

CHAPTER 7

Sperm Donation and Adoption

HASAN AND HIS RESISTANCE

When I met Hasan in a Beirut IVF clinic, his first words were, "I have suffered a lot in my life." He launched into the harrowing tale of his capture by the Israelis in 1983 and his two-year detention in the notorious Khiam Prison (now a museum) during the Lebanese civil war. He was put in solitary confinement—"where you could not see day from night in some of the cells, and there were no toilets"—and forced to eat the same food, without any meat, for the length of his imprisonment. He was also tortured with electricity to his genitals on three separate interrogations, "and there were many interrogations." As he explained, "I wasn't married then, and I didn't do a sperm test before marriage because I was young then. This was almost twenty-three years ago. But *maybe* this [the torture] is the cause of my sperm problems." In addition, upon his release from Khiam in a prisoner swap with the Israelis, Hasan was involved in a major car accident, breaking twenty-four bones, suffering internal bleeding, and experiencing two months of unconsciousness as a result of a severe head injury that required brain surgery. Unfortunately, such car accidents are common in Lebanon as a result of war-torn roads and general lawlessness. Or, as Hasan put it quite bluntly, "The war was very bad. We lived our life in the war, and we suffered a lot."

Today, Hasan is a forty-two-year-old police officer in southern Lebanon, who describes himself as a member of Hizbullah, or the Lebanese "resistance" (i.e., to Israel). Tall, thin, with jet black hair, a neatly trimmed beard, and a moustache that partly occludes his poor dentition,¹ Hasan has been infertile throughout the nine years of his marriage, suffering from "variable oligospermia," or sperm counts that fluctuate below normal. "I've had *many* sperm tests," he explained. "The number goes up and goes down. It is not fixed. But there is 'weakness,' the doctors said." Although he has impregnated his thirty-five-year-old wife, Khadija, four times, she has gone on to miscarry early in each pregnancy.

In an attempt to overcome his infertility, Hasan has undergone varicocelelectomy but believes that this pointless operation helped only the Leba-

nese physician with his "commerce." In addition, Hasan has taken many hormonal medications, including the brand-name drugs Humegon, Pregnyl, and Clomid, all in unsuccessful attempts to increase his sperm production. Upon learning that his infertile male cousin had visited an IVF clinic and had produced triplets with his wife, Hasan decided to follow suit. As he explained, "We had hoped to get pregnant and make a baby without doing ICSI, since she's been pregnant four times. But she's thirty-five years old now. We've tried, but now I'm forty-two and she's thirty-five, and we're afraid we'll get too old." Hasan continued,

In our society, when a woman is the cause [of the infertility], the man will leave her and divorce her. So society will not have mercy on a woman who doesn't have a baby. But I'm only afraid that she'll reach an age when she can't have children, and then our society won't have mercy on her. I don't want her to experience this. I won't allow this social pressure. It usually happens, but I don't allow it. In general, I don't allow other people to interfere in my life.

According to Hasan, his wife Khadija has been his only sexual partner, because "I'm committed to my religion, to the *shari'a*. I respect and protect the woman, and I don't just follow my [sexual] desires." As a pious Shia Muslim, Hasan apologetically explained why he could not shake my hand—or any woman's hand—"not because I hate women, but because of my religion" (and its prohibition on "touch" across genders).²

Hasan also explained that he and Khadija were committed to each other and deeply in love, despite their unfulfilled desire for a family. He described childlessness as the only major problem in their relationship,

We *love* children. In my family, we are seven brothers, and some of them have sons who are almost my age. In my family, we do care about having children. I have many nieces and nephews, and I like to treat my nieces and nephews kindly, which makes her jealous. Her psychology is *very, very* affected! We don't have any other problems except this problem of not having children. But she accepts this situation, because if she didn't, she would have asked me for a divorce. She loves me *a lot!* And I would have changed [replaced] her if I didn't love her. It's very easy to divorce. But the husband and wife are one body, one soul.

When asked about whether his infertility had affected his sense of manhood, Hasan said,

I accept the fact that I'm infertile, but I always seek treatment and medicine to improve my situation. A person doesn't just sit and say,

"This is from God." Of course, in the Qur'an. . . [he stopped momentarily to explain that in quoting a passage in Arabic from the Qur'an, one must truly understand what the Qur'an is saying, and then he or she will understand "everything"]. There's a saying in the Qur'an that scientists are the people most afraid of God, because they get to that point of knowledge to really understand God's wishes.

IVF and ICSI are permitted in Islam, Hasan explained, as long as the gametes come from a married couple,

IVF is *halal* [permitted], if the sperm is from the man and the egg is from his wife, then there's no problem. But if the sperm is from outside [i.e., a donor], then it is *haram* [forbidden], and the same thing for the eggs, *haram*. But, if the egg is from my wife and the sperm is from me, then it is *halal* for the married couple. But in all Islam, in all religions, donation [of sperm and eggs] is wrong, according to my knowledge. The baby *has* to be from a married couple.

Although Hasan is a member of Hizbullah and follows the spiritual guidance of Ayatollah Khamene'i in Iran, he does not agree with the ayatollah's permissive position regarding sperm and egg donation. He is adamantly resistant when it comes to sperm donation, which has been mentioned by doctors in his case, but which he likens to adoption,

Sperm donation is like adoption. You can raise an orphan, but he has to stay on his [biological] father's family name. You are only raising him, because if he would be given your family's name, he could grow up and marry his sister without knowing it. This is incest! So you can raise the boy, and this is okay, but *not* change his name.

Although Hasan refuses to consider sperm donation, adoption, or even fostering a child in his home, he and Khadija practice *takafful*, a kind of guardianship in which they support the living expenses of a child in a

an educated teacher whom he loves and respects. Hasan ended his interview by expressing his desire to have a child with his own sperm and the eggs of his wife, whom he points out "does not have any problems" with her reproductive body. It is Hasan's love for Khadija—his feeling of being "one body, one soul"—as well as his Islamic piety, which has kept Hasan on the "straight path" toward ICSI. According to Hasan, this straight path to fatherhood does not allow for either sperm donation or adoption, for such a child "won't be my son."

ASSISTED REPRODUCTION AND NEW KINSHIP

Hasan is not alone in his resistance to both sperm donation and adoption as solutions to his male infertility and childlessness. The vast majority of Muslims, both Sunni and Shia, reject these options out of hand. As seen in the preceding chapter, Ayatollah Khamene'i in Iran has allowed sperm donation for his followers, but it is not a popular option, even in the ayatollah's own country.³ In the Arab countries, sperm donation is practiced only in Lebanon, but there, too, it meets with ardent resistance on the part of most men. As a member of Hizbullah and a follower of Ayatollah Khamene'i, Hasan is allowed the option of sperm donation. But Hasan stands firm in his belief that a child should be created within legal marriage, using the gametes of a husband and wife. To take gametes from outside the conjugal unit is *haram*, leading to the birth of a child who "won't be my son."

Hasan clearly believes that he cannot regard a child conceived through donor sperm as his legitimate son. Hasan's reaction is not surprising in that assisted reproductive technologies evoke strong feelings about kinship. Of all of the anthropological work that has been written about the assisted reproductive technologies, the most substantial and most foundational, in some sense, is that which explores the effects of the technologies on

sistance" of technologies and third parties. As noted by Strathern, assisted reproductive technologies have created "a new convention, the distinction between social and biological parenting, out of an old one, kinship as the social construction of natural facts."⁸

This early insight by Strathern served to spur a wide range of empirical research on assisted reproduction and kinship in Euro-America, leading to a number of major findings.⁹ First, given that Euro-American notions of kinship are biogenetically based,¹⁰ many infertile couples now "chase the blood tie"¹¹ in a relentless quest to produce biogenetically related offspring through the technology-assisted manipulation of their own gametes.¹² The very presence of assisted reproductive technologies has served to marginalize, to some degree, alternate means of family formation through adoption,¹³ once regarded in Euro-America as the "natural solution" to infertility.¹⁴

Second, assisted reproductive technologies have pluralized notions of relatedness and led to a more dynamic notion of "kinning," namely, kinship as a process, as something "under construction," rather than a natural given.¹⁵ In fact, assisted reproductive technologies can be thought of as "deconstructive" in introducing ambiguity and uncertainty into kinship relations, including the fundamental categories of motherhood and fatherhood.¹⁶ With the rapid rise over the past two decades of sperm donation, egg donation, and embryo donation,¹⁷ as well as agencies devoted to surrogacy,¹⁸ the number of potential solutions to infertility has dramatically expanded. As assisted reproductive technologies are applied to an ever-widening range of people and problems, they are unseating core notions of kinship and undermining the traditional family, by introducing a whole range of quasi-, semi-, or pseudobiological forms of parenting.¹⁹ The term "new kinship" has been aptly invoked by anthropologist Morgan Clarke to describe alternative family formation through assisted reproduction.²⁰ One of these forms of new kinship is exemplified in the Hollywood motion picture *The Kids Are All Right*, which examines "lesbian alternative insemination" among a gay couple (played by Annette Benning and Julianne Moore). The movie is based on the teenaged children's search for their sperm donor "father." Once found, the sperm donor changes all of their lives—with the question "for better" or "for worse" left up to the viewing audience.

