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## Surrogates and Their Discontents

by [Christopher White](#)

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*Governor Christie's recent veto of a bill that would lower restrictions on gestational surrogate mothers should prompt us to consider surrogacy's harmful effects on mothers and children.*

Meet Cathleen: a twenty-year-old from New Brunswick, Canada, who served as a surrogate mother of twins for an infertile British couple. Twenty-seven weeks into the pregnancy, Cathleen was informed—via text message—that the couple was divorcing and would no longer need the children she had been carrying for them.

Then there's Carrie: a mom of four from Colorado who agreed to carry a child for an Austrian couple who had spent twenty years unsuccessfully trying to conceive. After the child was born and they returned home, Carrie was hit with medical fees of \$217,000. The Austrian couple paid none of it, and failed to make the agreed-upon surrogacy payment.

Consider too the story of Premila Vaghela, an Indian woman who was paid to serve as a surrogate for a couple from the United States. After a premature birth at eight months into the pregnancy, the child survived but the mother died of complications from delivery. These are just a few of the many surrogacy horror stories. Meanwhile, surrogacy remains a lucrative enterprise with an ever-expanding reach.

In recent weeks, the New Jersey state legislature spent the closing days of the legislative session quietly trying to weaken restrictions for gestational surrogates in the state. Their efforts were foiled, however, when Governor Chris Christie vetoed the bill last Wednesday, August 8, citing "the profound change in the traditional beginnings of the family that this bill will enact." For advocates of women's health, children's rights, and stable families, this is a huge victory. It also should be used as a teaching moment to expose the many moral and ethical concerns raised by surrogacy, and the health risks to mothers and children that surrogacy introduces.

The practice of surrogacy traditionally has taken place by inserting freshly thawed or new sperm into the mother. This is the standard procedure for fertile women who are able to serve as the child's gestational and genetic mother. The second method, used increasingly more often, is known as gestational surrogacy, in which a previously created embryo is implanted inside the surrogate mother, who delivers a child that is not genetically related to her. While some surrogate mothers agree to carry another couple's child for what they consider to be altruistic reasons, the more common motivation is the financial incentive that couples desperate to conceive a child can offer.

Like anonymous sperm donation and the buying and selling of women's eggs, the practice of

surrogacy in the United States is barely regulated, since the desires of the parents are valued above the child in gestation. There also are few records to determine how many children are born through surrogacy each year. According to the most recent data from the American Society for Reproductive Medicine, nearly 1,400 children were born through surrogacy in 2008. That number indicates an almost 100-percent increase from the 738 babies reported born through surrogacy in 2004. Regrettably, few studies have explored the health risks posed by surrogacy or its effect on children. However, if the anecdotes above are any indication, all is not well for the mothers or the children involved in the process.

Consider the commodification of women caused by surrogacy. Gestational surrogacy reduces women to their biological capacities as mere instruments to be used in the manufacturing of a product, comparable to the way we view car factories in Detroit.

At the same time, surrogate-produced children are manufactured as designer babies: Wealthy parents can select their perfect fusion of sperm from an athletic male with the egg of a female who graduated from an Ivy League school with a 4.0 GPA. Indeed, surrogacy is a medium in which couples—or even single men or women—can attempt to create their dream child.

This effort, however, comes at a high cost, since it usually ends in the exploitation of impoverished women. The death of Ms. Vaghela of India, who chose to become a surrogate in hopes of providing a better life for her two children, offers a perfect example of this problem. Now her children will live in poverty indefinitely as orphans. Moreover, surrogacy tourism has become an industry in itself: wealthy westerners travel to places such as India and Southeast Asia to hire surrogate mothers to carry their children. In some patriarchal societies, there are reports of women being forced by their husbands to serve as surrogates in order to contribute to household income.

Then there's the other side of the coin: the children created by the surrogacy process. In a 2010 study, "[My Daddy's Name is Donor](#)," 45 percent of children conceived from an anonymous sperm donation reported that they were bothered by the fact that money was exchanged in order to conceive them. The same is likely to be said by children conceived through surrogacy, and the psychological effects of being separated from their birth mother pose numerous consequences that likely will remain with them for the rest of their lives. There is a natural, hormonal bonding that takes place between a mother and a child that she carries in her womb. The hormone oxytocin, for example, is released in large amounts both during and after childbirth, which establishes and increases the trust between mother and child. Surrogacy intentionally severs this natural and beneficial relationship, a relationship we should seek to encourage and protect, not prevent.

Lastly, those who promote marriage between a man and a woman and the parenting of a mom and a dad as ideal should be concerned about the effects of surrogacy. As proponents of same-sex marriage continue to make their case, their arguments will probably coincide with a greater demand for surrogate mothers who can provide children to same-sex couples. While there is no way to measure how many same-sex couples are in the surrogacy market, a review of surrogacy organizations reveals that many testimonials and advertisements are either from or targeted at same-sex couples.

While surrogacy legislation or regulation is unlikely to be a matter of debate in this year's presidential election—especially when Mitt Romney's son Tagg recently had twins via a surrogate

mother—it is an important issue that should make us pause and reflect on the type of society we are building. Are we willing to prioritize the desires—not needs—of a select, wealthy few at the expense of future children? And if so, when and where should we draw the line?

In his statement criticizing Governor Christie’s veto, state senator and co-sponsor of the New Jersey bill Joseph Vitale called the veto “a major setback for parents who wish to create life and give a baby a loving home.” Yet for victims like Premila Vaghela of India or the surrogate children who fall asleep at night wondering about their biological mothers and fathers, that line was crossed long ago.

*Christopher White is the Director of Education and Programs for the [Center for Bioethics and Culture \(CBC\)](#). The CBC is in pre-production for an upcoming documentary on the consequences of surrogacy for women and children.*

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