6.1 **Introduction**: The field study was conducted from December 2013 to December 2016. For the purpose of study, the interview schedule was prepared for the doctors who are experts in infertility treatment and practicing surrogacy. Questionnaire was prepared for analyzing and getting information from the surrogates relating to their experiences of surrogacy. Questionnaire was also prepared for infertile couples for analyzing their views and opinions about surrogacy. For this purpose, 25 clinics were identified that are involved in carrying out surrogacy arrangements. Out of these, 20 were identified in the State of Punjab and 5 in U.T. Chandigarh. An attempt was made to contact all the clinics through doctors by making calls and fixing appointments and visiting them personally. However, the success was achieved in getting the meeting fixed with only 10 clinics as other showed unwillingness for becoming part of the research.

On being contacted, they were given assurance that the information would be kept confidential and that it was required for the purpose of research only. The clinics which expressed their willingness to participate in the study did not help in yielding fruitful result all the time. In order to get information from the clinics, the researcher had to visit four to five times to a particular clinic. In some of the cases, the doctors agreed to give an interview, but refused holding of meetings by the researcher either with the surrogate or with the intended parents. The refusal was made on several pretext like ‘it is against the policy of the clinic’, ‘the clinic presently have no case of surrogacy’, ‘no surrogacy cases have been carried by the clinic so far’, ‘it involves international complications’, ‘visit some ART Bank for the same purpose’, ‘matter involves privacy and prestige of the hospital’, ‘why another clinics are not consulted for the same purpose’.

An effort was also made to collect data of surrogates and intended parents from ART bank, but that was also not successful as the researcher was informed that the
management of the ART bank has refused to disclose any data even for the purpose of study. It was only through the willingness of handful of clinics that interviews with surrogates could become possible. Some of the surrogates were interviewed under strict scrutiny of the clinics; some were interviewed in the clinics, but in close premises without any interference from the clinic and one was interviewed at her residence, one through telephone call as she was not willing to appear in person. As far as the infertile parents were concerned, the clinics refused to provide any help for their personal interview. According to the clinics, the patients were not willing to disclose their private affairs even for the purpose of study. However, two clinics agreed to provide help of personally interviewing the infertile parents. Other infertile parents were interviewed on the basis of the personal contacts of researcher, close relatives, friends, colleagues and their friends.

For the purpose of the present study, the researcher could, with great difficulty, undertake analysis of 10 infertility clinics, 15 infertile parents and 10 surrogates. The researcher faced difficulty in extracting the desired information from different infertility clinics, infertile parents as well as surrogates. None of them wanted to go on record to answer the questionnaire even for the purpose of research. For the purpose of analyzing the surrogacy arrangement as provided by the infertility clinics, the study is conducted for getting the information in relation to the kind of patients undertaking surrogacy in the clinic. The information is also received about the reasons for suggesting surrogacy by the clinics to the infertile patients. An attempt is made to know about the persons to whom surrogacy is provided and kind of surrogacy provided to these persons. The data is also collected in relation to the awareness of infertile parents regarding surrogacy. Further the information is also taken from the clinics about the cost of treatment in case of surrogacy. The information is also collected regarding the medical procedures and risks involved in case of surrogacy.

An effort through the research is made to know the extent of role of clinics in surrogacy. Whether the clinics are playing any role in the arrangement of surrogate, formulation of the surrogacy contract, payment of compensation to the surrogate, delivery and custody of the child or not is also analyzed for the purpose of the study. In order to know the prevalence of surrogacy, the total number of pregnancies for surrogacy in each clinic is also analyzed. As far as the infertile parents are concerned,
the study highlights the general profile of the parents i.e. their location, residence, marital status, educational qualifications, employment and extent of income. The information is also collected in relation to infertility i.e. for how long an infertile parent is not able to have a child, kind of infertility, treatment undertaken for overcoming infertility and reasons for undertaking treatment.

The study further represents the extent of awareness of infertile parents regarding surrogacy. An effort is made to analyze the views and opinions of infertile parents about different issues involved in the surrogacy process. The different issues include among other whether surrogacy should be permitted, if permitted, which kind should be permitted, who should be permitted to enter into surrogacy contract, what should be the basis for surrogacy, who should be the parent of child born through surrogacy? The analysis is also made about the opinion of infertile parents in regard to availability of different rights to the surrogate such as payment of compensation, stay of the surrogate, right to abortion, right to refuse the delivery of the child. The opinion of infertile parents regarding the extent of rights of the child in relation to breast feeding, custody, seeking information about surrogate birth and meeting the surrogate is also analyzed through the present study. An effort is made to know the preference of the infertile parents between surrogacy and adoption and in case surrogacy is preferred, reasons for the same are also analyzed through study.

As far as the surrogates are concerned, an effort is made to know whether they are educated and employed or not. An effort through the present study is made to analyze why they have opted for the surrogacy arrangement. The research is also carried in relation to the family structure, number of children of the surrogates. An attempt is made to see whether surrogacy is adversely impacting her relations including husband and children or not. The study is also carried in relation to the medical procedures undertaken by the infertility clinics in the process of surrogacy. An attempt is made to know whether the contract of surrogacy is entered between the parties, whether the surrogate is given the copy of the contract, whether she is aware about the contents of the same or not. Further an effort is made to know about the extent of compensation actually paid to the surrogate, when such amount is paid and whether the amount is paid before or after confirmation of pregnancy. An attempt is also made to see the level of satisfaction of surrogate with surrogacy.
6.2 Analysis of Infertility Clinics: The general profile of the clinics is analyzed for purpose of study of infertility clinics. The study of different aspects are undertaken in order to know what kind of patients are visiting clinics for purpose of surrogacy, what kind of treatments are given to them, if surrogacy is advised, then which kind is followed and when it is recommended. An effort is made through study to identify the costs actually incurred in case of surrogacy. The researcher has found that the general frequency of patients visiting clinics depends upon whether the clinic is exclusively undertaking infertility treatment or it is also offering other treatments apart from infertility. Like in one clinic, the frequency of patients is 5-10 per month while in another clinic, it is 30-40 patients per day. In other clinic it is 150-200 per month only in relation to infertility treatment. Thus the number of patients is not fixed in the cases where they are not coming specifically for infertility treatment.

Analysis 1: The researcher tried to find out whether the nationals are visiting the clinics for undertaking infertility treatment or the foreigners are also coming to the clinics for the same purpose. Further an attempt is made to know that whether the patients are from rural or urban areas.

![Figure 1 Background of Patients Visiting Clinics Generally](image)

Result: The infertility clinics are receiving all kind of patients seeking infertility treatment i.e. mixed nationals, foreigners which include patients both from rural and urban areas.
**Analysis 2:** The researcher tried to analyze different kinds of treatments which are provided to the patients visiting clinic for the purpose of infertility treatments. An attempt is made to see the different available treatments for overcoming infertility.

![Figure 2 Kinds of Treatments Generally Offered by the Infertility Clinics](image)

**Result:** Depending on the medical problem of the patients, different treatment techniques are used by the doctors for overcoming infertility.

**Analysis 3:** The researcher tried to find out the specific cases in which surrogacy is suggested to the patient seeking infertility treatment.

