condition we wanted to tell.

Eventually it worked out; little by little we felt the increasing and overwhelming need on the part of the protagonists to speak out. Our goal was to represent this complex and little-known reality and the unexpected reasons and feelings that emerged, that are different for each childless/childfree woman.

Autobiographic accounts are common in readings about motherhood, infertility, miscarriage and childlessness. Autobiography is also central/instrumental to your work. What are the strengths and drawbacks of autobiographical accounts related to stories of motherhood and non-motherhood?

Lunàdigas travels through Italy and tells the stories of famous and anonymous women, met face to face, in groups, or with their partners; women born before, during and after WWII, but also young women in their twenties and thirties, determined not to have children. Faces and words of women lead us through a century of Italian life, up to the present day. It emerges that emancipation has not been able to change the stigma attached to childfree/childless women.

Research in Social Sciences display samples of women that are valid for all. Our own experience as *lunàdigas* helped others to share their personal experiences. And here are the confidences, the unconventional words, the unexpected themes; we feel that after years of silence the time has finally come to speak freely. And the response has arrived in sincere and vibrant ways.

At that point it was impossible for us to remain confined behind the camera. We wanted to tell an experience that was also ours: so, we decided to appear in person in the film and share our personal stories, in order to affirm that the world of the *Lunàdigas* concerns us, and that we

are part of it. Our participation is inserted in a musical and iconographic frame inspired by the fifties; a stylistic choice that is reminiscent of our childhood. The complete autobiographical stories collected in Italy and in many other parts of the world make up the *Lunàdigas* Live Archive, an endless work in progress, accessible to everyone, that display true stories told in the first person.

A drawback of autobiographical accounts is certainly the lack of objectivity: the perspective is exclusively that of the narrator. But in the case of motherhood and non-motherhood we do not perceive it as a real disadvantage, as stories so intimate and sensitive are meant to be subjective and personal. Each woman's story about her own experience of (non-)motherhood is like her fingerprints: unique.

Giusy Di Filippo states that: "Nesler and Piga seek to finally open up a 'potential space/place' on the Internet that permits an interpretation of non-maternal identities as equivalent alternatives to maternal identities in the Italian context" (Faleschini Lerner and D'Amelio 2018, 239). Social media have been dividing people and polarizing opinions. The *Lunàdigas* project started as a platform, it later became a film, and the discussion is still ongoing on Facebook. In group discussions, mothers often oppose non-mothers and it is sometimes difficult to find a common ground: mothers are described in negative stereotypical ways, as passive victims of a patriarchal system, whereas childlessness is represented as a preferable condition. In your opinion, will women eventually find a common ground and respect choices made by other women even if they are different from theirs?

Why is it expected that women find common ground and respect all the choices made by other women? Is the same expected of men? Women are not a homogeneous category: they are people with their own experiences and opinions that can conflict with those of others. Motherhood is certainly a complex and multifaceted theme that involves women's most intimate choices that each of us faces in different ways.

Unfortunately, stereotypes and prejudices imposed by a patriarchal culture still weigh on motherhood and are difficult to eradicate. There are still too few spaces in which we can talk openly about motherhood. Moreover, challenging the dogmatic idea of motherhood as a personal and human fulfillment for every woman is still a taboo. It is unacceptable not to desire children. Nor is it to live and conceive motherhood differently from the social norm. It is therefore easy for this topic to become a battleground, even among women who grew up and were educated in a patriarchal context. In our Facebook group "*Lunàdigas*, or childless women" we want to offer a safe space to discuss on issues related to motherhood without feeling judged. We want to go beyond the concepts of "good" and "bad" women and mothers.

In pronatalist societies, negative stereotypes on childfree and childless women are still widespread. Feminist discourses have traditionally supported and promoted a revolt against maternity. Infertility, however, has not yet been part of the discussion and Alexandra Kimball's book is filling this gap. If childfree women seem to have found their place in feminist groups, infertile women still struggle to make their voice heard and were failed by mainstream feminism. A similar fate awaits mothers who make parenting choices that are not in line with mainstream feminist ideals, such as extended breastfeeding and attachment parenting, to mention just a few.

Which challenges does feminism need to face in order to represent/include all women in our contemporary world and societies?

The feminist movement has always advocated for self-determination of women over their own bodies. It did not carry out a revolt against motherhood but rather a revolution against the idea that a woman should always be a mother and that this was the only role that patriarchal society granted her. As authors and activists who have investigated the theme of motherhood and non-motherhood, we have never perceived a stigmatization of infertile women by the feminist movement.

Today the concept of inclusion is outdated, as having the possibility of including “other” subjectivities already entails a position of privilege: if there is someone who has the power to choose who and how to include or exclude in order to have one’s rights respected, it means that an unfair dynamic is being carried out. We would therefore speak of intersectionality rather than inclusion. Intersectionality is a concept of sociology that considers our identities as the result of the intersections of several aspects that characterize us, such as gender identity, sexual orientation, ethnicity, age, religion, presence or absence of disability, level of education, economic condition.

Intersectionality means considering each person as a unique being, with different needs depending on their characteristics and on the context in which they live, where there are oppressions as well as privileges. Being a white person, for example, is a privilege in our society, as is being a man, being heterosexual, having a college degree and so on. We need intersectionality, therefore, to understand what our privileges and oppressions are. From this position we can start relating to other subjectivities, listening to them and respecting them.

