



Psychological aspects of surrogacy

Ansari F

Jai Narain Vyas University and Ph.D. from Singhania University, Jhunjhunu, Rajasthan, India

Abstract

In today's world new technologies are being developed and the human reproductive system is not being untouched. Surrogacy is one of the modern technologies to give birth to a newborn. Centre for Social Research reported that slowly but steadily India is emerging as a popular destination for surrogacy arrangements. In this study we considered different studies concerning with psychological aspects of Surrogacy. In the beneath a discussion is also made.

Keywords: surrogacy, gestational surrogacy, human reproductive system

Introduction

According to world fertility patterns 2015, global total fertility is projected to decline to 2.4 children per woman by 2030 and 2.2 children per woman by 2050. (world fertility Patterns, 2015). Infertility is also reported to occur in one in seven couples and it is estimated to be increased among young couples (Edelmann RJ, 2004) [2]. One of the studies considered, revealed that 86% of people suffering from fertility problems sought medical help with a minor number of persons choosing adoption. (Van Balen F *et al.*, 1996) [3].

Surrogacy and its Psychological Aspects

As per the draft Assisted Reproductive Technology (Regulation) Bill the surrogacy and related terms are defined as: (i) Surrogacy means an arrangement in which a woman agrees to a pregnancy, achieved through assisted reproductive technology, in which neither of the gametes belong to her or her husband, with the intention to carry it to term and hand over the child to the person or persons for whom she is acting as a surrogate; (ii) Surrogate mother means a woman who agrees to have an embryo generated from the sperm of a man who is not her husband and the oocyte of another woman, implanted in her to carry the pregnancy to full term and deliver the child to its biological parents; and (iii) Surrogacy agreement means a contract between the persons availing of assisted reproductive technology and the surrogate mother. (Sharma RS, Bhargava PM, 2014; R. S. Sharma, 2014) [4, 5]. Earlier studies reported that surrogacy was considered as the least acceptable way to have children. (Dunn PC *et al.*, 1998; Ryan IJ *et al.*, 1988) [6].

In a surrogacy arrangement a woman called surrogate mother or surrogate, carries and delivers a child on behalf of another couple called intended parents or commissioning parent. There are two main types of surrogacy, Traditional surrogacy and Gestational surrogacy. (Suketu V. Shah, 2016; M. Cooper *et al.*, 2015) [6, 8]. Traditional surrogacy is also known as straight, natural or partial surrogacy, this type of surrogacy uses the egg of the surrogate mother and the sperm of the

commissioning father. In this type of surrogacy, the baby is biologically related to the surrogate mother and commissioning father. One of the hard aspects of traditional surrogacy is that the surrogate mother must have to give up her own biological child and the commissioning mother must accept a child that her husband has fathered with another woman. (Jadva V *et al.*, 2003; Golombok S *et al.*, 2006; Golombok S *et al.*, 2004) [9, 10, 11] whereas gestational surrogacy is also called full, host or IVF (in vitro fertilization) surrogacy. Such arrangement of surrogacy is found more acceptable among people. This type of surrogacy is carried out using embryos created from sperm and oocytes from the commissioning couple, which are transferred to the surrogate mother and thus the surrogate is genetically unrelated to any child born (Bhatia K *et al.*, 2009) [12].

According to one of the studies, we came across, as in a surrogacy arrangement, the private act of love, intimacy and secrecy of creating a child becomes a public act (Daar J, 2014) [13]. This surely impose a huge psychological stress for the surrogate mother as, guilt feelings that pregnancy is carried for money as well as social isolation and stigmatization. This study also reported psychological impacts consequent upon breastfeeding difficulties, as well as upon neonatal care. (Anu *et al.*, 2013) [14]. Relinquishment of the children was reported throwing a mixed emotions of happiness and sadness (Van den AOB *et al.*, 2005).

