**A few shades fairer, please**

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***Abstract***

This piece examines the growing Indian desire for fairer skin tones. While skin-whitening products vanish off the shelves notwithstanding years’ old organised protests, the event that recently generated a storm in the media was the Garbha Sanskar workshops. In these workshops women were allegedly taught methods to purify their wombs and beget fairer (and taller) children. I argue that it is not only simplistic to label this ideology as regressive, but rather difficult to criticize the *sanskaris* because of the ‘register’ they deploy; in other words, because of the language they use to rationalize and explain their actions. They use the rhetoric of modern medical science to justify their methods, while the same science tells us that the logic of the *sanskaris* is unscientific – and we are faced with a dead-end. A stepwise critical unpacking of this paradox reveals how complex its nature is, especially in its attempt to lay simultaneous claim to different (and contradictory) epistemologies. In this piece I offer no solution, for there are none so easy: I map some of the complexities and contradictions of the scenario as a first step.

***Mirror, mirror on the wall, who’s the fairest of them all?***

Schools taught us how the Aryans, who invaded the Indian subcontinent around 1500 BC, clashed with the locals, drove them southwards and destroyed their civilization. This theory was floated by Max Mueller in the 19th century and gradually emerged ‘self-evident’; it was eventually christened the Indo-Aryan Migration Theory. One of the distinct features of the invasion and resultant colonization, was – we were told – that fair-skinned Aryans and dark-skinned Dravidians succeeded in producing progeny that were not-so-dark-anymore. The one redeeming factor that went in favour of the Aryans was that they, by inter-marrying, ‘cleaned up’ our skin-tones. The Aryan invasion theory has been systematically debunked (1, 2) though many of us continue to believe it; however, the point here is not to talk about the historical veracity of the theory, but to realize that as a society we continue to invest in the idea of fairness: if those who ransacked our territories and harmed the local populations, also gave future generations a fairer skin, we become a wee bit more lenient towards the intruders.

Black is bad, backward, underdeveloped, third-world. White signifies the pure, the developed, the first-world; white is fair, and it indeed seems fair to want to be fair. We are obsessed with fairness. Fortunately, there continues to exist some fairness-dissenters, notwithstanding their own melanin-count. We have heard voices getting stronger against the plethora of skin-whitening products and fairness creams, gels, facewash and what not; yet advertisements of these products continue to beam, products continue to sell and stocks are dutifully replenished. However, this issue of desiring to get fairer (by applying the skin-whitening products and homemade concoctions), has become not only more complex but menacing in recent times. The desire has shifted goalposts: from the desire to *become* fairer to *beget* the fairer, from pinning the desire of fairness on the self to pinning it on the other, on to the other that emerges from the self, fairness has moved from being literal to metonymic; from implying good looks, ‘fairness’ has expanded to describe the ‘perfect’ human being itself.

***Sanitizing the dark womb***

Garbha Sanskar, i.e., the process of sanitizing the womb, took the media by storm a few months ago. The health wing of the RSS, Arogya Bharati, launched the Garbha Sanskar project whose chief mandate was to help women give birth to the best child – the *uttam santati* (4, 5). It came as a bit of a surprise to some that this program had actually been functional in Gujarat for a decade by now, and it is only in the course of spreading to other states that it came under the media spotlight. In May 2017, notwithstanding a High Court stay order, a two-day workshop cum counselling session was organised by Arogya Bharati in Kolkata (4). Those who signed up were offered tips on how to purify their (otherwise impure obviously) wombs and consequently, beget fair, tall offsprings, the perfect progeny. The womb has been in the news for different reasons in the past one year: first it was the ban on commercially renting out the womb for third-party childbearing in August 2016; in April 2017, the womb made it to the headlines as debates flew thick and fast on the issue of uterus transplant; and now the mechanism of reconfiguring the purity-quotient of the womb stared us in the face.