Flavia Dzodan, a feminist who has always dealt with infertility, coined the famous maxim: “My feminism will be intersectional or it will be bullshit.” Her statement has become a famous Internet smash, a rallying point for modern feminists seeking to break away and distinguish themselves from the previous generations of feminists, primarily focused on gender equality and promoting equal rights for women. Another important battle Flavia Dzodan is fighting is against the tendency of many feminists to ignore racial abuse in the Western world ruled by capitalism. Of course, intersectionality opposes the glorification of capitalism, especially since production for profit often hinders the equality of marginalized people and cultures whose work almost always produces that same profit.

According to Blook and Pebley (1982) childless women are divided into three different categories: childfree (voluntary childless); temporarily childless (do not have children but will have them in the future); involuntary childless (unable to have children). Childfree women constitute the majority of women interviewed in the *Lunàdigas* documentary, even though other categories are also represented. What are the differences in the way childless and childfree women are perceived in today’s society? What are the challenges faced by these women?

We do not believe that talking about categories of childless women is the right course of action: these three categories, in fact, often overlap or follow each other in a woman’s life. However, they all share one stigma: that of not being mothers. Patriarchal culture teaches us that giving birth and raising a child is the natural destiny of a woman, her primary task within society and in the family.

When this does not happen, whatever the reason, we are considered half-women, women not fully realized, women who lack something. In the worst-case scenario and in many cultures, childless women are not even considered “real” women. This discriminatory idea is also reflected in the Italian language – but not only – which uses only negative expressions to speak of women who do not have children: “non mothers,” or “without children.” In fact, in the Italian language there is not a positive definition, such as “childfree.”

This is the reason why we were forced to look for a new word that had a positive meaning, and we found it in the Sardinian language: *lunàdigas*! Among the various declinations of being *lunàdigas*, the one that is most negatively judged by our society is certainly the woman who chooses not to have children. While the rhetoric of paternalistic commiseration against women who are unable to procreate is fierce, it is even worse against those who do not want children: not only are they childless, but they do not even try to change their condition, so the fault is exclusively theirs. Moreover, when a young woman without children postpones the idea of getting pregnant, or says that she may not want to have kids at all, people feel entitled to warn her, convince her, even frighten her, as if these were bizarre and unnatural thoughts: “you will change your mind,” “you are still young,” “we have all been there, eventually you will too,” “having a child is the most beautiful experience in life, you will see,” “you will be alone,” “who will assist you when you are old?”, and many more sad scenarios.

Strong and self-confident childless women are represented both in the *Monologues* and in your documentary. Unfortunately, childlessness, miscarriage, infertility and childbirth could also produce traumatic outcomes. The *Lunàdigas* project is meant to normalize childlessness in our society. What else could be done to avoid traumatic outcome or heal from trauma of social stigma?

Working on cultural perceptions is always the starting point. We will not be able to change the way society sees *lunàdigas* if we do not change the mentality with which we look at this life choice. We do not think that we have only met and listened to “strong and self-confident” women in our documentary. Many shared their doubts and vulnerabilities, each one of them different from the others.

Unconventional choices are always traumatic because they do not respect the norm and therefore are fought by society. Even people who look stronger on the outside have become so after a personal journey that led them to overcome the trauma of stigma. We think that one of the best ways to heal is by promoting a dialogue among women willing to question themselves on the theme of motherhood: for this reason, the *Lunàdigas* project was born. To give voice to childless women, allow everyone to listen and recognize themselves in them, start talking about childlessness outside stereotypes, and finally change all together the narrative about *lunàdigas*.

The project and film are about *Lunàdigas*, or *Childless Women*. Could you tell us how the collaboration with Carlo A. Borghi, author of the *Monologues* started, and why the *Monologues* were written by a male author?

The author of the “Impossible Monologues of three *Lunàdigas*,” written specially for this publication, is Carlo A. Borghi, artist, performer and creative mind – together with the authors –

of the *Lunàdigas* project since its inception. Borghi also defines himself a *lunàdigo*. His motivation not to procreate is due to the fact that he is a carrier of a genetic disease – retinitis pigmentosa – which at a very young age deprived him of sight. Hence, the desire not to give birth to a child also concerns men, albeit from the different perspective of paternity.

Since the beginning of the *Lunàdigas* project we have wanted to also include men's stories. Men who have consciously decided not to have children or have not had them due to their partners' preference. Their point of view enriches the topic of our investigation, adding new facets to a complex and heterogeneous topic.

Carlo A. Borghi gave us his perspective as a blind artist and *lunàdigo* man. With imagination and creativity, he gave voice to iconic women of history, myth, literature, art, adding a fundamental piece in the multifaceted world of *Lunàdigas*. When asked "why does a man write about women?" as an expert of Ovid's *Metamorphosis*, he replied, "I find it natural to put myself in the shoes of women: actresses, mystics, writers, artists, nymphs, goddesses, bandits, poets, heroines, saints."

Why have you chosen to have this resolutely light-hearted approach to childlessness and to refuse discussing trauma?

As previously mentioned as far as disability is concerned, a subject also experienced by one member of our project, we knew how dramatic it could be to interpret reality in traumatic and painful ways. It was important for us to change the narrative. Therefore, we decided not to focus on traumatic aspects in order not to reproduce the usual attitude of self-pity around disabled people. Rather, we have chosen a light-hearted approach by using self-irony. Trauma was there and will be there anyway, but we were not interested in focusing on it. Following through with the same approach, later applied to our research on *lunàdigas* women, we found a community eager to talk freely about themselves with an open heart and without mention of trauma.

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