![Figure 3 Reasons for Suggesting Surrogacy to the Patients](image)

**Result:** Damaged uterus and Failure of IVF are the main reasons behind suggesting surrogacy to the patients by the infertility clinics.
Analysis 4: The researcher tried to get information regarding the background of the patients seeking surrogacy. An attempt is made to analyze whether Indians only or NRI’s and foreigners visit clinics for undertaking surrogacy.

![Figure 4 Background of Patients Seeking Surrogacy in Infertility Clinics](image)

Result: Both Indians and foreigners visit clinics for seeking surrogacy.

Analysis 5: The researcher tried to find out the extent of awareness amongst the patients seeking surrogacy. An attempt is made to know whether or not they require some information regarding surrogacy.

![Figure 5 Awareness of Patients Regarding Surrogacy](image)

Result: Most of the patients seeking surrogacy are fully aware about it.
**Analysis 6:** The researcher tried to analyze the kinds of persons who are allowed by the infertility clinics to undertake surrogacy. The purpose is to know whether only married are allowed or it also includes single, gay and lesbians.

![Pie chart showing permitted surrogacy types](image)

*Figure 6 Persons Allowed by Infertility Clinics to Undertake Surrogacy*

**Result:** Majority of infertility clinics are allowing only married persons to undertake surrogacy.

**Analysis 7:** As there are two kinds of surrogacy, the researcher tried to see which kind is practiced by the infertility clinics. Through this, an attempt is made to know whether the surrogate has genetic link with the child or not.

![Pie chart showing surrogacy types](image)

*Figure 7 Kind of Surrogacy Practiced by the Infertility Clinics*

**Result:** Only gestational surrogacy is carried by the infertility clinics where the surrogate is not genetically related with the child.
**Analysis 8:** An effort was made to know the extent of expenditure or costs of surrogacy. The purpose is to know whether it involves the same cost or different costs are involved depending upon the treatment provided by the infertility clinics.

![Figure 8 Total Cost of Treatment in Case of Surrogacy (in Lakhs)](image)

**Result:** Different costs are charged by different infertility clinics for surrogacy.

**Analysis 9:** The researcher tried to analyze the kind of the procedure which is specifically used in case of surrogacy.

![Figure 9 Kind of Procedure Followed by the Infertility Clinic for Surrogacy](image)

**Result:** Majority of Infertility clinics are using the process of In Vitro Fertilization (IVF) in case of surrogacy.
**Analysis 10:** The researcher seek the opinion of the infertility clinics as to the health risk to the surrogate and the child in case the procedure of IVF is used.

![Pie Chart](image)

*Figure 10 Opinion of Infertility Clinics Regarding Health Risk to Surrogate and Child in Case of Treatment Through IVF*

**Result:** All doctors of infertility clinics believe that IVF is not risky for surrogate and the child born through surrogacy.

**Analysis 11:** The researcher tried to find out the success rate of pregnancy through IVF. An effort is made to see how far this technique is successful in achieving pregnancy.

![Pie Chart](image)

*Figure 11 Percentage of Success Rate of Pregnancy through IVF in Infertility Clinic*

**Result:** The success rate of pregnancy through IVF is 21-30%.
Analysis 12: The researcher seek to identify the number of attempts made by the infertility clinics for successful pregnancy in case of surrogacy.

Figure 12 Total Numbers of Attempts for Surrogate Pregnancy by the Infertility Clinics

Result: Half of infertility clinics surveyed undertake three attempts of embryo transfer for surrogate pregnancy.

Analysis 13: The researcher tried to see the extent of success rate of pregnancy in case the procedure is adopted on the surrogates who are fertile. An attempt is made to know whether there is some difference in the success rate of pregnancy through procedures in case of infertile women on the one hand and surrogates on the other hand.

Figure 13 Percentage of Success Rate of Pregnancy in Infertility Clinic through Surrogacy

Result: Nearly half of infertility clinics have 41-60% success rate of pregnancy in case of surrogacy.
Analysis 14: The researcher analyzed the different precautions directed by the infertility clinics that are required to be followed by the surrogates. An effort is made to know that apart from the general precautions of surrogacy, whether the surrogate is also required to follow the other precautions or not.

Figure 14 Precautions to be followed by Surrogate as per Infertility Clinics

Result: 50% of the surrogates follow general precautions of pregnancy, as directed by the infertility clinics.

Analysis 15: The researcher seek the information regarding the procedure which is used in case the placing of embryos in the surrogates results in multiple pregnancies. An effort is made to find whether multiple pregnancies are allowed to continue or some process is adopted to reduce the same.

Figure 15 Procedure Followed by Infertility Clinics in Case of Multiple Pregnancies

Result: Majority of infertility clinics suggest the process of fetal reduction in case of multiple pregnancies.
Analysis 16: The researcher seek the opinion of infertility clinics regarding the risks involved in case the process of fetal reduction is undertaken in order to reduce multiple pregnancies.

![Figure 16: Opinion of Infertility Clinics Regarding Risks involved in Fetal Reduction](image)

**Figure 16 Opinion of Infertility Clinics Regarding Risks involved in Fetal Reduction**

**Results:** Majority of doctors of infertility clinics believe that fetal reduction is more risky.

Analysis 17: The researcher tried to find out the process which is adopted by the infertility clinics in case of embryos which remain unused. The purpose is to see what is done to these unused embryos by the infertility clinics.

![Figure 17: Process Followed for Unused Embryos by the Infertility Clinic](image)

**Figure 17 Process Followed for Unused Embryos by the Infertility Clinic**

**Result:** Nearly half of infertility clinics discard the unused embryos.
Analysis 18: An attempt was made to know the extent of the pregnancies through surrogacy in the infertility clinics. The purpose is to know how far surrogacy is practiced by the infertility clinics.

![Figure 18 Extent of Total Number of Surrogate Pregnancies in Infertility Clinics](image)

**Result:** Majority of the infertility clinics have carried 10-15 pregnancies through surrogacy.

Analysis 19: An effort was made by the researcher to know whether or not the infertility clinics are examining the variables of the intended parents. The purpose is to see whether the clinics are more interested in providing services as desired by the intended parents or the infertility clinics are interested in confirming the details of intended parents and then undertake the process of surrogacy.

![Figure 19 Extent of Examination of Variables of Intended Parents by the Infertility Clinics](image)

**Result:** All the infertility clinics examine the variables of the intended parents before the process of surrogacy.
**Analysis 20:** An effort was made by the researcher to know whether or not the infertility clinics are examining the variables of the surrogate. The purpose is to see whether the clinics are more interested in carrying the procedure of undertaking pregnancy on the surrogate as desired by the intended parents or they are interested in confirming the details of surrogate and then undertake the process of surrogacy.

![Pie Chart](image1)

**Figure 20 Extent of Examination of Variables of the Surrogate by the Infertility Clinics**

**Results:** Majority of infertility clinics examine the variables of the surrogate before the process of surrogacy.

**Analysis 21:** The researcher tried to find out the extent of counseling provided to the parties to the surrogacy contract which includes intended parents, surrogate and her husband.

![Pie Chart](image2)

**Figure 21 Extent of Counseling Provided by the Infertility Clinic to the Parties to the Surrogacy Contract**

**Result:** All the infertility clinics are providing counseling to the parties to the surrogacy contract.
**Analysis 22:** The researcher tried to analyze whether or not guidelines for compulsory entering in to written contract in case of surrogacy is followed by the infertility clinics.