The womb has been in news in days bygone as well: for instance, when colonial reformers, while advocating against child-marriage argued that the womb was not fully developed in very young girls and not fit to bear healthy children; *thus*, it was argued, girls should not be married off at a young age (6). Later, when the postcolonial state dictated the number of times a womb could exercise its reproductive potential and recommended that productivity be capped at two (the era of *hum do humare do*), the womb was under the scanner again. Fascination with and politics over the womb goes much back in time: in the article ‘Why Mammals are called Mammals’, Londa Schiebinger exposes the deep rooted sexism of biologists and taxonomists. She discusses how, “among all the organs of a woman’s body, her reproductive organs were considered most animal-like. For Plato, the uterus was an animal with its own sense of smell, wandering within the female body and leaving disease and destruction in its path. Galen and even Vesalius (for a time) reported that the uterus had horns” (7: p-394). The womb is considered ‘dirty’, ‘polluting’ and the like, especially since menstrual blood is associated with it, and menstrual blood is considered far more polluting than contagious diseases, faecal matter or even death (8, p-210). Sarah Pinto interacted with women in rural Uttar Pradesh to understand their perceptions and experience of childbirth, and noted that in the worldview of the women she spoke with, “the womb is both a dirty pit and a space of life” (9, p-80). Upon wishing to clarify if the womb is considered dangerous or dirty, the woman reinstated, “Not dangerous, just dirty.” They explain that while puja might be offered at all places in the house, it is never offered in the birthing-room, even in situations of very difficult births, since the birthing-room is a dirty place and to intend to call the god into that room is sacrilege in itself (ibid, p-80).

What makes the womb so susceptible to popular discourse, statist intervention and media news is its organic ability to gestate and give birth – something that doubles up as a problematic schism because, while the womb and its processes belong to the female, its produce, viz., the child, belongs to the state, and the state is essentially patriarchal. The state controls the produce but not the process and consequently feels the need to remain as close to it as it can, monitoring and intervening from time to time. Till such time that synthetic wombs, completely dissociated from all manners of women, are not invented and popularized, this schism will continue, and so will the statist gaze on and manipulation of the womb.

The *sanskar* part of Garbha Sanskar (i.e., the stress on sanitization/purification) rests upon the assumption that in a primal sense, the womb is not clean, and cleaning it is a prerequisite if we are to ensure the birth of the *uttam santati* – the ideal/best child. It is to attain this perfect birth that the representatives of Arogya Bharati guide couples on a variety of things: when to have sex (i.e. when to conceive) and when not to have sex, what to eat, what to listen to, and how to conduct life during the pregnancy. Dr Hitesh Jani, National Convener, Arogya Bharati, explained that, “The parents may have lower IQ, with a poor educational background, but their baby can be extremely bright. If the proper procedure is followed, babies of dark-skinned parents with lesser height can have fair complexion and grow taller” (5). The group has allegedly claimed that till date, 450 children have been born under their guidance.

***So what?***

We can surely ask, ‘so what’? What’s the big deal about wanting to have the child that you want to have? Let us examine the issues involved, one at a time.

According to the *sanskaris*, the knowledge system from which their beliefs stem is based on the principles of Ayurveda. They also claim, at the same time, that their methods are scientific. It is important as an epistemological exercise to acknowledge that Ayurveda was born in the East, and is said to pre-date the birth of modern science by centuries; modern science was born around the 16th century in the West. Colonialism brought the knowledge and praxis of modern science to Indian shores; contestations, co-options and confrontations between modern science and indigenous forms of enquiry and practice ensued, and the complex trajectories of these have been studied and theorized by postcolonial historians of science (10).

As a system of knowledge Ayurveda continues to be distinct from modern science – the models of knowledge sustaining the two systems are different, the ways by which each system interprets the body, illness, disease and health are different, and yet investors in Ayurveda keep claiming validity using the language of science, even as science consider all manners of healing systems, besides allopathy, its distinct outside. Interestingly, the agenda of the *sanskaris* “to have a Garbh Vigyan Anusandhan Kendra, a facilitation centre, in every state by 2020” (5) smacks of the contradiction: the placement of the term *vigyan*, ie. ‘science’ against a methodological framework that is inspired by ancient, pre-modern and non-scientific (which is not necessarily synonymous with ‘unscientific’) knowledge system(s) remains an epistemological anachronism.

Modern science has its own set of theories, analyses, and methods of producing knowledge. While there continues to exist other systems of knowledge and methods of enquiry, science has long become global hegemonic. What the *sanskaris* are doing is to contest science, and foreground a different system, and till this point it is a legitimate exercise. But then they are using the register of the former to fortify the validity of the latter, a modus operandi that comes across as either ill-informed and naïve, or convenient and opportunistic.