Although assisted reproduction has led to a dizzying array of family formations in the West, relatively little is known about assisted reproduction and alternative family formation strategies in the non-Western countries, including Muslim societies, where more than half of the world's population of nearly 80 million infertile people is estimated to live.²¹ Furthermore, in most Muslim societies, kinship is central to social organization; thus, the

potential impacts of assisted reproduction on kinship and family life could be quite profound.²²

In light of such realities, it is important to consider how infertile couples living in predominantly Muslim Middle Eastern countries grapple with the new complexities of kinship brought about by assisted reproduction. What do infertile men think about the possibility of their spouse accepting donor sperm and bearing a donor child? Will they consider adopting an orphan? In short, what do Muslim men living in the Middle East think about "social fatherhood"—the very concept that allows so many infertile Western couples to "adopt" others' gametes and embryos, as well as children themselves?

As this chapter demonstrates, the very concept of social fatherhood is culturally contingent and is also deeply embedded in Muslim men's local moral worlds.²³ Local moralities govern ideas about the parenting of non-biological children, including those conceived through biotechnological means. For a number of reasons, the vast majority of Middle Eastern Muslim men do not accept the idea of social fatherhood as a solution to male infertility. As we will see, Hasan is certainly not alone in his resistance.

ISLAM, DONATION, AND DESCENT

In the Muslim world, attitudes toward family formation are closely tied to religious teachings that stress the importance of "purity of lineage."²⁴ Islam is a religion that privileges—even mandates—biological descent and inheritance. Preserving the "origins" of each child, meaning his or her relationships to a known biological mother and father, is considered not only an ideal in Islam but a moral imperative.²⁵ In Islamic *fiqh* (jurisprudence), the tie by *nasab* (i.e., filiation, lineage, relations by blood) is considered to be one of God's great gifts to his worshipers. The preservation of *nasab* is emphasized through Qur'anic rules designed to ensure the sanctity of the family and the society; by preserving *nasab*, personal and social immorality are prevented, thus leading to the maintenance of society as a whole.²⁶

In the face of such religious edicts, the concept of social parenthood—of either an adopted or a donor child—is considered untenable in most of the Muslim world.²⁷ The vast majority of Muslim men, both Sunni and Shia, do not accept the idea of third-party gamete donation or adoption as solutions to their childlessness. Sperm donation is seen as particularly abhorrent. Men's moral concerns revolve around four sets of related issues: *zina*, or adultery ("It's like your wife sleeping with another man"); *sifah al-maharim*, or incest ("A brother and sister could accidentally marry each other"); *mahram*, or someone forbidden to you in marriage, thereby affecting gender compartmentment in family life ("You would have to remain

covered in front of this child"); and *nasab*, genealogy or filiation. In addition, two psychological issues are often cited—namely, the feelings of the donor child ("The child won't get the same love as my own child") and men's feelings of fatherhood ("He won't be my son. It would be like raising another man's kid").

With regard to the first issue, Islam is a religion that can be said to privilege—even mandate—heterosexual marital relations. As is made clear in the original Al Azhar *fatwa*, reproduction outside of marriage is considered *zina*, or adultery, which is strictly forbidden in Islam. Although third-party donation does not involve the sexual body contact ("touch or gaze") of adulterous relations, or presumably the desire to engage in an extramarital affair, it is nonetheless considered by most Islamic religious scholars to be a form of adultery, by virtue of introducing a third party into the sacred dyad of husband and wife. It is the very fact that another man's sperm or another woman's eggs enter a place where they do not belong that makes donation of any kind inherently wrong and threatening to the marital bond.

The second aspect of third-party donation that troubles marriage is the potential for incest among the offspring of anonymous donors. If an anonymous sperm donor "fathers" hundreds of children, the children could grow up, unwittingly meet each other, fall in love, and marry. The same could be true for anonymous egg donors. Thus, moral concerns have been raised about the potential for incest to occur among donor children who are biological half siblings. In a small country such as Lebanon, such half-sibling incest is a real possibility in the absence of a donor registry.

A third moral concern has to do with issues of family incest, or how parents and donor children should comport themselves in daily family life. To wit, a donor child is *halal*, or religiously permitted to marry a person who is not related by blood ties. Thus, feelings of attraction might develop between donor parents and their non-biologically-related offspring, especially in the intimate conditions of household life, where individuals are revealed to each other. An infertile parent who is not biologically related to a donor child could, theoretically, marry the child when that child reaches the age of maturity. Thus, in Muslim family life, proper comportment would have to revolve around the diminution of erotic feelings toward a donor child. This would complicate matters such as bathing, praying, veiling, and all matters pertaining to "touch and gaze."

The final moral concern voiced by Muslim men is that third-party donation confuses issues of kinship, descent, and inheritance. As with marriage, Islam is a religion that can be said to privilege—even mandate—biological inheritance. The problem with third-party donation, therefore, is that it destroys a child's *nasab* and violates the child's legal rights to known parentage, which is considered immoral, cruel, and unjust.

Men use the term "mixture of relations" (*ikhtilat al-ansab*) to describe this untoward outcome. Such a mixture of relations, or the literal confusion of lines of descent introduced by third-party donation, is described as being very "dangerous," "forbidden," "against nature," "against God"—in a word, *haram*, or morally unacceptable. It is argued that donation, by allowing a "stranger to enter the family," confuses lines of descent in Islamic societies. For men in particular, ensuring paternity and the "purity" of lineage through "known fathers" is of paramount concern. This is because most Muslim societies are organized patrilineally—that is, descent and inheritance are traced through fathers and the "fathers of fathers" through many generations. Thus, knowing paternity is critical.²⁸

Mothers, too, share kinship relations with their children through gestation and especially the sharing of milk through breastfeeding (often called "milk kinship"). However, descent itself is traced through the patriline, flowing through males to successive generations.²⁹ Thus, sperm donation in particular threatens not only a child's *nasab* but a man's patrilineage. Not surprisingly, then, Muslim men feel strongly about the importance of patriliny and paternity, claiming that a sperm donor child "won't be my son." Coupled with men's feelings that such children are created through *zina*, or adultery—"It's as if my wife slept with another man!"—the child conceived through sperm donation is considered to be of questionable moral character. Together, questions of *nasab* and *zina* lead to strong rejection of sperm donation. Or, as many men explained it, "the child would not be *from me*—it would be like raising some other man's child."

Bringing such donor children into the world is considered unfair to the children themselves, who would never be treated with the love and concern parents feel for their "real" children. Such a child could be viewed only as a bastard—a *walad al-zina*, "a child of illicit sex," or an *ibn haram*, literally "son of the forbidden." Thus, a child of third-party donation starts its life off as an "illegal" child. It is deemed illegitimate and stigmatized even in the eyes of its own parents, who will therefore lack the appropriate parental sentiments.

ISLAM, ADOPTION, AND FOSTERING

This firm conviction that parenthood of a donor child is impossible is clearly linked to the legal and cultural prohibitions against adoption throughout the Muslim world. In the Middle East, most orphans who are abandoned in hospitals or on the streets are *laqits*, or "foundlings," who are considered to be the illegitimate offspring of unmarried persons. Thus, an abandoned orphan, too, is a *walad al-zina*, or *ibn haram*, who is considered

morally tainted. As noted by Egyptian historian Amira Sonbol, "Illegitimate children themselves are regarded as a real stigma, almost a threat, a source of evil."³⁰ This view is upheld in the original Al Azhar *fatwa* on medically assisted reproduction, which states:

A legitimate child will grow and be raised by his parents in the best manner they can afford, while an illegitimate one is a shame for the mother and her people, neglected in the community and will then turn into a disease. Islamic scholars discussed illegitimate children in the books of Islamic law, [and] explained that they are human beings who deserve to be brought up properly and taken care of so as to stimulate what is best in them and avoid their evilness.³¹

The *fatwa* goes on to state that adoption of such children is explicitly forbidden in the Qur'an, "for the purposes of origin protection and family rights' preservation."

Nonetheless, the Islamic scriptures, including the Qur'an, encourage the kind fostering of orphans—whether these children are orphaned through the death of parents, parental poverty, or out-of-wedlock conceptions. The Prophet Muhammad himself was orphaned when his father died during his mother's pregnancy, and then his mother died when he was age six. He was fostered first by his grandparents and then his uncle. He, in turn, fostered an orphan child named Zaid. Eventually, he advised against the practice of adoption, or *tabanni*, involving change of a child's birth name to an adoptive surname, although he continued to encourage the kind upbringing of orphans.³²

The Prophet Muhammad's ruling against adoption has continued to be followed throughout the centuries in the Islamic world. Today, Islamic *shari'a* does not allow legal adoption as it is practiced in the West, whereby an orphan takes the legal name of the adoptive parents (usually the father's surname) and is treated as if it is a biological child through the mutually reinforcing mechanisms of co-residence, inheritance rights, and ongoing affective relations including unconditional love. This sort of "fictive kinship" is explicitly forbidden in Islam. Instead, numerous Islamic scriptures emphasize *nasab*, or blood relationship, as the only basis for paternity, making adoption, or *tabanni*, a sin equal to *kufr*, or apostasy.³³

The only three Muslim Middle Eastern countries where legal adoption is practiced are Tunisia and Turkey (Sunni-dominant but also "secular") and Iran (Shia-dominant and an "Islamic" republic). Iran's permission of adoption is not surprising, given its unique acceptance of gamete donation as well. In 1975 an adoption law was ratified, giving Iranian couples the right to legally adopt orphaned children, including the transfer of surname, birth certificate, and inheritance rights.³⁴ The law has not been

modified since that time; thus, infertile Iranian couples have the option to adopt as a way of overcoming their childlessness. After a six-month period of "adjustment"—where social workers from government child welfare agencies follow the interactions between the adoptive parents and child—the child receives a birth certificate in the adoptive couple's name.