![Figure 22 Compulsion of Written Contract of Surrogacy by Infertility Clinics](image)

**Result:** All the infertility clinics are following the process of formulation of written contract on compulsory basis for surrogacy.

**Analysis 23:** The researcher seek the opinion of infertility clinics in order to find out whether the clinics are playing any role in the formulation of the surrogacy contract or parties are deciding the terms etc. of the contract independently.

![Figure 23 Role of Infertility Clinic in Formulation of the Surrogacy Contract](image)

**Result:** Majority of the infertility clinics do not play any role in the formulation of surrogacy contract.
**Analysis 24:** The researcher tried to find out the arranger of surrogate. The purpose is to know whether the infertility clinics or some other person is arranging the surrogate.

![Figure 24 Provision of Arrangement of Surrogate](image)

**Result:** In majority of the cases, the intended parents are arranging the surrogates.

**Analysis 25:** The researcher tried to get information regarding the arrangement of the genetic material i.e. eggs and sperms by infertility clinics. The purpose is to know whether infertility clinics are arranging it or it is arranged through some other means.

![Figure 25 Provision of Arrangement of Genetic Material](image)

**Result:** The genetic material is arranged mostly either through Ovum or Sperm Bank.
**Analysis 26:** The researcher tried to find out the role played by infertility clinics in deciding the compensation to the surrogate.

**Figure 26 Extent of Role of Clinic in Deciding Compensation to the Surrogate**

*Result:* Majority of infertility clinics are playing no role in deciding the compensation to the surrogate.

**Analysis 27:** The researcher tried to enquire about the place of stay of the surrogate during pregnancy. The purpose is to see whether the arrangements are made for stay of the surrogate in the infertility clinics or not.

**Figure 27 Provision of Place of Stay of Surrogate in Infertility Clinic**

*Result:* Majority of infertility clinics have no provision for stay of the surrogates.
Analysis 28: The researcher tried to find out the extent of the role played by the infertility clinic in case the surrogate refuses to hand over the child to the intended parents after delivery. The purpose is to see how far the infertility clinics involve themselves in resolving the dispute between the parties to the surrogacy contract.

![Figure 28 Extent of Role of Infertility Clinic in Case Surrogate Refuses to Give the Surrogate Child](image)

**Result:** Nearly half of the infertility clinics do not play any role in deciding the dispute.

Analysis 29: The researcher tried to analyze the extent of the role played by the infertility clinic in case the intended parents refuse to take custody of the child after delivery. The purpose is to see how far the infertility clinics involve themselves in resolving the dispute between the parties to the surrogacy contract.

![Figure 29 Extent of Role of Infertility Clinic in Case Intended Parents Refuses to Take Custody of the Surrogate Child](image)

**Result:** Majority of the infertility clinics do not know how to tackle a situation in which intended parents refuse to take custody of surrogate child.
6.3 Analysis of Infertile Parents: The general profile of infertile parents is presented through study which includes their age, educational qualifications, employment, marital status, kind and period of infertility along with their opinion on surrogacy. The opinions of the infertile parents were sought on different issues like their awareness on surrogacy, whether surrogacy should be allowed, if allowed then who should be allowed to enter in to surrogacy contract and when the persons should be allowed. The questions were also asked regarding the rights and liabilities of surrogate, intended parents and the child. The researcher examined the infertile parents in different districts and sub divisions of State of Punjab like Amritsar, Barnala, Kharar, Gurdaspur, Mohali, Patiala, Zirakpur. The study was also carried on infertile parents living in Chandigarh. The infertile parents interviewed include both male and female. These include 2 male infertile parents and 13 female infertile parents.

Analysis 30: The researcher tried to find out the infertile parents in different districts and sub districts in order to take the opinion of people of different regions in relation to surrogacy.

Result: Infertile parents were interviewed from different locations of Punjab and Chandigarh for the purpose of research.
**Analysis 31:** The researcher tried to find out the age of persons who are generally infertile. It is analyzed in order to know the age of infertility.

![Pie Chart: Age of Infertile Parents](image)

*Figure 31 Age of Infertile Parents*

**Result:** Majority of the infertile parents are in the age group of 31-40 years.

**Analysis 32:** The religion of the infertile parents is analyzed so as to seek the opinion of people belonging to different religions regarding surrogacy.

![Pie Chart: Religion of Infertile Parents](image)

*Figure 32 Religion of Infertile Parents*

**Result:** Infertile parents of different religion have been consulted for seeking their opinion regarding surrogacy.
**Analysis 33:** The analysis of qualifications of the infertile parents is made in order to know the extent of their understanding regarding surrogacy.

![Figure 33 Qualifications of Infertile Parents]

**Result:** The infertile parents are found to be educated.

**Analysis 34:** The marital status of infertile person is analyzed in order to see whether they are married or not.

![Figure 34 Marital Status of Infertile Parents]

**Result:** All the infertile parents are married.
Analysis 35: The researcher tried to find out the employment status of infertile parents in order to see whether they are employed or unemployed.

Unemployed 40%
Employed 60%

**Figure 35 Employment Status of Infertile Parents**

Result: Majority of infertile parents are employed.

Analysis 36: The nature of employment of the employed infertile parents was undertaken in order to know the kind of their employment.

Government Job 33%
Private Job 56%
Own Profession 11%

**Figure 36 Nature of Employment of Employed Infertile Parents**

Result: Majority of Infertile parents are engaged in private jobs.
**Analysis 37:** The extent of income of infertile parents is analyzed in order to know the amount they can spend for infertility treatment.

![Figure 37 Extent of Income of Infertile Parents (Per Month)](chart)

**Result:** Majority of infertile parents are earning an income between 20,000 - 40,000/ Rs. per month.

**Analysis 38:** The researcher tried to find out the employment status of partner of infertile parent in order to know whether the other partner is employed or not.

![Figure 38 Employment Status of Infertile Parent's Partner (Per Month)](chart)

**Result:** Majority of infertile parent partners are employed.
**Analysis 39:** The researcher tried to find out the nature of employment of employed infertile parent partner in order to find out the kind of employment undertaken by them.

![Pie chart showing nature of employment](image)

**Figure 39 Nature of Employment of Employed Infertile Parent’s Partner**

**Result:** Majority of employed infertile parent partners are employed in private job or own profession.

**Analysis 40:** The extent of income of employed infertile parents partners is analyzed in order to know the amount which they are able to spend for infertility treatment.

![Pie chart showing extent of income](image)

**Figure 40 Extent of Income of Employed Infertile Parent’s Partner**

**Result:** Majority of employed infertile parent’s partners are earning an income between 25,000- 50,000/ Rs. per month.
**Analysis 41:** The researcher tried to find out the period of infertility of infertile parents to know from how much time they are infertile.

![Pie chart showing period of infertility of infertile parents](image)

*Figure 41 Period of Infertility of Infertile Parents (In Yrs.)*

**Result:** The infertility period ranges between 1-5 years in majority of cases.

**Analysis 42:** The researcher seek the opinion of infertile parents on the kind of infertility. The purpose is to know whether they are having first or second infertility.

![Pie chart showing kind of infertility of infertile parents](image)

*Figure 42 Kind of Infertility of Infertile Parents*

**Result:** Majority of infertile parents have first infertility i.e. they are unable to have any child of their own.
**Analysis 43:** The researcher tried to find out whether the infertile parents have consulted doctor for overcoming infertility or not.

