

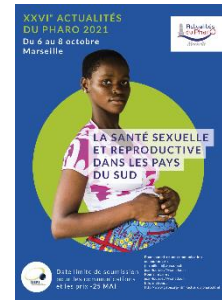
Actualités du Pharo 2021 – Session 2

Medically assisted procreation for African couples in France

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The suffering of couples in need of a child is ubiquitous, but is expressed in different ways depending on the culture of origin. The clinical experience within a Parisian centre for Medically Assisted Procreation (MAP), where a third of the activity concerns couples from sub-Saharan Africa, equally from West or Central Africa, allows us to highlight some specificities of their MAP journey, as much in terms of its experience as in terms of medical or economic considerations. This reflection is also based on an Africanist experience since 1972, including a thesis on the representations of fertility of Peul Bandé women in Eastern Senegal.

The specificities of the MPA process combine multiple factors, the association of which is relevant, while none of them characterises the situation in isolation. They can be listed as follows:

- The child project is often conceived in a hyper-genetic perspective
- Becoming a parent is the only way for migrant women in France to gain social integration and legitimacy and to break out of isolation
- The context of viral infection for HIV or hepatitis B and C can be added to the problem of sterility, the procreative project being a revenge on the shame and discrimination to which the women have been subjected
- The confrontation between the child's project, the couple's stability criteria and the regulatory framework of assisted reproduction in France, generates many situations of aporia between couples and healthcare teams.
- The traditional representations of conception, which vary according to the culture of origin, and which are poorly known or understood, condition the acceptance of the announcement of a man's infertility, the therapeutic choices, embryo freezing, etc.
- The acceptance of a measured embryo transfer policy, aiming to avoid multiple pregnancies, including twins, is difficult in a cultural context where twins are synonymous with luck, wealth, human power and victory over misfortune / sterility.
- Recourse to gamete donation, or conversely the prospect of donating embryos to another couple, comes up against multiple reticence, including the fear of genealogical rupture, to be set against the systems of kinship and donation of the society of origin.

These representations are confronted with those of the cultural thinking of carers, whose awareness of the reality of the structuring of "traditional thinking" is highly variable.