

# Navigating Emotional Bonds: A Comprehensive Study of Surrogate Mothers Attachment & Psychological Experiences in Surrogacy Arrangements

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## **ABSTRACT:**

The human body can be considered a sophisticated machine, with reproductive innovations such as in vitro birth, surrogate motherhood, and even cloning expected to improve reproductive experiences in the near future. Surrogacy, at its heart, is a form of assisted reproduction where a woman carries a pregnancy with the intention of entrusting the child to the intended parents after birth. In some areas, surrogate motherhood is legally recognized, giving the rights of the intended parents from the moment of birth. In India, commercial surrogacy has grown in importance, often referred to as "womb for hire or rent," and fueled the growth of reproductive tourism in a context of globalization. This practice, however, operates in a patriarchal context and India continues to have high maternal mortality. This article aims to explain maternity issues, the health status of women undergoing surrogacy and the implications outlined in the Surrogacy (Regulation) Act 2021. The primary focus is on the emotional bond that surrogate mothers can form with the child and the complexities that arise if they are unwilling to give up the child, including the ethical and legal dilemmas surrounding forced separation. <sup>1</sup>

## **INTRODUCTION:**

Only married couples or widowed or divorced women between the ages of 35 and 45 are permitted to use surrogacy to conceive under the Surrogacy (Regulation) Act 2021. It forbids a single, unmarried woman from using surrogacy to conceive. Surrogacy is defined as "a practice where a woman carries and gives birth to a child for a potential couple with the intention of returning that child to the potential couple" under Section 2 (dz) of the Surrogacy Regulation Act, 2021. Because assisted reproduction is complicated legally, morally, and socially, regulations pertaining to surrogacy and reproductive rights differ from one country to another. Some nations completely forbid surrogacy and only permit it under very severe guidelines. Surrogacy, the practice where a woman carries and delivers a child for another person or couple, has roots in ancient civilizations. Historically, surrogacy can be traced back to stories like that of Abraham and Hagar in the Bible, where surrogacy was often intertwined with cultural norms and familial structures. However, the practice remained informal for centuries until the advent of modern

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<sup>1</sup> Indian Journal Of Public Health: Kumar, P., Anu, N., Inder, D., & Sharma, N. (2013). Surrogacy and women's right to health in India: Issues and perspective. Indian Journal of Public Health, 57(2), 65. <https://doi.org/10.4103/0019-557x.114984>

reproductive technologies in the 20th century.<sup>2</sup> The introduction of in vitro fertilization (IVF) and artificial insemination revolutionized surrogacy, making it a viable option for couples struggling with infertility. In India, surrogacy has gained significant attention over the last two decades. The country became a global hub for surrogacy due to its relatively low costs and the availability of women willing to act as surrogates. However, the unregulated nature of the industry raised ethical, moral, and legal concerns. With the passing of the Surrogacy (Regulation) Act 2021, India has attempted to place boundaries on surrogacy, restricting it to altruistic arrangements and banning commercial surrogacy. This shift marks a significant change in the way surrogacy is viewed and practiced, influencing both the surrogate mothers and intended parents. In India, surrogacy has undergone a transformation due to regulatory efforts. The Surrogacy (Regulation) Act 2021, which bans commercial surrogacy and limits surrogacy to altruistic arrangements, has significantly impacted the practice. Under this law, only close relatives of the intended parents can serve as surrogates, and they are not allowed to receive financial compensation, except for medical expenses. Despite these restrictions, surrogacy remains a popular option for many, particularly because of India's large population and the strong desire for parenthood. However, the new regulations have raised concerns about accessibility, with fewer women willing to become surrogates under altruistic arrangements. The government's attempts to protect surrogate mothers from exploitation have also altered the dynamics of the practice, emphasizing emotional and psychological well-being over financial motivations. These legal and social changes have had a direct impact on surrogate mothers' emotional attachment to the child they carry. The emotional and psychological journey of surrogate mothers presents several challenges. One of the most prominent issues is the potential for emotional attachment to the child they carry. While the intention of surrogacy is often clear from the outset, the act of carrying a child for nine months can lead to complex emotional bonds. Surrogate mothers may struggle with the detachment process, especially when there is limited counselling or support throughout the pregnancy. Furthermore, surrogate mothers in India often face societal stigma. They are sometimes viewed as mere vessels or are stigmatized for engaging in a practice that is seen as controversial, especially in conservative communities. These societal pressures, combined with the emotional toll of the process, create an environment where the well-being of surrogate mothers is often overlooked. Addressing these challenges requires a deeper understanding of the surrogate's experience and the emotional complexities involved. Several factors shape the experiences of surrogate mothers in India. Cultural beliefs around motherhood and childbirth create a unique backdrop against which surrogacy unfolds. In a society where motherhood is highly revered, surrogates may experience conflicting feelings about carrying a child that they will not raise. Additionally, economic motivations have traditionally played a key role, as women from lower socioeconomic backgrounds often choose surrogacy to support their families financially. However, the recent shift toward altruistic surrogacy has added layers of complexity, with surrogates needing to navigate emotional, social, and familial pressures without the financial compensation that previously justified their participation. The Indian government's response to surrogacy has been centered around protecting surrogate mothers from exploitation while ensuring ethical practices. The Surrogacy (Regulation) Act 2021 represents a major policy shift, with a focus on altruistic surrogacy. The act stipulates that surrogacy is only permissible for Indian couples, banning foreign nationals from participating in surrogacy arrangements in India. While