![Figure 43 Infertile Parents Consultation with Doctor](image)

**Result:** Majority of infertile parents have consulted the doctor in order to overcome infertility.

**Analysis 44:** The researcher tried to analyze the nature of infertility of those infertile parents who consulted the doctor. The purpose is to see whether it is male or female infertility or it involves both male and female infertility.

![Figure 44 Nature of Infertility of Infertile Parents](image)

**Result:** Female infertility is the main cause for not having a child.
Analysis 45: The respondent tried to find out the type of treatment advised by the doctor.

![Pie chart showing treatment types]

**Figure 45 Nature of Treatment Advised by Doctor to Infertile Parents**

Result: Artificial insemination is generally advised to nearly half of the patients having infertility problem.

Analysis 46: The researcher tried to know the source of information regarding the treatment of infertility.

![Pie chart showing information sources]

**Figure 46 Information about Infertility Treatment**

Result: Majority of infertile parents got the information about infertility treatment from infertility clinics.
**Analysis 47:** The researcher tried to know the reasons for opting infertility treatment by infertile parents.

![Figure 47 Reasons for Infertility Treatment by Infertile Parents](chart.png)

**Result:** Majority of infertile parents has opted for infertility treatment due to their desire for own child.

**Analysis 48:** The researcher tried to ascertain the awareness level amongst infertile parents about the surrogacy. Further an effort is made to see the extent of their awareness regarding the legal and social issues to the infertile parents.

![Figure 48 Awareness Regarding Surrogacy Arrangements](chart2.png)

**Result:** All infertile parents have general awareness about surrogacy, but all are not aware about the legal and social issues.
Analysis 49: The researcher sought the opinion of infertile parents regarding the status of surrogacy.

![Figure 49 Opinion of Infertile Parents regarding Status of Surrogacy](image)

**Result:** According to all the infertile parents, surrogacy should be legal.

Analysis 50: The researcher tried to find out the opinion of infertile parents regarding the persons who should be allowed to enter into surrogacy arrangements.

![Figure 50 Opinion of Infertile Parents Regarding Persons Allowed to Enter Surrogacy](image)

**Result:** As per the opinion of the infertile parents all i.e., Indians, Foreigners and NRI’s should be allowed to enter into surrogacy contract.
Analysis 51: The researcher seek the opinion of the infertile parents regarding the status of persons undertaking surrogacy. The purpose is to know that whether the married and infertile, or married and fertile, or unmarried should be allowed to undertake surrogacy arrangements.

![Figure 51 Opinion of Infertile Parents Regarding Status of Persons Undertaking Surrogacy](image)

**Result:** Only married and infertile parents should be allowed to enter into surrogacy arrangements.

Analysis 52: The researcher tried to get the opinion of the infertile parents regarding the basis of entering surrogacy. The purpose is to know whether it should be infertility or carrier preference or fear of pregnancy or some other ground which must be a base in case of surrogacy.

![Figure 52 Opinion of Infertile Parents Regarding Basis for Entering Surrogacy](image)

**Result:** According to majority of infertile parents, infertility should be the basis for entering surrogacy.
**Analysis 53:** The researcher tried to find out the opinion of the infertile parents regarding the kind of surrogacy. The purpose is to see whether gestational or traditional surrogacy should be allowed.

![Pie chart showing 93% for Gestational and 7% for Traditional](image)

*Figure 53 Opinion of Infertile Parents Regarding Kind of Surrogacy*

**Result:** According to majority of infertile parents, gestational surrogacy should be allowed.

**Analysis 54:** The researcher tried to know the opinion of the infertile parents regarding the parentage of surrogate child. The purpose is to see that who should be parent of the child - surrogate or intended parents.

![Pie chart showing 100% for Intended Parents and 0% for Surrogate](image)

*Figure 54 Opinion of Infertile Parents Regarding the Parentage of Surrogate Child*

**Result:** Intended parents should be the parents of the child born through surrogacy.
**Analysis 55:** The researcher attempted to know the opinion of the infertile parents regarding the typical qualities of the surrogate. The purpose is to see whether certain qualities are required in the surrogate or not.

*Figure 55 Opinion of Infertile Parents Regarding the Typical Qualities of the Surrogate*

**Result:** According to majority of infertile parents, the surrogate should be good looking, fair and educated.

**Analysis 56:** The researcher tried to find out the opinion of the infertile parents regarding the decision maker in surrogacy. The purpose is to see whether the intended parents should be allowed to take the decisions or it should be left to surrogate, infertility clinic or some other should take the decision in this regard.

*Figure 56 Opinion of Infertile Parents Regarding Decision Maker in Surrogacy*

**Result:** Majority of the infertile parents believe that infertile parent should take all the decisions in case of surrogacy.
**Analysis 57:** The researcher tried to know the opinion of the infertile parents regarding the payment of compensation to the surrogate. The purpose is to know whether surrogate should be paid compensation or not.

![Pie chart showing the opinion of infertile parents regarding payment of compensation to the surrogate.](image)

*Figure 57 Opinion Regarding Payment of compensation to the Surrogate*

**Result:** Majority of the infertile parents believe that the surrogate should be paid compensation by the infertile parents.

**Analysis 58:** The researcher tried to find out the opinion of the infertile parents regarding the extent of payment to the surrogate.

![Pie chart showing the opinion of infertile parents regarding the amount of compensation to the surrogate.](image)

*Figure 58 Opinion of Infertile Parents Regarding Amount of Compensation to Surrogate*

**Result:** According to majority of infertile parents, the amount of more than 1 Lakh should be paid to the surrogate as compensation.
**Analysis 59:** The researcher tried to know the opinion of the infertile parents regarding the payment of other costs apart from the compensation. The purpose is to know whether other costs should also be paid to the surrogate or not.

*Figure 59 Opinion of Infertile Parents Regarding Payment of Other Cost Apart from Compensation to the Surrogate*

**Result:** According to majority of infertile parents, the payment of other costs should be made to the surrogate apart from compensation.

**Analysis 60:** The researcher tried to find out the opinion of the infertile parents regarding the payment of compensation if surrogate refuses to hand over the child after delivery to the intended parents.

*Figure 60 Opinion of Infertile Parents Regarding Payment of Compensation on Refusal to Give Child after Delivery*

**Result:** Majority of infertile parents believe that the surrogate should not be allowed to get compensation if she refuses to hand over the child to intended parents after delivery.
Analysis 61: The researcher seek the opinion of infertile parents regarding the right of surrogate to abort the child if her life is in danger. The purpose is to know whether she should be allowed or not.

**Figure 61 Opinion of Infertile Parents Regarding Right to Abort to Surrogate in case of Danger to her Life**

Result: The surrogate should be allowed to abort the child if there is a danger to her life.

Analysis 61: The researcher attempted to know the opinion of the infertile parents regarding the stay of surrogate during pregnancy. The purpose is to know whether she should stay at her own home or home of infertile parents or in infertility clinic or at some other place.

**Figure 61 Opinion of Infertile Parents Regarding Stay of Surrogate During Pregnancy**

Result: Majority of the infertile parents believe that the surrogate should stay at intended parents home during pregnancy.
Analysis 62: The researcher tried to find out the opinion of the infertile parents regarding maintaining relationship of surrogate with intended parents after delivery. The purpose is to know whether future relation should be maintained with the surrogate or not.