Having said that, strong cultural resistance to adoption has been reported for Iran. Infertile couples there describe their "fear of people's words," concerns about the child being "illegitimate," and worry about the problems that might arise if "the child's parents turn up and want the child back."³⁵ Thus, even in "permissive" Iran, legal adoption is viewed as a "last resort" among infertile couples.³⁶ In short, in the Muslim Middle East, few infertile couples, either Sunni or Shia, will contemplate *tabanni*, or legal adoption, stating with conviction that it is "against the religion."

Child fostering is legally permitted and even encouraged in most Middle Eastern Muslim societies.³⁷ Nonetheless, fostering an orphan in the home is relatively rare and may be shrouded in secrecy. Infertile couples who do foster an orphan may attempt to pass the child off as their own biological offspring in order to avoid the severe stigma of such a fostering arrangement.³⁸ Anthropologist Jamila Bargach, in her book *Orphans of Islam*, calls this scenario "secret adoption," and describes how legal fostering in Sunni-dominant Morocco is shrouded in secrecy, falsification of birth records, and dissimulation.³⁹ In Lebanon, a Sunni Muslim family court judge I interviewed explained secret adoption in this way,

Adoption? In Islam, there is no adoption. In Christianity, yes, there is. But not in Islam. And given that my wife is very religious—she prays and fasts a lot—I don't think that *she* would agree to taking in an orphan. It would be a burden on us, because if the child wouldn't be registered in court by Islamic law, there are later problems at the time of marriage. Usually, when orphans are born, they manage to register them only by "cheating"—by false birth certificates—and they bring other liars as witnesses. It becomes a game for supposedly bearing children!

SUNNI MUSLIM MEN'S RESISTANCE

Given these attitudes, I was curious to know whether men in my Lebanese study would ever consider sperm donation or adoption as routes to social fatherhood. I was especially interested to know whether Sunni and Shia Muslim men might feel differently about sperm donation and adoption, given the permission of these practices in Shia-dominant Iran. Not sur-

prisingly, anti-donation and anti-adoption stances were expressed more vehemently by Sunni Muslim men in my Lebanese study. For example, of the forty-four Sunni Muslim men I interviewed about adoption, thirty-four of them (77%) absolutely refused the idea. Opposition to gamete donation was even stronger. Of the forty-eight Sunni Muslim men I interviewed about gamete donation, forty (83%) refused the idea completely, with nearly 100 percent opposition to sperm donation. Of all the Sunni Muslim men interviewed in Lebanon, only one man admitted to even contemplating sperm donation. He was an infertile Syrian physician, who had come to Lebanon with his Palestinian wife to try ICSI using his own sperm. At the end of his interview, he admitted to recently checking some anonymous sperm donation Web sites,

I did this secretly, because I know sperm donation is not allowed, and I don't like "mixing." It will create problems if it's not controlled by law. For example, it's a problem if, after one to two years, I have this [donor] son, and the donor knows to whom he gave the sperm, and he comes and says, "Okay, it's *my* son." It's not enough to control [donation] by religion; it needs to be controlled *by the law*.

This man's ambivalence about sperm donation is not surprising. In more than twenty years of studying assisted reproduction across the Middle East and Arab America, I have *never* met a Sunni Muslim man who ultimately agreed to using donor sperm. In general, Sunni Muslim men have a rather clear set of responses on various paths to social parenthood: absolute no to sperm donation, no to egg donation, no to embryo donation, no to adoption, no to in-home child fostering, and a qualified maybe to financial guardianship of a child living in an orphanage. When I broached these subjects further in some of my interviews, Sunni Muslim men often went well beyond the expected "It's against the religion" response to explain in a more nuanced fashion why they could not accept these various practices. As one infertile carpenter explained,

Egg and sperm should be from the couple themselves, not from an egg or sperm donor. If I didn't have sperm and took it from another man, for example, this would be *haram*, considered to be adultery. Other people may do it, but they don't abide by Islamic law. They just want to have a child. Personally, I wouldn't consider it, because it is *haram*, and I wouldn't really feel the effect of this thing that's forbidden until many years later. It's the same with adoption. I have a concern that when the child grows up, he won't regard us as his own parents. If we adopt, we wouldn't really feel comfortable looking at this child, given that

he's not our biological child. When he grows up, we would have to tell him honestly that he's not our child. Then his psychology would be affected. He wouldn't feel that hopeful. There would be a "gap" because he's not our child. If you have your own biological child, you will feel differently. He is your own child, so you feel attached.

Similarly, an infertile physician who had already been successful on two previous ICSI attempts explained that his wife still worried about whether excess embryos created in the IVF laboratory were donated to other couples,

My wife has her worries about fertilized embryos. Do they give them to other people? So, we asked the doctor, "What do you do with the embryos?" They said, "We will not kill them, but we let them out-grow their nutrients." He probably knows our religious background, because in our religion, it is not allowed to share genes. So he didn't offer donation for that reason. Neither egg nor sperm donation are allowed. Donation is not accepted in Sunni Islam. I've never seen a specific *fatwa*, but it's just a feeling that I have based on my knowledge of the religion. In Sunni Islam, if you breastfeed someone else's baby, it becomes a brother or sister to your child.⁴⁰ Egg donation is much stronger than that. It's like bringing a stranger into your family. So this is my assumption that donation is not accepted.

As suggested by this man's statement, Sunni opposition to gamete and embryo donation leads to abiding concerns about the disposition of excess embryos (i.e., will they be frozen, discarded, or donated to other couples?). In addition, Sunni Muslim IVF patients are often extremely concerned about the proper handling of sperm and eggs in IVF laboratories. With the routinization of assisted reproduction in Lebanon and other Middle Eastern countries, fears about laboratory "mix-ups" have clearly diminished over time, given that none have ever been reported for the Middle Eastern region.⁴¹ Nonetheless, embryologists described to me the great care taken in sperm processing and egg and embryo handling—especially in the absence of government regulation or laboratory monitoring of any kind. One Lebanese embryologist described the "paranoia of the lab—not to mix, not to lose embryos." Having said that, Sunni Muslim men in my Lebanese study still occasionally conveyed their concerns about intentional or unintentional "sperm mixing," especially with "black *bizri*" (black "seeds," or sperm), which would lead to the birth of a clearly non-Lebanese, multi-racial, nonbiologically related child. These fears of "laboratory miscegenation" were clearly fueled by the media, as one Lebanese man explained,

Doing IVF is not a problem for me, because it has become more common. But I read that a lot of mistakes are made. Recently, in London,

a woman brought black twins, even though she was white! I read this in the newspaper just last week, and it made me *very* worried. But, here, I see them always writing the names on the sperm containers. So I didn't question them about this.

Most men said that they trusted the IVF clinics where they were undergoing their ICSI procedures, as they had watched the careful labeling of semen containers. Men sometimes made funny quips about their fears of sperm mixing, joking that they would turn to DNA testing to confirm their paternity. Some typical remarks, made in jest, spoke to men's underlying fears: "They can't escape from me! If I have a son, the first thing I will do is a DNA test! I would sue them and get many millions!" Another man stated, "Not all people understand IVF, what it means. Perhaps they will think bad things about sperm donation or egg donation, and I'm worried about that. I'm paying a lot, and not for a black baby!" Or, as one man laughed, "Someone will get shot for that!"

Men who were timid about conveying their concerns to laboratory staff nonetheless openly worried about sperm mixing in interviews. As one man lamented, "Oh yeah—I'm worried! I didn't ask, but I made sure that she [the embryologist] labeled that cup!" Another man explained, "It occurred to me that they could make a mistake with my sperm. But I have no choice! I cannot follow them around with my sperm! And I'm not that kind of a person to ask the doctor about the precautions they take." When I asked another man whether he was concerned about laboratory mix-ups, he told me how he was forced to confront this issue in the clinic,

Oh, yes! Because there were two Fadias in the clinic that day. Another doctor came out and asked me, "Is your wife Fadia?" I said, "Yes." "Fadia Muhammad?" "No!" There were two women named Fadia that day, and thank God, they figured that out. So I told [the embryologist] to write *my* name on the [sperm collection] cup, because I'm white and maybe a black child would come from this!

