Surrogate motherhood- some fundamental issues and questions.

The phenomenon of surrogate motherhood in India has acquired disturbing dimensions with the easy availability and proliferation of technologies for assisting reproduction in recent years. There are many aspects to this development that are of concern to women’s organizations like AIDWA fighting to safeguard women’s health as part of women’s rights. The most striking feature of the current growth in ART is that it is becoming a huge private industry with hardly any self regulation measures, and public control exerted by the state to ensure that women’s interests are protected.

- Today, the practice of wombs being rented out for a price has become a thriving and lucrative business, not the least because neo liberal policies and globalization have resulted in the aromatization and commodification of women. Women are being reduced to the status of mere biological carriers, not to mention that their production to countries like ours, since labour is cheap, and laws are minimal, so also the reproductive market is finding its resource base in countries like ours. Women are pushed into selling or renting out their body parts. The unbridled growth in medical tourism that the country has witnessed also provides the context for a huge expansion in what is becoming a profitable business. Unfortunately, there has been little discussion regarding the various dimensions of the issue, and the Govt. has been neglectful of the impact of this technological advance on the health and well being of Indian women.

- The market for surrogacy in India is no longer a hidden or disguised one. Clinics have been advertising their services openly. Though the sale of kidneys as a source of income has excited outrage, the rent a womb enterprise has not been subject to the same degree of consternation. Doctors in Gujarat have openly celebrated the income earning opportunities for surrogate mothers. ICMR estimates that reproductive tourism could earn 6 billion dollars in a few years. The message seems to be that such an avenue for income generation has come as a golden opportunity especially for the poorer and marginalized sections of women. This could lead to a much greater degree of exploitation, economically, and socially, especially if the private sector is allowed to remain in complete charge.
• This appalling mindset that since the women are making gains, the terms are OK drives underground some of the major problems that should have been addressed by the policy making bodies already. The ICMR guidelines drawn up in 1992 hardly look at all the factors involved. For instance, the health and nutritional status of poor women in our country is already highly compromised. Morbidity and mortality associated with childbirth are higher, and the response of the health system to such complications has been inadequate. It is this very group from which the potential surrogate mothers are sought to be drawn. What impact a set of repeated pregnancies (for providing surrogacy) would have on the women does not seem to have merited consideration.

• The emotional trauma that the mother may undergo has come in for very little attention. Child bearing is not a job, where once the child is produced, the producer can be delinked from the end-product, which can then be sold. The mother develops strong feelings for the growing baby, which cannot be quantified. In some countries like UK, there have been instances where giving away the child proved so difficult that custody fights were generated. These aspects have hardly featured in any discussion on this issue.

• The ethical issues are also a grey area which has been subsumed by the profit driven motives. What are the rights of patients in this procedure? The scope for unethical practices being indulged in by unscrupulous doctors is immense, given the desperation of infertile couples, and the vulnerability of the provider.

• Technological advances in pre sex selection procedures, and the possibility of choosing the sex while opting for IVF increases the chances of further gender imbalances in a society with an already skewed sex ratio.

Clearly, there is a need for a much more widespread and in depth discussion around the multidimensional factors that would impact on surrogate mothers. Unfortunately, the DWCD has not found it necessary to invite the national women’s organizations to the consultation. Such a limited close door discussion will not serve the purpose of ensuring that the Government responds to this issue with the seriousness and understanding that it deserves.

AIDWA demands that there should be urgent regulation of ART, a Bill should be formulated for the same, after discussion with the women’s organizations and groups that have been working on these issues for a long time.

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