![Figure 62 Opinion of Infertile Parents Regarding Relationship with Surrogate after Delivery](image)

Result: Majority of the infertile parents believe that no relation should be maintained with the surrogate after delivery.

Analysis 63: The researcher seek the opinion of the infertile parents regarding the custody of the child in case of multiple births. The purpose is to know that in case multiple births whether it should be surrogate or infertility clinic or adoption agency or the intended parents who should be bound to take custody.

![Figure 63 Opinion of Infertile Parents Regarding Custody of Child in case of Multiple Births](image)

Result: The intended parents should take custody of children in case of multiple births.
**Analysis 63:** The researcher tried to find out the opinion of the infertile parents regarding the custody of child with birth defects. The purpose is to know that in such a case whether it should be surrogate or infertility clinic or adoption agency or the intended parents who should take custody.

![Figure 63 Opinion of Infertile Parents Regarding Custody of Child in case of Birth Defects](image)

**Result:** Majority of the infertile parents believe that the intended parents should take custody of child in case of birth defects.

**Analysis 64:** The researcher tried to find out the opinion of the infertile parents regarding breast feeding by the surrogate. The purpose is to know whether it should be allowed or not.

![Figure 64 Opinion of Infertile Parents Regarding Breast Feeding by Surrogate](image)

**Result:** More than half of the infertile parents believe that the surrogate should not be allowed to breast feed the child after delivery.
Analysis 65: The researcher tried to know the opinion of the infertile parents regarding giving of the information about surrogate birth. The purpose is to know whether the information regarding surrogate birth should be disclosed to the child or not.

![Pie chart showing 93% 'No' and 7% 'Yes'.](image)

*Figure 65 Opinion of Infertile Parents Regarding Information to Child about Surrogate Birth and Meeting Surrogate*

**Result:** Majority of the infertile parents believe that the child should not be given information regarding his birth through surrogacy.

Analysis 66: The researcher seek the opinion of the infertile parents regarding which among the two alternatives i.e. surrogacy or adoption is preferable to the parents. The purpose is to know whether most of the infertile parents want to adopt the procedure of surrogacy or not if required in their case.

![Pie chart showing 60% 'Surrogacy' and 40% 'Adoption'.](image)

*Figure 66 Opinion of Infertile Parents Regarding Preference of Alternative Between Surrogacy and Adoption*

**Result:** Majority of infertile parents prefer surrogacy than adoption.
**Analysis 67:** The researcher tried to find out the reasons of preference for surrogacy i.e. whether it is based on genetic link or it is due to the fact that the child is born under healthy environment or there is more closeness to the child.

![Figure 67 Reasons for Preference to Surrogacy by Infertile Parents](image)

**Result:** According to majority of infertile parents, surrogacy is preferred from adoption due to all the reasons i.e. the child is genetically related with the intended parents, there is more closeness to child and he is born under healthy environment.

**6.4 Analysis of Surrogates:** For the purpose of present study, 10 surrogates are examined. The researcher tried to find out the surrogates in different districts and subdivisions of State of Punjab. However, the researcher was successful in interviewing surrogate in some districts only. These among other include Amritsar, Jalandhar, Kapurthala, Mohali and Zirakpur. The study was also conducted in U.T. Chandigarh. The researcher analyzed the frequency of contact of surrogate with intended parents. It is clear from the field study that generally the intended parents had not met surrogate before the confirmation of pregnancy. After the confirmation of pregnancy, the frequency on an average is once in three months for meeting a surrogate. In case of the surrogates who had already delivered the child, the intended parents have not maintained any relations at all. Most of the surrogates pretend to have knowledge of the health risks as they believe that surrogate pregnancies are just like other normal pregnancies. Although they were unaware about the process of selective reduction, yet willing to undergo on the wish of either intended parents or the infertility clinics.
Analysis 68: The researcher attempted to analyze the age of the surrogates. The purpose is to see whether younger women are more preferred than older in case of surrogacy (as chances of getting pregnant are high in case of less age of a woman).

**Figure 68 Age of Surrogate Mother at the Time of Interview**

Result: Majority of the surrogates are between the age of 26-30 years.

Analysis 69: The researcher tried to find out the surrogates in different districts and sub-districts in order to analyze the situation of surrogates from different areas.

**Figure 69 Actual Residence of Surrogate Mother**

Result: Surrogates were interviewed from different locations of Punjab and Chandigarh for the purpose of research.
Analysis 70: The researcher tried to get information regarding the location of surrogates for surrogacy. The purpose is to see whether the surrogates are moving to far off areas or they prefer nearby areas for surrogacy.

Figure 70 Location of Surrogacy

Result: The surrogates are moving to far off areas for surrogacy.

Analysis 71: The researcher seek information regarding the religion of surrogates. The purpose is to see that the surrogates from which religion are mainly serving as surrogates.

Figure 71 Religion of Surrogate

Result: The SC Sikh women are mainly serving as surrogates.
**Analysis 72:** The researcher tried to find out the educational qualification of surrogates. The purpose is to see the level of education of the surrogates.

![Diagram showing educational qualifications of surrogates.

**Figure 72 Educational Qualifications of Surrogate**

**Result:** The surrogates are not much educated.

**Analysis 73:** The researcher tried to find out the marital status of surrogates. The purpose is to see whether the married or unmarried women are serving as surrogates.

![Diagram showing marital status of surrogates.

**Figure 73 Marital Status of Surrogate**

**Result:** Married women are serving as surrogates.
**Analysis 74:** The researcher tried to find out the number of years of marriage of surrogates. The purpose is to see whether after establishing fully in their married life, they adopt the process of surrogacy.

![Figure 74 Number of Years of Surrogate’s Marriage](image)

**Result:** The surrogates are mainly settled in their marriage relationship.

**Analysis 75:** The researcher attempted to analyze the family structure of surrogates. The purpose is to see whether the surrogates are living in joint or nuclear family.

![Figure 75 Family Structure of the Surrogate](image)

**Result:** Majority of the surrogates are from nuclear family.
**Analysis 76**: The researcher seek information regarding the kind of residence of surrogates. The purpose is to see whether the surrogate is living in own or rented accommodation.

![Pie chart showing 50% for Own House and 50% for Rented House](image)

**Figure 76 Kind of Residence of Surrogate**

**Result**: Half of surrogates are living in rented accommodation and half of them are living in their own houses.

**Analysis 77**: The researcher tried to find out the kind of residence of surrogates. The purpose is to see whether the surrogates are living in pucca, kutchha or semi kutchha house.

![Pie chart showing 80% for Pucca House, 10% for Katcha House, and 10% for Semi Kutchha House](image)

**Figure 77 Type of Dwelling of Surrogate**

**Result**: Majority of the surrogates are living in Pucca Houses.
**Analysis 78:** The researcher tried to analyze the stage of pregnancy of surrogate at time of interview.

**Result:** The surrogates are at different stage of pregnancies at the time of interview.

**Analysis 79:** The researcher tried to analyze employment status of surrogates. The purpose is to see whether the surrogates are employed or unemployed.