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<sup>2</sup> The History of Surrogacy: A legal Timeline. (n.d.). <https://www.worldwidesurrogacy.org/blog/the-history-of-surrogacyalegaltimeline#:~:text=Technically%2C%20surrogacy%20dates%20back%20to,wives%20could%20not%20become%20pregnant>.

these laws aim to prevent the commercialization of surrogacy, they also impose limitations that may restrict access for couples and impact surrogate mothers, particularly in terms of emotional support and counselling. The regulatory framework has thus significantly influenced the surrogacy landscape in India.

### OBJECTIVE OF THE STUDY:

The objective of this study is to explore and analyze the emotional and psychological experiences of surrogate mothers, with a specific focus on their attachment to the child they carry. The research seeks to understand the factors that influence emotional bonding between surrogate mothers and the child, considering the complex interplay of psychological, social, and cultural elements. This study also aims to examine how the new regulations in India, particularly the shift toward altruistic surrogacy, have impacted the emotional dynamics involved in the surrogacy process. This study seeks to fill a gap in the existing literature by focusing on the surrogate's perspective, which has often been overlooked in favour of discussions on the legal, ethical, and medical aspects of surrogacy. By centering the emotional and psychological aspects of surrogacy, this research will contribute to a deeper understanding of the emotional complexities surrogate mothers face, with the goal of informing future policy, support structures, and ethical frameworks. Surrogacy is an arrangement, often supported by a legal agreement, whereby a woman agrees to childbirth on behalf of another person(s) who will become the child's parent(s) after birth.<sup>3</sup> Surrogacy is a method of assisted reproduction whereby a woman agrees to become pregnant for giving birth to a child for others to raise. She may be the child's genetic mother (the more traditional form of surrogacy) or she may be implanted with an unrelated embryo. Having another woman bear a child for a couple to raises usually with the male half of the couple as the genetic father is referred to in antiquity. In some cases, surrogacy is the only available option for parents who wish to have a child that is biologically related to them. The word "surrogate," is rooted in Latin "Subrogare" (to substitute), which means "appointed to act in the place of." If a woman is unable to carry a pregnancy to term, gestational surrogacy may be the best option. Also called a surrogate, a gestational carrier is a woman who carries and delivers a child for a couple or individual. Surrogate mothers are impregnated through the use of In vitro fertilization (IVF)<sup>4</sup>. Altruistic surrogacy is where a surrogate mother agrees to gestate a child for intended parents without being compensated monetarily in any way. In other words, this is in effect a free surrogacy. Whereas, commercial surrogacy is an option in which intending parent offers a financial incentive to secure a willing surrogate. Commercial surrogacy is a controversial method of conception because people, governments and religious groups have questioned the ethics of involving money in a child's birth. There can be several reasons behind surrogate pregnancy. For instance, intended parents may arrange a surrogate pregnancy because a woman who intends to be parent is infertile or unable to carry a pregnancy to term, e.g., woman with hysterectomy, uterine malformation or with a history of recurrent abortions or any medical illness making her pregnancy a risk to her own health. A female intending to be a parent may also be fertile and healthy, but unwilling to undergo

<sup>3</sup> Meaning of surrogacy: India Code: Section details. (n.d.). [https://www.indiacode.nic.in/show-data?actid=AC\\_CEN\\_12\\_72\\_00002\\_202147\\_1643711958603&sectionId=63397&sectionno=2&orderno=2](https://www.indiacode.nic.in/show-data?actid=AC_CEN_12_72_00002_202147_1643711958603&sectionId=63397&sectionno=2&orderno=2)

<sup>4</sup> In vitro fertilization (IVF) is the joining of a woman's egg and a man's sperm in a laboratory dish. In vitro means outside the body..

pregnancy. The agencies making arrangement for surrogacy for the intended parents often help them to manage the complex medical and legal aspects involved in process.