Men's fears of sperm mixing, questionable paternity, and racial miscegenation were repeating themes, especially among men who had already experienced untrustworthy medicine in Lebanon. For example, one infertile man, who had undergone a botched varicocelelectomy and whose wife had undergone three unnecessary pelvic surgeries for ovarian cysts, was very, very angry at Lebanese doctors, calling them *haramis*, or "thieves." Although this Sunni Muslim infertile couple had no option but to undergo ICSI using their own gametes, the husband was very concerned about sperm mixing, claiming that at least one Lebanese IVF physician was performing sperm donation without the consent of his patients. Although I never heard this

story repeated during my stay in Lebanon, the man I interviewed claimed the following,

First of all, after three years of marriage, some doctors told me to do [intrauterine] insemination. However, I was afraid of that—that they would take another man's sperm, to put it in my wife. And of course, right now, I'm afraid, honestly. They told me that I have sperm, so there is no need for sperm donation. But if a baby comes, I will see if he looks like me! I would do DNA testing! Maybe if it's *very black*, like a black person, I will ask for that! [Really? Do you think that could happen?] It's impossible that they would take sperm from a black man, I think, but I do have some fear. Some doctors told me that there is a doctor [in Lebanon] who does this, but the patient doesn't know this. It is a crime, but this has happened in Lebanon. Some man who had no sperm, the doctor told him, "Don't worry! The next time, come to the lab and everything will be okay." And so the doctor just picked up any sperm, and it wasn't from the [azoospermic] man. Now there is a criminal investigation about this.

Lebanese men's anxieties about "black babies" are perhaps less an indicator of underlying racism—although color-based racism is certainly present in the Middle East—than about fears of phenotypic dissimilarity. Namely, men want their children to resemble them, for strong father-child resemblance is "proof" of paternity, including to the outside world. Children who do not resemble their fathers may elicit curiosity, even taunting by others, especially if their test-tube origins become known. The desire for father-child phenotypic similarity reflects men's desires for clear biological paternity (i.e., without the need for DNA paternity testing), clear patrilineal descent (i.e., without concerns about the child's *nasab*), and the prevention of social ridicule (i.e., without concerns about the child's future social well-being).

In my study, concerns for a child's social welfare were often found in Sunni Muslim men's narratives about adoption, and why they could not tolerate the possibility of adoptive fatherhood. One Sunni man who had briefly toyed with the idea of fostering a child in his home explained his reluctance in this way,

Here in Lebanon, not everything you believe you can do. For me, it's no problem to raise an orphan child. Maybe I could take this child home and not be embarrassed to raise him. But I can't do it because of the social environment. For me, personally, there would be too much embarrassment, for me and for the child. In Lebanon, maybe one in a million people would do this. There are cases, but they are very rare.

There is a program, an Islamic program called *takafful*, where you support an orphan and pay a certain amount every year, and you know the kid you support. I said to my wife, "There is no affection. You are just supporting a child. It's only financial." So I don't want to do this. And [gamete] donation, I would *never* do! If my wife ever mentioned this, I would say to her, "Shut up! I'm already convinced [not to do it]."

As suggested in this man's comments on *takafful*, Islam encourages the kind upbringing of orphans as a form of *zakat*, or charity to the less fortunate. Of the Sunni Muslim men I interviewed in Lebanon, fifteen men said that they would consider caring for an orphan, primarily through financial contributions to an orphanage. However, these were primarily Muslim men with adequate financial means. The thought of actually raising an orphan child in the home—either as a legal foster child or as an actual legal adoptee—was rejected out of hand by virtually all of the Sunni Muslim men in the study. One infertile man, an affluent physician, explained why adoption was equivalent to gamete donation, and why his wife was resistant to fostering,

Similarly, adoption is prohibited, and you're not allowed to take a baby and pretend like it's a "natural" baby, as if the name is your name and it's your child. Eventually you *must* tell the child that he is adopted. There is a *fatwa* about this. You have to tell them they're adoptees, and we can't give them our name. Many people here do "adopt" children, but not what you would call adoption in the States. It crossed my mind for a while, but my wife is against it. I considered it because I worked in a hospital [in the United States] where there are many children of teenaged mothers. I told my wife, "There are plenty we could raise," but she refused.

Another financially well-to-do Sunni Muslim lawyer explained why he considered legal fostering to be a better option than either gamete donation or adoption,

Donation is not allowed. From the religious point of view, he will not be your child, or he will be a "half-child." And even for those who want a child *very* much—they can't live without a child—this is still a problem. In my opinion, it's not good. It's better to take a child from an orphanage. This child will not take our name, but we can help this child, on a humanitarian and religious level. We haven't considered this yet, because we want to have a child [of our own]. But I *can* help another child. I like to help another family, another neighbor,

another man who needs services. But I don't like to take a child by adoption. I can only be a *kafil* [guardian], and offer this child help.

Despite these affluent men's professed desires to help orphans, neither was practicing *takafful*. Financial guardianship was quite rare among the Sunni Muslim men in my study.

Of all the 220 men in my Lebanese study, there was only one man, a Sunni Muslim Palestinian, who was raising an orphan child in his home. But this was not *any* orphan; it was his niece, the daughter of his dead brother, who shared the same family surname. Yet, this depressed, infertile, impotent man did not mention the child until the very end of an otherwise long interview, which focused on the suffering of the Palestinians and on his own depression, or his feelings of being "down." When I asked him how many children he would eventually like to have, he mentioned, almost as an afterthought, "Actually, we have one girl, my brother's girl. He died in a car accident, and so did his wife. The girl was with them, but she survived. She was two months old at the time, so I'm taking care of her." At this point, the man's pretty young wife, who was his first cousin (once removed) and also biologically related to the child, entered into the interview room dressed in her Betadine-stained hospital gown. She immediately launched into the following story,

We have a daughter. She will be five years old in July. She needs a brother. This is why we're doing this [ICSI]. She needs two to three boys to protect her. Because of her, we are trying this. This is the third time. [Do you consider her your daughter?] She *is* our daughter. She doesn't know [about her parents' death]. I am her mother, and she has the same family name as my husband. We wish we could adopt her, but we can't because we're Muslim and they don't allow this. We both have green cards to the States, and we thought about moving there, but she needs adoption papers. But we can't get them, because Islamic courts won't allow this. They just give papers saying that this is our equivalent of adoption. But, she doesn't have the official adoption papers like the ones needed for the States. Because of this, we will not go to live in the States, because Deena, our daughter, can't. This is our problem. In the States, they require legal adoption papers. We did some papers in the *shari'a* courts, and I have papers which say the Islamic law is like adoption in the States, but the U.S. Embassy didn't accept this. In the Arab countries, there is no adoption. It is "custody" only.

Clearly, this couple differed in their attitudes toward adoption. The husband could not consider his biological niece (his dead brother's daughter)

to be his adopted daughter, whereas his wife could. She was clearly interested in adopting the child legally and had pursued this issue in the Sunni Islamic *shari'a* court and with the U.S. Embassy in Lebanon. However, because adoption is not legal in Sunni Islam, her pursuit to adopt the child ultimately failed.

SHIA MEN'S AMBIVALENCE

So where does this leave Shia Muslim men in Lebanon, who, one might argue, have been the beneficiaries of the permissive attitudes toward both sperm donation and adoption in Iran? How do Lebanese Shia Muslim men feel about sperm donation to overcome male infertility? Similarly, how do they feel about adoption, which is legally practiced in Iran?

Interestingly, given the marginal economic status of most of the Shia Muslim men in my study, one of my most striking findings was the degree of *takafful* in the Shia population. Most Shia Muslim men in my study hoped to become economic guardians of orphans when their own financial situations improved in the future. Furthermore, seven of the Shia men in my study were already serving as guardians through regular monthly contributions to an orphanage. This included one man who worked as a physical education teacher in one of Sayyid Fadlallah's orphanages and earned only \$400 a month. Nonetheless, he was following Sayyid Fadlallah's encouragement of *takafful* (a.k.a. *kafalat il-yatim*, or guardianship of orphans) through a regular monthly donation to one of the orphanages run by Sayyid Fadlallah's charitable organization, Jama'iat il-Mabarrat.

The significant practice of *takafful* among Shia men in my study clearly reflected the ravages of the civil war and the subsequent Israeli occupation of southern Lebanon, as found in Hasan's opening story in this chapter. Whereas Hasan lived to tell his story, many Shia civilians and male fighters were killed, leaving children without parents or at least a father who could support them. In some cases, war-related poverty had forced desperate Shia parents to place their children in orphanages, where at least they would be clothed, fed, and educated.

Although the Shia men in my study were acting generously and humanely toward the war orphans in their midst, few of them supported the idea of actually adopting and raising an orphan as a son or daughter. The overall opposition to *tabanni*, or legal adoption, was almost as pronounced among Shia Muslim men as among Sunni Muslim men in the study. Of thirty-seven Shia men I interviewed about adoption, thirty-two (86%)

were firmly opposed, with only five men saying that they would consider this possibility. As explained by the Fadlallah orphanage teacher, "Adoption is *haram* in Islam. I *can* be a guardian to a child, but I can't let him live with me, because if he lived at my home, he would be like an adoptee, and this is forbidden."