**Result:** Majority of the surrogates are unemployed.
**Analysis 80:** The researcher tried to find out nature of employment of the employed surrogates. The purpose is to see whether the employed surrogates are undertaking government, private job or domestic work or they are serving as labourers.

![Nature of Employment of Employed Surrogate](image)

*Figure 80 Nature of Employment of Employed Surrogate*

**Result:** Majority of the surrogates are employed in private jobs.

**Analysis 81:** The researcher seek to analyze the income of the employed surrogates.

![Income of Employed Surrogate (Per Month)](image)

*Figure 81 Income of Employed Surrogate (Per Month)*

**Result:** Majority of the employed surrogates are getting income between Rs. 3000-5000/ per month.
Analysis 82: The researcher tried to find out educational qualification of surrogates’ husband. The purpose is to see whether they are educated or not.

Result: Majority of the surrogates’ husbands are educated but not much educated.

Analysis 83: The researcher tried to analyze the employment status of surrogates’ husbands. The purpose is to see whether husbands of surrogates are employed or not.

Result: The husbands of surrogates are fully employed.
Analysis 84: The researcher tried to find out the nature of employment of surrogates’ husbands. The purpose is to see whether husbands of surrogates are employed in government or private job or are doing labour work.

![Pie chart showing nature of employment of surrogate husband](image1)

**Figure 84 Nature of Employment of Surrogate Husband**

**Result:** Majority of the husbands of surrogates are employed as labourers.

Analysis 85: The researcher tried to know the extent of income of surrogates’ husbands. The purpose is to see how much they are earning and whether this income is sufficient for the family or not.

![Pie chart showing income of surrogate’s husband](image2)

**Figure 85 Income of Surrogate’s Husband Who are Employed**

**Result:** Majority of surrogates’ husbands are earning between Rs. 1000-5000/ per month.
Analysis 86: The researcher tried to find out the number of own children of the surrogate. The purpose is to see whether the surrogates knew about the problems and complications of pregnancy.

![Figure 86 Number of Surrogate Own Children](image1)

**Result:** Majority of the surrogates have their own children.

Analysis 87: The researcher seek to identify the status of own children of the surrogate. The purpose is to see whether the surrogates’ children are born naturally or are adopted.

![Figure 87 Status of Surrogates Own Children](image2)

**Result:** The surrogates have natural born children.
**Analysis 88:** The researcher tried to identify the complications in pregnancy for their own children. The purpose is to see whether the surrogates children are born through normal or cesarean delivery.

![Figure 88 Complications and Status of Pregnancy of Surrogate Own Children](image)

**Result:** Majority of surrogate own children are born through normal delivery.

**Analysis 89:** The researcher tried to find out the status of health of the surrogates own children. The purpose is to see whether there was any health problem to the children of the surrogates at time of birth or not.

![Figure 89 Health of Surrogate’s Own Children](image)

**Result:** The surrogates own children are in good health.
Analysis 90: The researcher tried to know the willingness of the surrogates for more own children. The purpose is to see whether they are willing to have more children or not. It also includes the surrogate who has no child of her own.

![Figure 90 Willingness for More Own Children by Surrogate](image)

**Result:** Majority of surrogates have shown unwillingness for more children of their own. It is only the surrogate having no child that has shown willingness for children.

Analysis 91: The researcher tries to analyze the physical status of surrogate before surrogacy. The purpose is to see whether the surrogates were having any problem before serving as surrogate or not.

![Figure 91 Physical Status of Surrogate before Surrogacy](image)

**Result:** The surrogates were having no health, infertility problem, no emotional disturbance and no smoking or drinking habit.
Analysis 92: The researcher tried to find out the status of surrogate before surrogacy. The purpose is to see whether they are having any knowledge of other surrogate, whether they had served previously as surrogate, or whether they had any fear of becoming surrogate in the present case.

Figure 92 Status of Surrogate before Serving as Surrogate

Results: 1. Majority of the surrogates are unaware about other surrogate.
2. Majority of the surrogates have not served as surrogates previously and
3. Majority of the surrogates have no fear of becoming surrogates.

Analysis 93: The researcher attempted to get information regarding the reasons of undertaking surrogacy by the surrogate. The purpose is to see why the surrogates have decided to serve as surrogates.

Figure 93 Reasons for Undertaking Surrogacy by the Surrogate

Result: Majority of the surrogates are undertaking surrogacy due to poverty and education of children.
**Analysis 94:** The researcher tried to analyze the source of information regarding surrogacy. The purpose is to see whether the surrogates got information from agent, other surrogate, infertility clinic or from some other person.

![Source of Information Regarding Surrogacy](image)

**Figure 94 Source of Information Regarding Surrogacy**

**Result:** Majority of the surrogates got information regarding surrogacy from the agents.

**Analysis 95:** The researcher tried to know whether the surrogates have entered into written contract of surrogacy or not. The purpose is to see whether the written contract is made between the parties to surrogacy or not.

![Status of Entering Written Contract of Surrogacy by the Surrogate](image)

**Figure 95 Status of Entering Written Contract of Surrogacy by the Surrogate**

**Result:** In case of half of the surrogates’ written contract is formulated.
**Analysis 96:** The researcher attempted to analyze whether the surrogates who entered the written contract are provided with the copy of contract or not.

![Pie chart showing 100% no and 0% yes.]

*Figure 96 Status of Providing Copy of Written Contract to the Surrogate Who Entered in Written Contract of Surrogacy*

**Result:** All the surrogates who entered in the surrogacy written contract are not provided with the copy of the contract.

**Analysis 97:** The researcher tried to find out the knowledge of surrogates regarding the contents of the surrogacy contract. The purpose is to know whether the surrogates are aware about the terms and conditions of the surrogacy contract or not.

![Pie chart showing 80% no and 20% yes.]

*Figure 97 Knowledge Regarding the Contents of the Written Contract to the Surrogate*

**Result:** Majority of the surrogates have no knowledge about the contents of surrogacy contract.
**Analysis 98:** The researcher seek the information regarding the place of stay of surrogate during surrogate pregnancy. The purpose is to know whether the surrogates are staying at their home, or intended parents’ home or at infertility clinic or at some other place.

![Pie Chart: Place of Stay of Surrogate during Pregnancy](image)

**Result:** Majority of the surrogates are staying at their own homes during the period of surrogacy.

**Analysis 99:** The researcher tried to find out the amount of compensation paid to the surrogate. The purpose is to know whether the surrogates are paid compensation and if paid what is the extent of compensation.

![Pie Chart: Amount of Compensation Paid to the Surrogate](image)

**Result:** Majority of the surrogates are paid an amount of compensation between Rs. 1-2 Lakh.
Analysis 100: The researcher tried to analyze the amount of compensation to the surrogate in case of unsuccessful pregnancy. The purpose is to know whether the surrogates are paid any amount in such situation or not.

![Payment of Amount of Compensation in case of Unsuccessful Pregnancy of Surrogate](image1)

**Figure 100 Payment of Amount of Compensation in case of Unsuccessful Pregnancy of Surrogate**

**Result:** No compensation is to be paid to the surrogates in case of unsuccessful pregnancy.

Analysis 101: The researcher tried to find out how the amount of compensation is utilized by the surrogate.