In one of the studies, the experiences of 34 surrogate mothers was evaluated and it was found that 32% of the women faced some difficulties in the weeks following relinquishing of the child to the commissioning couple and only 3% experienced moderate difficulties. (Jadva V *et al.*, 2003) [9]. Some studies reported that both gestational surrogates and intended parents have to face negative attitudes to the process of gestational surrogacy. Disapproval of the process concerned also reported (Krishnan V, 1994; Wiess G, 1992) [14, 16]. In contrast, we came across another study analyzing attitudes to gestational surrogacy in a selected population of psychologists. This study found a good level of support for the process (Constantinidis

D *et al.*, 2012) [17].

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Discussion

Nowadays fertility seemed to be declining because of modernization and decline of traditional life-style. Surrogacy appears to be a boon or a beneficial situation for the infertile couple as well as the surrogate mother. As some studies reported disapproval of these new technologies belonging to the human reproductive system, so these technologies should be encouraged.

References

1. World fertility patterns,2015 <http://www.un.org/en/development/desa/population/publications/pdf/fertility/world-fertility-patterns-2015.pdf>
2. Edelmann RJ. Surrogacy: the psychological issues. *J Reprod Infant Psychol.* 2004; 22:123-136.
3. Van Balen F, Verdurmen J, Ketting E. Choices and motivations of infertile couples. *Patient Educ Couns.* 1996; 31:19-27.
4. Sharma RS, Bhargava PM. New Delhi: Ministry of Health and Family Welfare, Government of India; Indian Council of Medical Research; [accessed on October 10, 2014]. Draft The assisted Reproductive Technologies (Regulation) Bill-2010. Available from: <http://icmr.nic.in/guide/ART%20REGULATION%20Draft%20Bill1.pdf>
5. Sharma RS. Social, ethical, medical & legal aspects of surrogacy: an Indian scenario, *Indian J Med Res.* 2014; 140(1):S13-S16.
6. Dunn PC, Ryan IJ, O'Brien K. College students' acceptance of adoption and five alternative fertilization techniques. *J Sex Res.* 1988; 24:282-287.
7. Suketu V. Shah. Issues of Surrogacy in India. *International Journal of Culture and History.* 2016; 2(4):173-77.
8. Cooper M, Vafadari K, Heida M. *Current Issues and Immerging Trends in Medical Tourism*, 1st ed. IGI Global, USA. 2015; 10:139.
9. Jadva V, Murray C, Lycett E, MacCallum F, Golombok S. Surrogacy: the experiences of surrogate mother. *Hum Reprod.* 2003; 18:2196-204. doi:10.1093/humrep/deg397
10. Golombok S, MacCallum F, Murray C, Lycett E, Jadva V. Surrogacy families: parental functioning, parent-child relationships and children's psychological development at age 2. *J Child Psychol Psychiatry.* 2006; 47:213-22. doi:10.1111/j.1469-7610.2005.01453.x
11. Golombok S, Murray C, Jadva V, MacCallum F, Lycett E. Families created through surrogacy arrangements: parent-child relationships in the 1st year of life. *Dev Psychol.* 2004; 40:400-11. doi:10.1037/0012-1649.40.3.400
12. Kalsang Bhatia, Elizabeth A Martindale, Oybek Rustamov, Anthony M Nysenbaum. *Surrogate pregnancy: an essential guide for clinicians.* *The Obstetrician & Gynaecologist.* 2009; 11:49-54.
13. Daar J. Physician duties in the face of deceitful gamete donors, disobedient surrogate mothers, and divorcing parents. *Virtual Mentor.* 2014; 16:43-8.
14. Anu Kumar P, Inder D, Sharma N. Surrogacy and women's right to health in India: Issues and perspective.

15. Krishnan V. Attitudes toward surrogate motherhood in Canada. *Health Care Women Int.* 1994; 15:333-357.
16. Wiess G. Public attitudes about surrogate motherhood. *Michigan Sociol Rev.* 1992; 6:15-27.
17. Constantinidis D, Cook R. Australian perspectives on surrogacy: The influence of cognitions, psychological and demographic characteristics. *Human Reproduction.* 2012; 27:1080-87.