Just as most Shia Muslim men opposed *tabanni*, they adamantly opposed sperm donation. One Shia businessman, who had spent many years outside of the country, had this to say,

I don't think any Muslim can accept that idea [of sperm donation]. Even in Europe, the majority of the people don't like it. It's very complicated to find yourself with another person's child. "Look at me, look at you." It will complicate your life. And there could be medical matters where the child needs assistance. If it becomes public and widespread, it could be problematic. If ten people can be the same looking from the same donor, an anonymous donor, and you're looking for that one guy, you may never find him. So you would have to think about this, because it will affect your life.

Quite interestingly, half of those men who identified Ayatollah Khamene'i as their *marja'* disagreed with his permissive position on sperm donation. This was true even among those men who were azoospermic (i.e., no sperm found in their ejaculate or testicles), for whom sperm donation was their only viable procreative option. One of these men, Kamal, a Hizbullah electrician whose five semen analyses had failed to identify a single spermatozoon, had asked at Khamene'i's office in Beirut about what he should do to become a father. Kamal and I had the following conversation about what he was told, and what he ultimately decided,

KAMAL: They told me that if the [IVF] doctor is a woman, it is better.⁴² But if it is a man, you must know that he's honest. In the Islamic *shari'a*, it is allowed for a woman to have a male doctor, and it is allowed to bring another sperm from another man [for donation]. But if you do it, the wife has to make a *katb al-kitab* [marriage contract], because the child will go to her other husband [the sperm donor] for inheritance. Sayyid Khamene'i said this.

ANTHROPOLOGIST: Would you do this?

KAMAL: No! I don't feel it's logical. There's not even a one percent chance that I will do this. Religiously, it's okay in the *shari'a*, but I thought about it, and I said, "No, absolutely not."

ANTHROPOLOGIST: Does your wife agree with you?

KAMAL: My wife, she didn't accept this either, even though she knows it's in the *shari'a*. It is difficult. For the woman, it is not difficult to take another one's egg like it is for the man [to take another man's sperm]. If you get a child and it's a girl, when she's fifteen, sixteen, or seventeen, she's not like your daughter. How will you behave with her? In the religion, you could marry her.

ANTHROPOLOGIST: So it's too difficult.

KAMAL: It's *very* difficult. I'd prefer not to have a child than to have a child and always think about this.

ANTHROPOLOGIST: So you wouldn't consider adoption then?

KAMAL: It's the same problem. It's not my child, and if I bring home a girl, she could be my wife.

In Kamal's discussion of sperm donation, he criticizes his avowed *marja'*, Ayatollah Khamene'i, for allowing a procedure that is, in his words, "illogical." Notably, Kamal uses his own intellectual powers of reason and interpretation—*'aql* and *ijtihad*—to arrive at this conclusion. And Kamal is not alone in this regard. Of the 220 men I interviewed in Lebanon, only one man had actually undertaken sperm donation. Moustafa, a poor, weathered carpenter from southern Lebanon, had suffered from persistent nonobstructive azoospermia throughout his ten-year marriage. When a Christian doctor had broached the subject of sperm donation with him, he and his wife had gone directly to their local *shaykh*, a follower of Ayatollah Khamene'i. The *shaykh* indicated Ayatollah Khamene'i's approval of the practice and showed them the actual *fatwa*. This had "encouraged" the couple, who saw it as their only way to make a baby. They returned to the clinic, where Moustafa's wife was prepared for the donor-ICSI procedure. The doctors would not let the couple meet the medical-student donor, who consented to sperm donation only on the basis of strict anonymity. However, the doctors did allow the couple to visualize the semen sample, taken directly from the medical student on the morning of the ICSI procedure. Moustafa's wife said a little prayer over the semen in the plastic cup. On this very day, I happened to meet Moustafa in the clinic, and he agreed to be interviewed, perhaps as a form of guilt-reducing catharsis. Upon reading and signing the human subjects consent form, the first words out of Moustafa's mouth were literally, "The sperm are not from me." He then became taciturn, answering most questions with the briefest of responses. Nonetheless, he made it clear that he had sold his land to go through with the \$2,000 donor-ICSI cycle; he had no idea who the sperm donor was; and he and his wife had vowed to keep this a secret, including from their families, for the rest of their lives. Indeed, the interview was more like a confessional than a conversation, with Moustafa ending by saying "I just want to have a child." The anthropologist, privileged re-

ipient of Moustafa's revelation, replied "*insha'Allah khayr*"—the formulaic expression of divine intervention said as an expression of good luck within Lebanese clinics.

SPERM DONATION IN PRACTICE

Because of the widespread disapproval of sperm donation in Lebanon among both Sunni and Shia Muslim men, it is rarely practiced. Despite reports of a mysterious "sperm bank" in southern Lebanon, I was told by IVF physicians and embryologists that a Lebanese sperm bank does not exist. Rather, donor sperm are generally procured in one of three ways: from European or U.S. sperm banks, through direct mail order; from family members (e.g., brothers, cousins) who are brought to the clinic for semen collection; or from anonymous Lebanese donors, who are usually medical students or hospital employees and who are paid between \$100 and \$500 for their services.

Physicians whom I interviewed about Lebanese sperm donation were mixed in their attitudes toward this practice. Proponents of sperm donation saw it as a "solution to social problems" in the absence of adoption or any other known medical solution for men with absolute azoospermia. Because sperm donors are generally medical students—at purportedly "low risk" for infectious diseases—they are seen as a "safe" and "intelligent" population of sperm donors. Physician opponents of sperm donation, on the other hand, have multiple reasons for rejecting the practice. First, there is no local donor registry of any sort, or a reliable regulatory system in the country. As a result, sperm donation is being carried out behind closed doors, in the unregulated, sometimes secretive environment of private IVF clinics.⁴³ As a result of this lack of regulatory oversight, practices that would never occur in Euro-American settings do, in fact, take place in Lebanese IVF clinics. For example, "fresh" semen samples are used in sperm donation, without any kind of mandatory screening for HIV virus, hepatitis viruses, and other sexually transmitted infections. Similarly, no mandatory genetic testing is performed with either donors or recipients. Hence, serious genetic diseases, such as cystic fibrosis, may be perpetuated within the Lebanese population. Finally, the very legality of sperm donation in Lebanon is a matter of concern for the Lebanese IVF community. The Lebanese Maronite Order of Physicians has developed ethical guidelines which forbid donor insemination. Some physicians and embryologists I interviewed said that sperm donation may eventually be made illegal in the country if a law is ever passed.

Meanwhile, in the absence of a national law, sperm donation does occasionally take place. Religiously pious Lebanese Shia men such as Moustafa

are the most likely to accept donor sperm, and even some Shia clerical opinions toward sperm donation have transitioned over time. According to one Lebanese Shia physician—who offers sperm donation in his clinic and has repeatedly sought the advice of Shia clerics on this subject—sperm donation has moved from being a practice that is *haram* (i.e., totally forbidden and for which a person will go to hell) to being *makruh* (i.e., a practice that is reprehensible and should be avoided, but is not absolutely prohibited, or *haram*). According to his interpretation of the clerical debates, sperm donation now falls into this category of *makruh*—namely, a practice that should not be done if it can be avoided, but if it cannot be avoided, then it is acceptable. Or, put another way, even though sperm donation is “disliked” in Shia Islam, it is not entirely forbidden and therefore will not send a person who practices it to hell. According to this physician,

[The Shia position] has *evolved* over the years, especially on sperm donation. Depending on the question and the way it is asked, and whether they think the person asking is “liberal” or not, they [clerics] give differing answers. And this is a gray zone—sperm donation is not automatically seen as “guilty.” With sperm donation, the rationale is that sperm which is banked is the same as medicine in a pharmacy. With sperm donation, you’re prescribing medication for the wife, which is given to her. As long as there is no physical intercourse, and the husband knows, then the practice is *makruh*. But the child cannot inherit from the infertile father, only the sperm donor. He can give him everything, but he can’t bequeath his inheritance.

When I told this physician that I had never before heard about this “gray area,” he explained that it is a “Shia thing,” allowing a great deal of flexibility, even beyond the practice of *ijtihad*. This was the only time I ever heard mention of this—or of donor sperm being like a “prescription medicine.” In other words, this may have been the Shia-but-secular physician’s own rationale for performing sperm donation in his clinic—a kind of individual *ijtihad*, or interpretive strategy, which is invoked by some Shia Muslims in their moral decision making.

