



## ***Reproductive Medicine and the Life Sciences in the Contemporary Economy. A Sociomaterial Perspective***

Alexander Styhre and Rebecka Arman. Gower 2013.

by Manuela Perrotta

The book by Alexander Styhre and Rebecka Arman explores assisted fertilisation (AF), a branch of reproductive medicine, from an organisational perspective. Based on interviews with professionals working in private and public clinics offering AF in Sweden, this book represents an in-depth case study of this field in a Scandinavian context. As explicitly stated by the authors, offering an organisational perspective on AF and exploring the distinctive traits of the Swedish/Scandinavian context are the two main goals of the book.

While reading the book, I was curious about the use of the label assisted fertilisation instead of the more commonly used term assisted reproductive technologies (ART). The authors claim there was a transition from the adjective 'artificial' (broadly used in the past) to the less detrimental 'assisted', but they do not provide an open explanation for focusing on fertilisation. Although this could be interpreted as a minor linguistic issue, I believe it is rather relevant as they adopt a sociomaterial perspective ([Orlikowski 2007](#)). The latter is an increasingly popular approach in recent organisation studies, and it particularly fits this case study. Focusing on sociomaterial practices allow the authors to explore AF as the space in which the social and the material overlap. Convincingly, the authors do not focus on technologies (e.g. ART), but rather direct their attention to what is the core practice in clinics from an organisational perspective: the fertilisation process.

As they argue throughout the book, clinics providing AF are not isolated loci where fertilisation is accomplished. In exploring AF from an organisational point of view, the authors do not limit their gaze to organisational and work practices. The book has a clear STS sensibility, and it engages quite intensively with current STS debate. The empirical chapters are quite dense in the descriptions of how social, organisational, institutional and technological elements are embedded in this field. One of the aims of the book, as the authors state in their conclusive chapter, is to show 'how assisted fertilization work is precisely what is being developed in the intersection between technoscientific possibilities and know-how, social needs, and legal framework' (p. 184).

The authors start their empirical excursion from the story of the development of AF in Sweden, pointing out how this story consists of a number of heterogeneous elements. The path of AF is situated in the Swedish social context and the way in which AF moves from being interpreted as an unnecessary 'luxury health care' to a socially accepted and common clinical practice. The authors seem to participate unwittingly to the naturalisation of AF as a medical solution to unwanted childlessness (categorised as a disease in Sweden since 1997) when they use the expression 'assisted fertilization therapy'.

The Swedish case is particularly fascinating for exploring the relation between public and private healthcare, entrepreneurship and research and institutional context and clinical practice. Through extensive interview excerpts, the authors reconstruct how at the very beginning public hospital management saw this practice as a new form of experimental research on which it was not appropriate to invest public funding. Similarly, the political authorities were unwilling to provide fertility treatments as part of the general public healthcare as unwanted childlessness was not perceived as a social problem. Some clinicians decided to act as pioneering entrepreneurs, and they invested their own capital in private AF clinics to meet the demand among patients. According to the interviewees (interestingly defined in the text as 'professor and entrepreneur'), this was a trick to force public investment in this sector. To avoid a situation in which this type of healthcare was only accessible to affluent patients, the Swedish social democrat norm of health care being an equal right for all quickly provoked public hospitals to start their own clinics. Interestingly, the authors do not challenge the pioneers' point of view, which is reminiscent of the heroic narrative typical of mainstream entrepreneurship. They subtly refer to these private clinics as profitable companies, but they also describe the clinicians/entrepreneurs as more interested in research advancement than in economic advantages.

Although the authors describe in detail how clinicians in this field actively influenced policy-making, they do not see this as a linear process but rather as a mutual shaping. In another empirical chapter, they discuss how the regulatory frameworks evolved, setting boundaries for clinical work. This is a compelling story as in Sweden the regulatory framework has been continuously modified to adjust to both social needs and technoscientific possibilities. The first Swedish law related to AF was created in 1984. Since then, the regulatory framework has been amended many times. For instance, egg cell donation became legal in 2003, whereas in 2005 access to treatments was allowed to lesbian couples. Although the Swedish regulatory framework is quite liberal, three main restrictions are still in place: embryo donation, surrogacy and access to treatments for single women. As the authors acutely point out, this is an ongoing process in which social interests and institutional arrangements intersect. New modifications in the legal framework and in work practices are expected to meet emerging accepted social needs.

From an organisational point of view, this is a prime example of how organisational activities are not isolated from external society. What this case makes clear is that there is a disjunction between what is technically feasible, what professional actors wish to accomplish on the basis of their medical expertise and what



they are allowed to perform legally. Consistent with recent work in organisation studies, the development of a growing interest in the role of societal institutions is important because it shows how organisational practices are affected by wider societal influences and differ across contexts. The Swedish case becomes representative of a broader North European culture if compared with similar cases explored in different contexts. For instance, a similar study conducted in Italy (Gherardi and Perrotta 2011), where the regulatory framework did not emerge as negotiated between policy makers, clinicians and patients but was imposed by the Catholic front, illustrates that societal institutions can also have a direct bearing on organisational practices. The book shows how technoscientific knowledge, social needs and legal frameworks are mutually constitutive, and what makes AF a legitimate social and organisational practice is the capacity to organise locally these heterogeneous resources into specific organisational settings (e.g. AF clinics).

In two chapters dedicated to the work 'in the clinic' and 'in the laboratory', the book proposes an in-depth description of AF techno-organisational practices. Although these chapters are dense in the description of both the front office and laboratory practices, they do not reach a deep understanding of the topics under investigation as they browse through several themes, such as gender, emotional work, ethical issues, gift economy, manual skills, professional vision and scientific standards. This lack of in-depth analysis probably emerges from the methodological approach selected to conduct the case study. In the appendix, the authors explain that the empirical material presented in the book is mainly based on interviews with actors engaged in AF work (physicians/gynaecologists,

laboratory employees, midwives, a psychologist, a policy maker and four patients). Although interviewees describe their work practices in detail, the lack of participant observation probably explains the impossibility to engage with an in-depth analysis of these themes. However, this represents only a partial weakness of the book as the authors are able to link the diverse subjects, providing an overview of AF work in Sweden.

Finally, as the authors claim, the book represents an attempt to introduce such a 'socially relevant' topic in the agenda of business and management studies. Building on many conceptual tools rooted in both STS and organisation studies, this book aims to make an organisation theory contribution to the study of the commercialisation and institutionalisation of AF. Explored from this perspective, AF development in Sweden is a prime case of successful entrepreneurship in the face of both uncertainty (professionals in this field are still working on the basis of partial and incomplete understanding of human reproductive processes) and hostility (success rates, or pregnancy rates, are still quite low). Exploring how different local AF practices emerge at the intersections with diverse social contexts and societal institutions is worthy of more scholarly attention and could represent the next challenge for scholars interested in both STS and organisation studies.

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## References

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