Garbed in the acceptable language of science, the non-scientific assertions and ideologies gain faster social acceptance, even ideologies that are sexist, classist, racist and even actually unscientific. For instance, it is an accepted part of scientific/medical knowledge that women require a higher intake of calcium when the skeletal structure of the foetus begins to develop; obstetricians systematically prescribe calcium supplements as part of antenatal care, and thus, we are not disturbed when *sanskaris* talk about this as well, as part of their overall otherwise problematic antenatal care plan. In earlier days, it was science (the science of physical anthropology) that was used to argue that physical dimensions of the human skull reflected the person’s cognitive and mental development levels, and this was used to justify colonizing impulses, something which now strikes us as outright ludicrous.

The science of obstetrics asserts that the emotional well-being of the pregnant woman is of critical importance for the healthy development of the foetus. It is obstetric best practice to ask the pregnant woman to indulge in activities she enjoys, listen to music, i.e., keep happy; the rationale is that stress releases cortisol in the blood, and high cortisol levels are harmful for foetal health, so to reduce cortisol levels, one should avoid stress, and if one is happy, stress is minimized. The *sanskaris* also maintain that happiness is important, and they talk of the women’s emotional health during pregnancy, and we find that they are in sync with scientific logic. Dr Karishma Mohandas Narwani, National Convener of the project, explained that “Ayurveda has all the details about how we can get the desired physical and mental qualities of babies. IQ is developed during the sixth month of pregnancy. If the mother undergoes specific procedures, like what to eat, listen and read, the desired IQ can be achieved. Thus, we can get a desired, customised baby” (5). However, we start feeling a bit unsettled when the term “customised baby” is used; we feel disturbed when women are asked to conduct themselves in specified ways so as to successfully ‘clean’ their wombs. But when happiness *per se* is warranted during a pregnancy, who decides what should make the woman legitimately happy? Why does one set of prescriptions (listening to music for instance) seem acceptable while another (such as chanting the god’s name) seem worrisome?

The point is, advocates of science and those belonging to a space that is opposed to modern science, are both using the hegemonic language of science to justify their prescriptions; the *sanskaris* use the language and ensure popular uptake before slipping into a different path at the last moment. Discussions on how improved nutrition, better quality of rest, etc., will help the woman stay healthy and also affect the foetus in a similar way co-opt the public health perspective as well; it is through their repeated use of the language of medical science and public health that their access to people’s minds become much easier. It is the sheer complicated nature of the *sanskari* discourse that makes it all the more important to tease out the overlaps and divergences in their arguments before we can call it either a deliberate hoax or a praxis that is flawed. It becomes an imperative to understand how are these two arguments/beliefs (of what medical science asks of the woman and what the *sanskaris* do) are different *in terms of their epistemological validity* – or, are they? The importance to show up the difference cannot be stressed enough, for, the *sanskari’s* line of guidance is, ultimately, a surreptitious form of eugenics and we need to become aware of that.

***The catch-me-if-you-can eugenics***

The *sanskari* form of eugenics is structurally different from the Hitlerian version, the Sanjay Gandhi-version and the more contemporary assisted reproductive technologies enabled Preimplantation Genetic Diagnosis version. The *sanskari* eugenics is a new version, one that is technically (and till now) outside the ambit of law. This is a curious form of eugenics where, unlike the other versions, no already-born human being is being killed for having the wrong/undesired cultural or gender identity, or for being poor; this version is also not about selective destroying of embryos either. The elimination in this eugenics is not taking place at any of these articulable levels which could be interrogated by law.

While it is fair enough (pun to be ignored) to be curious about the alleged 450 babies born under the supervision/intervention of the *sanskaris* (how tall, how fair), it is the general *desire*of the common (wo)man to beget a child who is healthy that is here exploited by the *sanskaris*. I would dare say that many of us are eugenicists in some degree or the other deep down or otherwise: even while sincerely standing for and advocating the rights of, for instance, the differently abled citizens, even while never agreeing to abort an embryo that gets diagnosed with some genetic abnormality, while pregnant a lot of us are likely to desire a non-differently abled child. Accepting the child whole-heartedly when s/he is born with any differences is a different matter; adopting a child with genetic issues is a different matter as well, for in these situations, the child is already born.