Nonetheless, it is fair to say that between Ayatollah Khamene’i’s permissive *fatwa* and other Shia clerics’ constantly evolving positions on gamete donation, sperm donation has definitely entered the lexicon and practice of Lebanese reproductive medicine. This is largely due to the high numbers of Middle Eastern azoospermia cases—men who have no spermatozoa whatsoever in their semen. Why is there so much Middle Eastern azoospermia? According to the physicians and embryologists I interviewed, many of whom had trained in reproductive medicine in both Lebanon and the United States, so-called nonobstructive azoospermia

cases are much more common among Arabs, including Arab American men with male infertility. These nonobstructive azoospermia cases may be due to three major causes: undescended testicles that are not surgically corrected early in a male infant’s life; genetic causes, which may be linked to high rates of consanguineous marriage; and cancer treatment in which male fertility preservation through semen collection before chemotherapy or radiation therapy is not offered. Some Middle Eastern men also have “obstructive azoospermia,” in which sperm are present in the testicles, but are obstructed from exiting the body during ejaculation. Such obstructions may be due to three major causes: prior infections (e.g., sexually transmitted, adult mumps orchitis, chronic prostatitis, genital tuberculosis); trauma (e.g., being hit or tortured in the testicles); or genetic factors, such as men who are born without the vas deferens (a marker of cystic fibrosis carrier status). In these cases, sperm may be found inside the testicles upon testicular aspirations or biopsies. However, in some azoospermia cases, no sperm whatsoever is discovered, in which case men may be offered sperm donation as an alternative.

In my studies in Lebanon and Arab Detroit, I came across thirty-one azoospermia cases (table 14). Six of nineteen men in Lebanon and four of twelve men in Arab Detroit were offered sperm donation as a solution to their problem. In addition, while in Lebanon, I met the wives of two azoospermic Lebanese men who were currently living in the United States and had been offered sperm donation there. But they decided to return to Lebanon for sperm donation because they wanted a Lebanese donor. I interviewed all ten men in Beirut and Detroit who had been offered sperm donation and who were thus forced to seriously consider this possibility. Only one of them, Moustafa, confessed to going through with it. One other religious Shia man was considering using his brother as a donor but had yet to ask his sibling. Kamal, the Hizbullah electrician who disagreed with Ayatollah Khamene’i’s opinion, refused sperm donation altogether. Shaykh Ibrahim, whose story opened chapter 5, knew about Ayatollah Khamene’i’s permissive opinion but found it very “difficult” to accept sperm donation, as did his Iraqi wife, who eventually divorced him. One Lebanese Shia man, who had migrated with his family during the Lebanese civil war to Arab Detroit, had been living in the States since age fourteen but was appalled to be offered sperm donation at age thirty-one upon discovery of his azoospermia. He was clearly troubled by this possibility, beginning his interview in this way,

The doctor kept encouraging me to do donor sperm. Never! I know they do it in America, but in Arabic men, no, because I don’t know who’s the father. A lot of problems are going to happen in the house.

TABLE 14. Azoospermia cases and responses to sperm donation

Country	Religion	Cause of Azoospermia	Sperm Donation Offered	Response
Lebanese	Shia Muslim	Congenital absence of vas	No	
Lebanese	Shia Muslim	Undescended testicles	No	
Lebanese	Shia Muslim	Undescended testicles	No	
Lebanese	Shia Muslim	Mumps orchitis	No	
Lebanese	Shia Muslim	Obstructive, unknown cause	No	Thinks about asking his brother to donate sperm
Lebanese	Shia Muslim	Nonobstructive, unknown cause	Yes	Refuses the idea, although he follows Ayatollah Khamene'i
Lebanese, living in Netherlands	Shia Muslim	Obstructive, unknown cause	No; has ICSI son	
Lebanese, living in Cote d'Ivoire	Shia Muslim	Genital tuberculosis	No; has son from early in marriage	
Lebanese	Shia Muslim	Nonobstructive, unknown cause	Yes	Accepted anonymous sperm donation, because he follows Ayatollah Khamene'i
Lebanese	Sunni Muslim	Nonobstructive, familial (genetic)	No	
Lebanese	Shia Muslim	Mumps orchitis	No	
Lebanese	Maronite Catholic	Unknown cause	Yes	Accepts the idea, but is trying ICSI with testicular aspiration first
Lebanese, living in Saudi Arabia	Sunni Muslim	Nonobstructive, unknown cause	No	
Lebanese	Maronite Catholic	Post-chemotherapy	Yes	Accepts the idea of sperm donation, since no sperm were found with testicular biopsy
Lebanese	Sunni Muslim	Nonobstructive, familial (genetic)	No	Refuses the idea of sperm donation, but no sperm were found with testicular biopsy
Lebanese	Sunni Muslim	Nonobstructive, unknown cause	No; has ICSI son	
Lebanese	Sunni Muslim	Nonobstructive, unknown cause	No	

TABLE 14. Azoospermia cases and responses to sperm donation (continued)

Country	Religion	Cause of Azoospermia	Sperm Donation Offered	Response
Lebanese	Shia Muslim	Nonobstructive, unknown cause	No	
Lebanese	Druze Muslim	Post-chemotherapy	Yes	Refuses the idea of sperm donation, because child is "not part of me"
Lebanese	Maronite Catholic	Nonobstructive, unknown cause	Yes	Refuses the idea of sperm donation, although his wife accepts after ten failed ICSIs without a single embryo
Lebanese, living in USA	Shia Muslim	Klinefelter's syndrome (XXY)	Yes	Refuses the idea of sperm donation; "Never!"
Lebanese, living in USA	Shia Muslim	Undescended testicles	No	
Iraqi, living in USA	Shia Muslim	Nonobstructive, familial (genetic)	No	
Syrian, living in USA	Refused to identify	Mumps orchitis	No; married a woman with four children	
Yemeni, living in USA	Sunni Muslim	Adolescent testicular infection (maybe mumps)	No	
Lebanese, living in USA	Shia Muslim	Congenital absence of vas	Yes	Agreed to sperm donation, but his wife did not; "I gave her the divorce"
Yemeni, living in USA	Sunni Muslim	Mumps orchitis	No	
Lebanese, living in USA	Shia Muslim	Undescended testicles	No; underwent six testicular aspirations	
Lebanese, living in USA	Maronite Catholic	Obstructive, probably from STIs	Yes; has two adopted sons	Agrees to sperm donation with second wife; "I'm open. Children are children."
Palestinian, living in USA	Sunni Muslim	Hirschprung's syndrome (genetic)	No	
Iraqi, living in USA	Shia Muslim	Undescended testicles	Yes	Refused the idea of sperm donation, as did his wife, who divorced him

Like, I can't say, "Swear to your father." It's easier to remarry someone who has kids, you know what I mean? That way, I see the child, and I can feel something for the child. But, if it's not "my blood" [by sperm donation], especially his looks, I'll never feel that he's my child. Here [in America], you can pick the way you want him to look. What is it—a factory? I can't do that.

In short, even Shia Muslim patients who were religiously allowed to use donor sperm, and who were living in the donor-tolerant United States, were resistant to this practice. None of the Shia men I interviewed in Arab Detroit had gone through with anonymous sperm donation. They either refused sperm donation altogether, were deeply ambivalent, or had never seriously considered the possibility.

In religiously heterogeneous Lebanon, I interviewed five other men, including three Christians, one Druze, and one Sunni Muslim man, who had been offered sperm donation. Only two—both Maronite Catholics—consented to sperm donation, but *only* if sperm could not be found in their testicles. In one of these cases, one thousand sperm were found on the day of the testicular biopsy; the other case was "negative." The negative case was especially poignant, as this handsome man, Bernard, had survived Hodgkin's disease and was now healthy and happily married. However, Bernard's oncologist had never asked him to bank his own sperm before chemotherapy, which destroyed his testicular function. Bernard was thus forced to resort to sperm donation. On the day of Bernard's testicular biopsy, before he knew the outcome of the procedure, we discussed his attitudes toward sperm donation at length:

ANTHROPOLOGIST: Would you consider using a sperm donor?

BERNARD: Sperm donation? It's one of the different options we've been given. If we have "zero" [sperm] today, then we agreed that rather than go for adoption, we would go for sperm donation, so this way, my wife would feel the sense of motherhood.

ANTHROPOLOGIST: Do you know where the sperm come from?

BERNARD: I know nothing about the sperm donors. We didn't talk about this yet. Perhaps they come from China! Japan! Honestly, I'm not interested in knowing from where. But, instead of adopting a child, why not adopt a sperm?

ANTHROPOLOGIST: So you feel comfortable with this . . .

BERNARD: We have had this problem now for two years, and in the end, if it's not going to work, one should adapt to the situation and get convinced [about sperm donation].

ANTHROPOLOGIST: Does your family know?

BERNARD: Yes, my family knows about ICSI, but not about the donor, because, until now, it's our secret between me and my wife. They only know about ICSI. The sperm donation—it's our secret.

ANTHROPOLOGIST: Do you think you would tell the child some day?

BERNARD: Yes, maybe we will tell the child. If at the end of the day, when the child reaches a certain age and is able to comprehend and accept, then why not tell? But, if you tell too early, it may complicate things.

ANTHROPOLOGIST: Have you inquired about the religious aspects?

BERNARD: Now, I'm not thinking about the Maronite opinion or my religion. I'm thinking about my life. It's between me and my wife, and not me and my priest. As long as a child is born and the church allows us to baptize him, it would be okay. The most important point is to solve our problem, and this is between me and my wife. We are a family, me and my wife, and if everything inside our home is okay, then everything outside must be okay. Because we have some limits, we have our privacy. And that's why we have a good marriage. [Laughing] And she is beautiful and she cooks very well!