Key Words: Surrogate Mother, Psychological Support, Detachment, Protection, Act, Societal Stigma

## LITERATURE REVIEW:

### • Existing Research on Surrogacy and Emotional Attachment

This study deals with the issue “what if the surrogate mother is not ready to handover the baby to the intended parents and whether?” and this issue was discussed in an article “How does it feel, to give away a baby” by the author Sarah Jefford.<sup>5</sup> The author who is a lawyer, surrogate and egg donor, she also once thought of not giving away the baby. In this article the author says that even though the baby is undeniably beautiful and delightful, and that new-born scent is undeniably captivating. However, there is no desire to take the baby home. Some surrogates are even willing to breastfeed and engage in skin-to-skin contact after birth, yet hand over the baby over without difficulty. Hormones and the process of pregnancy and birth are remarkable, but the surrogate has no intention of keeping the baby. While the body may naturally respond to the presence of the baby, as it has been carried for nine months, it would be unusual not to have such a reaction. However, the human brain is complex, capable of managing intricate emotions and thoughts. A surrogate can love her own children while enjoying the time they spend away at school, just as she can feel a connection to the baby and still not wish to raise it. In fact, the surrogate prefers to see the intended parents take on the role of parenting, as that was always the plan. The experience of handing over the baby is both complex and amazing. As for the legal aspect, Australian law states that surrogacy arrangements are not enforceable, meaning that a surrogacy agreement does not hold legal weight in court. Upon the baby's birth, the surrogate and her partner are considered the legal parents, at least temporarily. If the surrogate chooses to keep the baby, the intended parents have no legal grounds to enforce the surrogacy agreement. This is because, legally, one cannot have a contract governing the life of a child (as that would constitute child trafficking), nor can there be a contract over a woman's body. These two fundamental legal principles remain steadfast and are unlikely to change in the foreseeable future. The emotional and psychological dimensions of surrogacy have been explored in various studies, particularly in terms of the surrogate mother's attachment to the child. While surrogacy is primarily framed as a contractual relationship where the surrogate carries a child for intended parents, the emotional toll on the surrogate mother is often underestimated. Scholars like Ciccarelli and Beckman (2005)<sup>6</sup> have examined how surrogate mothers experience varying degrees of emotional attachment to the child during pregnancy, with some forming strong bonds, while others are able to emotionally detach due to clear legal and psychological boundaries set before the arrangement begins. The idea that surrogate mothers are at risk of emotional harm stems from attachment theory, which suggests that bonding during pregnancy is a natural outcome of carrying a child. Van den Akker's (2007)<sup>7</sup> work supports this, showing that although most surrogates enter into the arrangement with the understanding that the child will be handed over to the intended parents, the emotional and psychological bonds formed during pregnancy can complicate the detachment process. Furthermore, the study highlights that cultural factors, such as the value placed on motherhood in

<sup>5</sup> How does it feel, to give away a baby – Sarah Jefford

<https://sarahjefford.com/how-does-it-feel-to-give-away-a-baby/>

<sup>6</sup> Navigating Rough Waters: An Overview of Psychological Aspects of Surrogacy -Janice C. Ciccarelli, Linda J. Beckman (2005)

<sup>7</sup> Psychosocial aspects of surrogate motherhood- Ven Den Akker(2007)

various societies, significantly influence the emotional experience of surrogates. Research also points out the differences between traditional and gestational surrogacy. In traditional surrogacy, where the surrogate's egg is used, emotional attachment may be stronger due to the genetic link (Braverman & Corson, 2012)<sup>8</sup>. In contrast, gestational surrogates, who have no genetic connection to the child, might find it easier to maintain an emotional distance. However, evidence suggests that even in gestational surrogacy, the psychological and emotional challenges are still profound, with some surrogates reporting feelings of loss or sadness after relinquishing the child.

### • Gaps in Literature

Despite these studies, there are notable gaps in the literature concerning the long-term emotional and psychological effects on surrogate mothers. Most research tends to focus on the immediate post-birth period, neglecting how surrogate mothers feel months or even years after giving birth. Additionally, while studies from Western countries provide valuable insights, there is limited research that specifically addresses the experiences of surrogate mothers in India, particularly in light of recent legal changes. The introduction of the Surrogacy (Regulation) Act 2021, which bans commercial surrogacy and emphasizes altruistic surrogacy, has not been thoroughly studied from the emotional and psychological perspective of surrogate mothers. While the law aims to prevent exploitation, it may also place surrogate mothers in emotionally precarious positions, as they now participate in surrogacy without financial compensation, which was often a motivating factor that justified the emotional risks involved. Therefore, there is a need for studies that focus on how the new legal framework influences the emotional attachment and well-being of surrogate mothers in India. Furthermore, there is little research exploring the effectiveness of counselling and emotional support systems for surrogates. Most studies highlight the need for psychological support but do not provide comprehensive evaluations of existing support structures. This is a critical gap, as emotional counselling could play a significant role in helping surrogate mothers cope with the emotional complexities of surrogacy.