![Utilization of Amount of Compensation by the Surrogate](image2)

**Figure 101 Utilization of Amount of Compensation by the Surrogate**

**Result:** Majority of the surrogates are utilizing the amount of compensation for maintenance of their children.
Analysis 102: The researcher tried to get information about the person who is emotionally supporting the surrogates during surrogacy.

![Pie Chart](image)

Figure 102 Emotional Support to Surrogate during and after Surrogacy Process

Result: Majority of the surrogates receive emotional support from their husbands during the process of surrogacy.

Analysis 103: The researcher tried to analyze the response of husband, family members and children of surrogates towards surrogacy. The purpose is to know whether their response is positive or negative.

![Bar Chart](image)

Figure 103 Response of Husband, Family and Children of Surrogate towards Surrogacy

Results:

1. The husbands of surrogates show positive response.
2. The family members of surrogate to whom it is disclosed that surrogacy is undertaken is positive.
3. The children are unable to respond due to less age.
Analysis 104: The researcher tried to find out the impact of surrogacy on husband, family members and children of surrogates. The purpose is to know whether surrogacy has adverse impact on their relationship or not.

![Figure 104 Adverse Impact of Surrogacy on Husband, Family and Own Children](image)

**Result:** Surrogacy has no adverse impact on husband, family members and own children of the surrogate.

Analysis 105: The researcher attempted to know the willingness of the surrogates to undergo medical procedures etc.

![Figure 105 Awareness, Willingness and Knowledge regarding Medical Procedures to the Surrogate](image)

**Results:**

1. Surrogates are aware about daily medication
2. Surrogates are aware about health risk in case of surrogacy.

3. Surrogates are comfortable with daily medication.

4. Surrogates failed to formulate any opinion regarding their comfort in case abortion took place.

5. Surrogates show their willingness for amniocentesis.

6. Surrogates show willingness for bed rest.

7. Surrogates are unaware about the sex of the child.

**Analysis 106:** The researcher tried to find about the willingness of surrogate for embryo transfer. The purpose is to see how many embryos they are willing to implant in their uterus.

![Figure 106 Willingness of Surrogate for Embryo Transfers](chart.png)

**Result:** Half of the surrogates are willing up to two embryo transfers.
**Analysis 107:** The researcher seek the opinion of the surrogates regarding their willingness for number of fetuses to be carried in surrogate pregnancy. The purpose is to see whether they are willing to carry multiple fetuses or not.

![Figure 107 Willingness of Surrogate for Multiple Fetuses](image)

**Result:** Fifty percent of the surrogates are willing to carry only one fetus.

**Analysis 108:** The researcher tried to identify the extent of attachment of the surrogate with the child born through surrogacy. The purpose is to see whether the surrogates feel attached with the child or not.

![Figure 108 Attachment of Surrogate with Child through Surrogacy](image)

**Result:** Majority of the surrogates feel attached with the child.
**Analysis 109:** The researcher tried to find about the willingness of surrogate for relinquishment of child born through surrogacy. The purpose is to see whether even after attachment with the child, the surrogates are willing to relinquish the child or not.

![Figure 109 Willingness of the Surrogate for Relinquishment of the Child](image)

**Result:** Majority of the surrogates are willing to relinquish the child after delivery.

**Analysis 110:** The researcher attempted to know about the hope of surrogate for maintaining relations with intended parents in the process of surrogacy

![Figure 110 Hope of Maintaining Relation by Surrogate with the Intended Parents Before, During and After Delivery](image)

**Result:**

1. Majority of the surrogates are hoping of maintaining no relation by the intended parents before pregnancy
2. Majority of the surrogates are hoping of maintaining good relation by the intended parents during pregnancy

3. Majority of the surrogates are hoping of maintaining no relation by the intended parents after pregnancy

**Analysis 111**: The researcher tried to find about the hope of surrogate for maintaining relations with child born through surrogacy.

![Pie chart showing the distribution of the hope of surrogates for maintaining relation with the child born through surrogacy.]

**Figure 111 Hope of Surrogate for Maintaining Relation with the Child born through Surrogacy**

**Result**: Majority of the surrogates are hoping for maintaining no relation with the surrogate child.

**Analysis 112**: The researcher attempted to know the opinion of surrogate regarding the status in case intended parents refuse to take custody of child through surrogacy.

![Pie chart showing the distribution of the opinion of surrogates regarding the status in case intended parents refuse to take custody of child through surrogacy.]

**Figure 112 Opinion of Surrogate Regarding the Status in Case Intended Parents Refuse to Take Custody of Child through Surrogacy**

**Result**: Majority of the surrogates are unaware about what is to be done in case the intended parents refuse to take the custody of the child.
Analysis 113: The researcher tried to analyze whether the surrogate is satisfied with the surrogacy contract or not.

![Pie chart showing surrogates' satisfaction.][1]

**Figure 113 Surrogate’s Satisfaction with Surrogacy**

Result: Majority of the surrogates are satisfied with the surrogacy contract.

Analysis 114: The researcher tried to find out whether the surrogate is willing to act as surrogate again in future.

![Pie chart showing willingness of surrogates.][2]

**Figure 114 Willingness of Surrogate for Surrogacy in Future**

Result:

1. Some Surrogates are willing to act as surrogates in future.
2. Some surrogates show unawareness about whether they would be acting as surrogates in future or not.
6.5 Results of Field Study at a Glance

6.5.1 In relation to Infertility Clinics:

1. The patients visiting infertility clinics for the purpose of surrogacy involve both Indian and foreigners. They are both from rural and urban background.

2. The patients are generally aware of surrogacy.

3. The infertility clinics are generally practicing gestational surrogacy.

4. Surrogacy is suggested to infertile parents mainly on the basis of damaged or no uterus, multiple failures of IVF.

5. Majority of infertility clinics are allowing only married persons to undertake surrogacy.

6. The cost of surrogacy is not same in all the clinics. It depends upon different medical and other expenditures such as charges of the infertility clinic, compensation to the surrogate, legal charges.

7. The procedure for undertaking pregnancy of the surrogate mainly involves IVF. Half of the infertility clinics undertake three attempts of embryo transfer for pregnancy of the surrogate.

8. Success rate of the procedures for pregnancy in surrogacy differs in infertility clinics.

9. The genetic material is arranged mostly through Ovum or Sperm Bank.

10. According to the infertility clinics, IVF poses no health risk either to the surrogate or the child. It is just the normal pregnancy complications that follow IVF.

11. The precautions followed by the surrogate are normal pregnancy precautions except prohibition of intercourse till the confirmation of pregnancy.

12. In case of multiple pregnancies, foetal reduction is undertaken which is risky.

13. Unused embryos are mainly discarded, donated or freezed as per the consent of the intended parents in case of surrogacy.

14. The clinics are generally examining the variables of surrogates and intended parents for the purpose of surrogacy.
15. Counseling is part of process of surrogacy.

16. Written contract of surrogacy is made compulsory by all the clinics. However, the clinics decline to have no role in its formulation except counseling or suggesting documents to the parties to the contract.

17. Surrogates are not arranged by the clinics. The surrogates are mainly arranged by intended parents.

18. Clinics decline to have any role in deciding and paying compensation to the surrogate.

19. Clinics are not in the position to settle down any dispute between the parties to surrogacy such as if intended parents refuse to take custody of the child, surrogate refuse to give up custody after delivery.