Although Maronite Catholics are allowed to adopt children from Catholic orphanages, Bernard chose to pursue sperm donation as a way for his beloved wife to experience pregnancy and motherhood. He equated sperm donation to "sperm adoption," perhaps making sperm donation seem less morally problematic in this way.

But, not all Christian men I interviewed were as sanguine about sperm donation as Bernard. Joseph, another Maronite Catholic, had been offered sperm donation but adamantly refused—despite the fact that his wife was willing to consider sperm donation after enduring ten failed ICSIs without a single viable embryo formed. As a religious Catholic, Joseph had asked his priest about both ICSI and sperm donation and had come to this conclusion,

There is no problem in the religion with ICSI. But sperm donation, I don't like. I don't want to bring a "stranger," even though [my wife] would consider it. From the first time ICSI didn't work, from the very first year, Dr. [name] said he could bring sperm from someone other than me to get my wife pregnant, and I refused. [The doctor] said, "I can take sperm from another man and do the operation, and then you can adopt the child." But I refused, even though he said it would be much easier to take sperm from "outside" to make the ICSI succeed. My wife also prefers ICSI over sperm donation, but she would do sperm donation. And here in Lebanon, they do do sperm donation, but they don't tell who the donor is.

The two other men in my study who were offered sperm donation—one a Sunni Muslim and the other a Druze—absolutely refused to consider this option, even though their cases were fairly hopeless. As noted in earlier chapters, the Druze are a Muslim subsect who are generally considered to be an offshoot of the Shia. Although the Druze have accepted IVF and ICSI—or as one Druze man put it, “even the *shaykhs* and *shaykhas* are doing this!”—all forms of donation are strictly forbidden, unlike the “donor-permissive” Shia. The story of a Druze banker named Marwan bespeaks the heartbreak of surviving cancer only to be diagnosed as azoospermic and then experiencing the emotional rollercoaster that was to follow.

MARWAN, TESTICULAR CANCER, AND AZOOSPERMIC MANHOOD

When I met Marwan, his first words to me were, “I want to do the study,” but he cautioned me that he was pressed for time, as he had to return to a banking job he hated. A forty-one-year-old Druze man, Marwan described how he had been unable to “enjoy” his American University of Beirut college days because of the civil war, and how his family’s home was leveled by bombs, although no one was seriously injured. Fortunately for Marwan, he was able to migrate to the United Arab Emirates, but, soon after his arrival, he began experiencing testicular pain. Seeking medical care, he underwent repeated semen analyses, as well as a testicular biopsy. This was in 1991, and it was then that Marwan learned he was infertile, suffering from a very low sperm count. What the physician failed to diagnose was the testicular cancer, which was causing Marwan’s testicular pain. It took a full six years for the cancer to be properly diagnosed, and Marwan underwent an urgent removal of his left testicle, along with chemotherapy. Marwan’s Lebanese physicians had caught his cancer in time; repeated pelvic scans and blood tests showed that the testicular cancer was gone and had not spread to other parts of his body.

In the joyous aftermath of a cancer cure, Marwan began a new relationship with a woman he wanted to marry. Given his medical history, he decided to undergo premarital semen analysis. The results, he recalled, were “shocking,” a term he used over and over to describe what he learned,

I went to check and I was surprised that it was a zero count, and it was very big shock—shocking! It was shocking, and it caused a failure of this new relationship with a girl, because she didn’t accept thinking of marrying me. It was a shock for me. It was *very, very* shocking, especially when it resulted in that failure of that relation-

ship. Maybe at that time, when I knew about it [the azoospermia], I didn’t feel the difficulty of this issue. But when this case happened, I felt that this *is* a big problem, a big deal.

Marwan continued,

When I discovered, when you hear about cancer the first time, you will imagine nothing but death. But when you have the treatment, and I was cured, then everything will not be that difficult compared to the cancer case. So when I discovered that I had no sperm, it was not that difficult for me. But after this case [of relationship failure], I felt the manhood problem for the first time. I felt a little deficient. But *only* at that time. Before this, I considered it God’s will. What can I do? I will do my best.

Without stopping the narrative, Marwan then began to explain how his self-esteem had been affected by his “weight problem.” In fact, Marwan was obese—which was very unusual, given that Lebanon can only be described as a weight-, beauty-, and fashion-conscious nation. Although some of the men in my study could be described as “stocky,” “pudgy,” or slightly overweight, the majority were trim, even thin, often because of excessive smoking. Marwan himself was a regular pipe smoker, sometimes also smoking cigars or cigarettes. But, this did not seem to control what he called his “obesity problem,” describing it to me as follows,

I have the problem of fatness, which I’ve been following since 1984. I’ve reached as high as 131 kilograms, and in 1991, as low as 78 kilograms, because I’m always dieting, “yo-yo dieting.” This is one of the major problems in my life. I want to be able to maintain one weight. But I’m sedentary, and now I’m 109 kilograms.

According to Marwan, many people have counseled him about his weight over the years,

In our society, you will find a lot of people talk about a lot of subjects, whether or not they know about it. “Go for the operation [to staple the stomach]!” “No, no, no, don’t go for the operation!” This weight problem is what makes everything for me even more difficult.

Fortunately for Marwan, at the age of forty, he finally found a wife, Sherine, who accepted him for who he was—in spite of his history of cancer, azoospermia, and obesity. At the time of our interview, Marwan and Sherine had been married for less than a year.

Of course, Sherine knew before our marriage about the cancer. I was not trying to deceive her by not telling her. Maybe it’s her faith. It will

be our pleasure if God is willing to give us. And if not, we won't have children. This is the way she is, and she has no problem dealing with it. And, also, if there is any scientific way to deal with this problem, she's ready. And, by the way, she is *very* afraid; she's afraid of everything. She's afraid of injections. She hates medicine, drugs.

Given Marwan's azoospermia and Sherine's fear of medicine, I asked whether they would consider sperm donation via simple intrauterine insemination (i.e., the "turkey baster" method, but with injection into the uterus). I learned then that Marwan's family physician, as well as his IVF physician, had both advised him to consider sperm donation. Marwan had a great deal to say on this issue,

The thing I would like to emphasize is that I do *not* prefer any sperm donation. If I have sperm, I will go ahead with ICSI. If not, up until now, I'm not convinced about that sperm donation. My family physician said, "You can go for that." And Dr. [name] said, "If you are willing, you can have a baby through sperm donation." In fact, I'm still afraid that nothing, ultimately, will be found [i.e., absolute azoospermia]. And let's be frank, I have no other choice. Any person in my shoes will not have any other options. But, you're either confident in doing these things [i.e., sperm donation] or you're not.

I asked Marwan what made him uncomfortable about sperm donation. He replied,

The sperm, it's from other people. Still, I can't accept this. I don't know, maybe it's our culture, you name it, our environment. Still, to me, as a person, still maybe there are so many people who have a problem with that. I don't feel that this child is our child. In our culture, I don't feel that this child is part of me and my wife. I will not be feeling this is part of *me* and my wife. Maybe this is seen as selfishness in some other cultures, or a lack of understanding. Everyone has his own opinion about sperm donation. And I'm telling you as of this day, I don't accept it. And adoption, it is the same for me as sperm donation. My attitude toward it up till now, just to be clear with you, is the same. It's not a problem in the religion [i.e., adoption]. It's a matter of personal acceptance. This is how I feel today, but no one knows what will happen in the future.

Fortunately for Marwan, approximately 1,000 spermatozoa were found in his testicular biopsy sample on the day of Sherine's oocyte retrieval. Unfortunately, in the ensuing days, embryos formed, but did not divide. Marwan's ICSI cycle was therefore canceled.

LINEAL MASCULINITY, GENEALOGY, AND FATHERHOOD

Marwan's rejection of both sperm donation and adoption is telling in several ways. On the face of it, Marwan is a most likely candidate for sperm donation. He is educated, he is a cancer survivor, he faces intractable azoospermia, and he is secular in his outlook. Both his family doctor and his IVF doctor have recommended sperm donation as his most likely path to parenthood. Yet, Marwan speaks at some length in his interview about his feelings of diminished masculinity and his inability to "personally accept" the thought of fathering either an adopted or sperm donor child. He is one of the few men to use the gender-neutral term "child." In most cases, men use the expression, "He won't be my *son*," to explain their rejection of both adoption and sperm donation.