A detour to talk about my own experience: at the 22-weeks ultrasound scan it was realized that the foetus I was carrying had talipes of both feet. I cannot say I was not disturbed at all at the news. A supremely arrogant and obnoxious doctor, to whom I had gone for a second-opinion, asked me if I had second thoughts about continuing the pregnancy because of this, and assured me he could help me if I wanted to go for ‘it’. I was aghast! I failed to grasp why anyone would consider terminating a pregnancy for talipes! I talked to some other doctors and realized that talipes is absolutely reversible in present times. After my daughter was born, I happened to be put in touch with this brilliant paediatric orthopaedic in Kolkata, and my daughter underwent treatment. Her feet look normal and she has been walking, running and climbing stairs from the age that toddlers anyway do. To see her walk and run around like other kids I feel relieved, and happy. The point is, I *did* try to get her feet corrected, to ‘look’ normal; is that some form of eugenicist in me? I can rationalize my act: when there is treatment available, and the treatment is neither complicated nor very expensive, and when I had access to one of the best doctors, why should I not have got the problem corrected for her? If I did not do so, how would I explain that to her later when she might ask me, why, despite having access to easy treatment, I did not help her get her feet corrected? And then again, I can counter these rationalizations myself. I admit I stand guilty too somewhere, in some degree. Eugenics is very complicated.

When science as a language is used, arguments get fortified manifold, even though we realize that science in itself is dynamic and also social and political. It is science that has told us that consanguineous marriages are not wise, because of how genes are passed on to the offspring. Even for non-consanguineous marriages it is common to hear that instead of the baseless horoscope-matching, we should go in for blood-group matching, for testing certain genetic conditions like thalassemia before zeroing in on the partner. It seems perfectly humane and ethical to *not* want to increase the chances of thalassemia for a prospective child. Of course having a child with thalassemia (because both parents are positive) is *not* the same (or even closely so) to having a child with dark skin. But I am arguing that this is a question of the *grade*of the desire to erase the possibility of something. To want to eliminate the possibility of thalassemia in a prospective child seems absolutely acceptable, but to want to eliminate the possibility of having a dark-skinned child seems ridiculous and inhuman. However we should realize that *the* *register used is the same in both*, and in a nation where notwithstanding the train of protests, fairness and whitening creams rule the roost, being able to ensure a prospective fair-skinned child will indeed appeal to many.

It is understandable that these “sanitize-the-womb” workshops and counselling sessions will appeal to the common (wo)man, surreptitiously and otherwise, consciously and otherwise. The risk is not that the organizers will continue to ignore court stay orders and go ahead with the workshops, but that we will ask ourselves, why not, why not just see what they say, and if they prescribe a few easy things (and the obstetrician too will anyway also prescribe a list of things), why not abide by those and just see if the child is really born fairer and grows up taller? An easy mix of Fair-&-Lovely and Horlicks. The seeming simplicity of the thing is what makes it easy to access minds and desires. This eugenics is hard to catch, it keeps escaping us, because it is about the future, it is actually about manipulating desires, not human beings or embryos.

***Tread softly***

Those signing up for the workshops are not breaking the law. They can argue that they are not harming anybody, they are only hoping that their child would be born with good looks and a good body. Fairness and height eventually boil down to that in common perception – good looks and a well-built, healthy constitution. There might be a woman or two in the workshops who faced abuse at her in-laws for being dark skinned herself, and her wish to give birth to a fair skinned child might stem from her desire to get back her standing in her family. Most of us indeed hope that our children grow up physically healthy, and terms such as ‘healthy’, mean different thing to different people. The common man does not go by WHO definitions. We keep wishing things for our children, and to expect that the child grows up into a sensitive, caring, and good-at-heart human being, is to surrender to desire as well. So, when a couple adds that they want to their child to be born with a shade of skin fairer than theirs, what is our logical counter to that desire? It is difficult to articulate a critique to this desire, and it becomes all the more important to engage with this issue in all its complexity, work through its multiple layers, because in following such desires, what gets erased are our sensitive emotions, the ease of being happy with who we are and who we give birth to. We end up treading on ourselves in the long run, and by denying to accept a prospective generation that is not substantially fair, by desiring to beget progeny that is fairer than we are, significantly taller than we are, we agree to look upon ourselves as lacking and unacceptable. We end up treading not just on dreams but also on our rights, hope, on life and love, and we are treading not softly either.

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