6.5.2 In relation to Infertile Parents

1. Infertile parents are generally aware about surrogacy and its social ethical implications. However, they are not fully aware about legal aspects of surrogacy.

2. Surrogacy should be legal.

3. Option of surrogacy should be available to all the Indians, NRIs and foreigners.

4. Surrogacy should be available to only married and infertile. Infertility should only be basis for entering into surrogacy contract.

5. Only gestational surrogacy should be practiced.

6. Intended parents should be parent of child in case of surrogacy arrangements.

7. The surrogate should possess qualities like good looking, fair, educated.

8. Infertile parents should be decision maker in surrogacy.

9. The compensation should be paid to the surrogate and it should also involve financial, legal, medical and other costs. However, compensation should not be paid to the surrogate if she refuses to give up the child after delivery.

10. The amount of compensation should be more than 1 Lakh.

11. The surrogate should be given right to abortion if there is danger to her life.

12. The surrogate should stay at intended parents home.

13. No relation should be maintained with the surrogate after the delivery of the child.
14. The intended parents should be bound to take custody of children in case of multiple births and also in case there are birth defects.

15. Breast feeding should not be allowed to the surrogate. However, it may be allowed in those cases where there is need for the welfare of the child.

16. According to infertile parents neither the child should be informed about birth through surrogacy nor should he be allowed to meet the surrogate.

17. Surrogacy is more preferable than adoption due to genetic link with the child along with more closeness and birth of the child in healthy environment.

6.5.3 In Relation to Surrogates:

1. Surrogates were found generally in age group of 25-30 yrs. They were generally of SC category and were not highly educated. Mostly the ladies who are married enter in to surrogacy arrangement. Surrogates have mainly nuclear family structure and are living in own or rented accommodations.

2. Surrogates are moving to far off places for the purpose of surrogacy.

3. The surrogates were at different stages of pregnancy at the time of interview.

4. Surrogates are generally unemployed and if employed are getting a meagre amount of earning which is not enough to fulfil their basic necessities. Although their husbands are employed yet their income structure is also not high due to less educational qualifications. They are mainly employed as labourers.

5. Surrogates generally have their own healthy minor children. They were born naturally and normally without any complications in pregnancy. Although the health of children is good, yet they have no earning capacity due to less age. Mostly the surrogates are unwilling to have more children of their own.

6. The surrogates have no problems relating to health, infertility and emotional disturbances. They are non smokers and non drinkers. The surrogates were mostly unaware about some other surrogate. Generally it was their first experience of surrogacy. However, even if they were acting as surrogates for the first time, they have generally no fear of becoming a surrogate.
7. The surrogates have entered in to surrogacy contract due to poverty and education of children. They got the information about serving as surrogate mainly from agents.

8. Only 50% of surrogates have entered in to surrogacy contracts in writing, copy of the contract is not provided to these surrogates also. Surrogates are not even aware about the contents of the surrogacy contract. The contract was entered only after the confirmation of pregnancy.

9. Surrogates are mostly staying at their own residence or rented accommodation of their own during surrogate pregnancy.

10. The surrogates are generally compensated. The amount of compensation provided to the surrogate falls with in a range of 1-2 Lakh. However, only 10,000-15,000 Rs. was paid before the confirmation of pregnancy. In case of unsuccessful pregnancy no further amount is paid to them.

11. The surrogates were generally willing to spend amount of compensation for maintenance of their children.

12. The surrogates generally receive emotional support from their husbands before and in between the period of surrogacy. Surrogacy did not adversely affect their relationship with their husband.

13. The decision of surrogacy was generally not disclosed to other members of the family by the surrogates and their husbands. However, it was believed that even if same is disclosed, it will not impact their relationship adversely.

14. The children of surrogates are not affected emotionally or psychologically due to their tender age.

15. The surrogates are generally aware about daily medications and are comfortable with daily medications and taking injections even for an extended period of time. Most of them are comfortable even after abortion and are ready for another pregnancy with same intended parents. They are also willing to undergo amniocentesis and bed rest if it is recommended by the doctor or physician.

16. Majority of the surrogates are willing to undertake two embryo transfers. Most of the surrogates are interested in carrying one fetus.
17. Most of the surrogates pretend to have knowledge of the health risks as they believe that surrogate pregnancies are just like other normal pregnancies. Although they are unaware about the process of selective reduction, yet willing to undergo on the wish of either intended parents or the infertility clinics.

18. The intended parents are generally not interested in meeting the surrogates before the confirmation of pregnancy. Even after the confirmation of pregnancy, the intended parents are not interested in meeting surrogates regularly.

19. The surrogate generally maintains no relationship with the intended parents and the child after delivery as it is exclusively dependent on the wish of the intended parents.

20. Mostly the surrogates feel attachment with the child but they are always willing to relinquish the custody of child. They are unaware of the situation in which intended parents could refuse to take the custody of the child.

21. Although the surrogates seem generally satisfied with the surrogacy contract, yet they have not thought for acting as surrogate in future.

Thus there are certain facts which become clear in case of surrogacy through empirical study. It is clear from the study that different costs of treatment are followed by different clinics in undertaking same process of surrogacy which actually results in undue profits to the clinics. Surrogacy is generally practiced by the infertility clinics. However, the clinics are not willing to disclose exact number of surrogacy cases undertaken by them. The written contract is although made compulsory for the surrogacy, however, it is not entered in to by all the surrogates, then also the clinics are treating such patients. It is also clear that in case written contract is entered, copy of same is not provided to the surrogate. Most of the clinics declined to have any role in the written contract, but some of the surrogates accept that clinics have the copy of the contract. The clinics also declined to have any role in deciding the compensation and its payment to the surrogate, however, it is clear from the study that the intended parents are not meeting regularly with the surrogates or in some cases they have not met at all as the pregnancy is not confirmed, still they are paid initial amount of compensation. Thus it is concluded on this basis that it is the clinics that are paying compensation to the surrogate on behalf of the intended parents. The clinics also decline any role in arranging the surrogate; however, it is clear from the study that
surrogates got information through agents or infertility clinics regarding surrogacy. It is thus clinics only who are acting in consonance with the agents who are arranging surrogates for the intended parents. The clinics are performing 3 to 4 embryo transfers. However, mostly the surrogates are not willing to have more than 2 embryo transfers. Further most of them are willing to carry only one fetus. Thus irrespective of the willingness of the surrogates, clinics are placing more embryos at the desire of the intended parents. The clinics on the one hand are not in the position to settle the dispute between the parties to surrogacy; on the other hand surrogates are also unaware about such situation. This conflict raises a question regarding the kind of counseling which is provided to the surrogate and the intended parents. It is also clear from the study that intermediaries or agents are playing a key role in the surrogacy. It is also clear from the study that generally parents are meeting with surrogate only after confirmation of pregnancy. This raises a question that how in such case the surrogates can be arranged by the intended parents, how contract can be entered in to between the intended parents, how the compensation can be decided between the surrogate and the intended parents. Thus clinics are acting on the behalf of their clients/parents for all the requirements of surrogacy. So far as infertile parents are concerned, they seem to be not bothered about the rights and health of the child as most of them believe that breast feeding and information to the child regarding his surrogate birth should not be allowed. The infertile parents also feel that the surrogate should stay in the intended parents’ home. However, they ignore her responsibilities towards the family members and children.