Clues to this overarching rejection can be found in what anthropologists Diane King and Linda Stone have termed *lineal masculinity*.⁴⁴ As they note, the Middle Eastern region is exceptionally patrilineal. Kinship, inheritance, and a person's very sense of identity are seen as flowing "to and through men over the generations."⁴⁵ According to King and Stone, "a patriline is not only a line of fathers and sons through time but it is also a 'mascu-line' that enhances and gives form to masculinity."⁴⁶ Lineal masculinity, in their view, involves perceived social ontology; manliness is socially enacted through a man's ability to pass along his name, his lineage, and his achievements to future generations. To do so requires actual biological reproduction, or the passage of "seed" (*semen* in Latin), which is the very essence of kinship substance. As King and Stone explain it,

Neither kinship nor lineage membership nor lineal masculinity can be transmitted any other way. . . . A man, but not a woman, lives on through reproduction, through the transmission of his semen. . . . Living on, passing on one's semen and transmitting one's collective and individual lineal masculinity are considerable inducements for men to reproduce, especially to reproduce sons, indeed, many of them. Having many children, especially sons, itself counts as a plus in a man's enhancement of the lineal masculinity he receives from his ancestors.⁴⁷

According to King and Stone, lineal masculinity underlies Middle Eastern pronatalism, as well as son preference.⁴⁸ It is also the basis for men's concerns about women's "honor," given that sexual transgressions may threaten the "purity" of the patriline. In addition, among the Iraqi Kurds studied by King, lineal masculinity is manifest in men's desires to found their own lineages, and to be remembered as powerful heads of clans and

tribes. In short, lineal masculinity provides a powerful conceptual heuristic for understanding men's investments in patriliney. Although it does not and cannot explain all male behavior in the Middle East or in other regions where it is said to operate, it nonetheless provides clues concerning why men may reject sperm donation and adoption.

Furthermore, men's feelings about patrilineal genealogy, or *nasab*, are critical. As Morgan Clarke has noted for Lebanon, *nasab* is "a key term, although difficult to translate and not common in everyday speech."⁴⁹ Various glosses as kinship, genealogy, consanguinity, or filiation, *nasab* is viewed in much Islamic discourse as "the primordial relationship upon which the wider set of relationships of rights and obligations which form human society is built."⁵⁰ Men in my Lebanese study clearly saw both sperm donation and adoption as disruptive of *nasab*, or of what they considered to be the primordial relationship between father and child. As they explained this in genealogical terms, "He won't be my son. It would be like raising another man's child." Men in my study argued that sperm donation and adoption "confuse," "destroy," or "mix" *nasab*, which is both morally illicit and devastating to the child. Just as a child has the "right to know" his or her true *nasab*, so does a man. In other words, a father wants a true patrilineal descendant, ideally a son, created from his own sperm.

Men spoke to this genealogical desire when I asked them why having children was so important. Although men had many reasons for wanting children—often telling me how they "loved," "adored," and "needed kids"—issues of patrilineal continuity and personal immortality were prominent in some men's statements. For example, men told me: "Children help their father and continue his family." "I want children to continue my name, so that people will say, 'This is the son of so-and-so.'" "Children will continue our family heritage." "The child will carry my name to future generations." "Having children creates a memory; you will leave someone, a son to take your name." "Boys carry the name, for the continuity of generations." Some men were slightly more expansive, enumerating several reasons they wanted children. For instance, one man told me, "First, marriage is for children. Why else would we marry? Second is name continuity. Third is work. Children take over the family business. Fourth is the inheritance which you leave to your children. That's why men work." Another infertile man enumerated his need for children in this way, "First is normality, to be a normal family. Second is continuity, to continue the family into the future. Third is old-age security, to have someone to take care of you when you're old. But honestly, all I want is to have a child who's healthy; that's all."

Naming, and more specifically "carrying the family name" into the future, emerged as a major theme in these comments. Middle Eastern

naming practices can differ from country to country, according to both local custom and national law. Generally, however, all children, both boys and girls, share their father's patrilineal surname. In most Middle Eastern countries, women retain their maiden names (i.e., the father's patrilineal surname) after marriage and on all official identity documents, although in Lebanon and Syria, it has become common for women to be called by their husbands' surnames (i.e., "Mrs. So-and-so") at the time of marriage. In Lebanon, sons are often given the first name of paternal grandfathers. In Egypt, most people adopt their own father's first name as their "everyday" last names, leaving familial surnames for official records. Furthermore, as soon as a man marries and bears a child, he is no longer called by his first name. Instead, he is given the teknonym, "Father of So-and-So." If a man's first child is a girl, he will keep her name in his teknonym until he bears a son, at which point the teknonym will be changed to signal a male heir.

Given the intimacy and interconnection of these naming practices, it is not surprising that naming is one of the problems mentioned in reference to both adoption and sperm donation. Changing a child's surname to match an adoptive father's is considered to be a form of legal evasion that is immoral, a legal fiction that confuses *nasab*. Similarly, with a child of sperm donation, questions and debates center on naming practices; namely, does the child take the surname of the sperm donor, or of the fictive infertile father? The Shia authorities who have allowed the practice of sperm donation have suggested that naming, inheritance, and biological descent rest with the sperm donor and not with the infertile man.

These complexities of naming and *nasab* are thus critical in understanding men's aversions. Marwan is like most Middle Eastern men in this regard. In Marwan's own words, a sperm donor or adopted child will not be "a part of me." For Marwan, social fatherhood of a child who is not a direct genealogical descendant and who, on a legal level, should not carry his own family name, is clearly out of the question. In fact, these feelings of estranged fatherhood have also been reported for Iran, the Middle Eastern Muslim country where sperm donation is most widely accepted in practice. As shown by Soraya Tremayne in a poignant essay, men who have chosen to use donor sperm may later regret their decisions, taking out their angst and anger on hapless wives and donor children.⁵¹ Increasingly, these Iranian women and their donor offspring are fleeing to the West, seeking political asylum from abusive spouses/fathers. Furthermore, the Royan Institute, one of the major assisted reproduction and stem cell research centers in Tehran, has conducted survey research on attitudes toward sperm donation among infertile men.⁵² Despite Ayatollah Khamene'i's approval of sperm donation, Iranian men continue to be morally ambivalent about

the practice, finding it much less acceptable than either egg or embryo donation. It is important to note here that donated embryos, too, are created from other men's sperm; yet, Iranian men seem to accept this practice with greater enthusiasm. At the time of this writing, Iran is the only Middle Eastern country to encourage embryo donation, and the reasons why infertile men there prefer it over sperm donation have yet to be fully investigated.

Given everything I know about Middle Eastern third-party donation, I would surmise that Iranian men find "donated embryos" akin to "adopted children" in a country that also allows for the latter practice. Furthermore, transferring donor embryos into a wife's uterus is symbolically quite different than injecting her uterus with another man's sperm. For men, sperm donation implies extramarital intercourse. In my own study, men clearly equated sperm donation with *zina*, or adultery, and could not bear the thought of "strangers' sperm" impregnating their beloved wives, to whom they were sexually faithful.

Such aversions to sperm donation are not unique to the Middle East, nor are they indicative of a uniquely Middle Eastern lineal masculinity. Perhaps lineal masculinity underlies most men's desires to father biological offspring and to rest assured about their paternity. This is true even in the purportedly "progressive" West. Even though donor insemination is the "oldest" assisted reproductive technology—having been practiced in the United States and Europe for nearly a century⁵³—anthropologists have revealed the stigma and secrecy incumbent in this practice.⁵⁴ In the West, men seem to have less trouble donating sperm—usually for a nominal fee—than accepting it from another man. In order to abide by sperm donation, infertile men must find ways to reframe their sense of fatherhood, convincing themselves that they are able to feel deep love for individuals who are not biologically related to them. Moreover, infertile men and their spouses must make difficult decisions regarding donor disclosure. For example, should friends and family be notified that a child is the product of sperm donation? Should parents disclose this information to a donor child, and at what point in the child's life? Do a child's rights to medical knowledge trump parental desires for secrecy? As shown in anthropologist Gay Becker's fascinating work on sperm donation in the United States, "to tell or not to tell" becomes a major ethical dilemma in the local moral worlds of infertile American men and their wives.⁵⁵ Some couples choose absolute secrecy, while others deem disclosure necessary to prevent dishonesty and deception. In some cases, couples choose the path of least resistance by delaying the decision indefinitely. In short, sperm donation troubles American men, too, even though they may not reject the practice out of hand.

CONCLUSION

Moustafa, the only man in my Lebanese study who secretly "chose" sperm donation, was not alone in his moral angst. In the new millennium, sperm donation continues to be one of the most stigmatizing reproductive technologies, even though, before ICSI, it was widely practiced in the West in cases of male infertility. The introduction of ICSI around the world has dramatically reduced the demand for sperm donation.⁵⁶ However, as seen in this chapter, ICSI has not erased the practice of sperm donation altogether. For numerous reasons, genetic and otherwise, there will always be men without sperm. Furthermore, there will always be recalcitrant sperm that resist the fertilizing power of ICSI.

When ICSI fails, sperm donation is now offered in two Middle Eastern countries, Iran and Lebanon. Along with "secular" Tunisia and Turkey, Iran is also the only Muslim Middle Eastern country to offer legal adoption to infertile couples. Nonetheless, as shown in this chapter, both sperm donation and adoption are widely resisted as routes to social fatherhood in the Middle East, including among men who are otherwise allowed these avenues by law, religion, or both. Men's reasons for feeling this way are complex but lie in deeply entrenched Islamic and local moral concepts of *nasab*, *zina*, and patriliney. Or as Middle Eastern Muslim men themselves put it, quite simply, "He won't be my son."