### • Theoretical Perspectives on Emotional Attachment in Surrogacy

Attachment theory, originally developed by John Bowlby (1969)<sup>9</sup>, provides a useful framework for understanding the emotional bond that can form between a surrogate mother and the child. According to this theory, humans are biologically programmed to form attachments, particularly during pregnancy, when hormonal changes facilitate bonding between the mother and the child. Even though surrogate mothers enter into the arrangement with the knowledge that they will not keep the child, attachment theory suggests that they may still experience emotional bonding due to the physical and psychological experience of carrying the child for nine months. From a sociocultural perspective, the cultural value placed on motherhood and childbirth in India further complicates the emotional landscape for surrogates. In a society where motherhood is often linked to a woman's identity and worth, surrogates may struggle with societal expectations and emotional confusion about their role. This aligns with the work of Shulamith Firestone (1970), who argued that reproductive labor is often seen as central to a woman's identity in patriarchal societies, adding layers of emotional and psychological strain to the surrogacy process.

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<sup>8</sup> Characteristics of participants in a gestational carrier program- Andrea Mechanick Braverman & Stephen L. Corson

<sup>9</sup> Resnick, Rita Fay. *Surrogate mothers: The relationship between early attachment and the relinquishing of a child*. The Fielding Institute, 1989.

## CONCEPTUAL FRAMEWORK:

### • Case Studies and Examples

Several case studies highlight the emotional experiences of surrogate mothers, revealing a complex spectrum of attachment, detachment, and emotional conflict. In a study conducted by Teman (2010)<sup>10</sup>, surrogate mothers in Israel described their experiences of "pregnancy labor," where they viewed their role as part of a professional service. These surrogates, while experiencing some attachment to the child during pregnancy, were largely able to emotionally detach because of the clear professional boundaries established from the beginning of the arrangement. However, in India, where surrogacy has often been commercialized and intertwined with economic motivations, the emotional experiences of surrogate mothers can be more complicated. A case study conducted in Anand, India, known as the "surrogacy capital" of India, revealed that many surrogates came from economically disadvantaged backgrounds and viewed surrogacy as a means of improving their family's financial situation. The emotional attachment they formed with the child varied, but some women reported experiencing grief and emotional turmoil after the child was handed over to the intended parents. The fact that these women often lived in surrogate hostels during pregnancy, away from their families, exacerbated their emotional isolation. One prominent case involved a surrogate mother in Gujarat, who expressed deep emotional attachment to the child she carried. Despite understanding the legal agreement, she found it difficult to relinquish the baby after birth. The case brought attention to the lack of psychological support for surrogates in India, as she was not provided with adequate counseling during or after the pregnancy. This case highlights the emotional challenges that arise when surrogate mothers face the reality of detachment after birth, especially in societies where motherhood is revered.

**Johnson v. Calver (1993)**<sup>11</sup> is a significant case in the realm of surrogacy law in California, USA. Anna Johnson agreed to be a surrogate mother for Mark and Crispina Calvert, who could not have children of their own. The embryo implanted in Johnson was created from the Calverts' reproductive cells. The parties signed a contract stating that the child would be considered the Calverts' child, and Johnson would relinquish all parental rights. Before the child's birth, Johnson demanded the balance of her payment, threatening to keep the child if she did not receive it. The case centered on determining the legal parentage of the child. The California Supreme Court ruled in favor of the Calverts, stating that the natural parents are the husband and wife who provided the reproductive cells, not the surrogate mother. This case set a precedent for surrogacy agreements and the legal definition of parentage in California.

**The Baby M Case (1988)**<sup>12</sup> The Baby M Case (1988) is a landmark case in the history of surrogacy law in the United States. In 1985, William Stern and Mary Beth Whitehead entered into a surrogacy agreement. Mary Beth agreed to be inseminated with William's sperm and carry the baby to term, with the understanding that she would relinquish custody to William and his wife, Elizabeth, upon the baby's birth. After the baby (referred to as Baby M) was born, Mary Beth found herself unable to part with the child and sought to retain custody. The case centered on the enforceability of the surrogacy contract and

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<sup>10</sup> Birthing a Mother: The Surrogate Body and the Pregnant Self by Elly Teman (2010)

[https://www.indiacode.nic.in/show-data?actid=AC\\_CEN\\_12\\_72\\_00002\\_202147\\_1643711958603&sectionId=63397&sectionno=2&orderno=2](https://www.indiacode.nic.in/show-data?actid=AC_CEN_12_72_00002_202147_1643711958603&sectionId=63397&sectionno=2&orderno=2)

<sup>11</sup> Johnson v Calver(1993)

<https://caselaw.findlaw.com/court/ca-supreme-court/1774439.html>

<sup>12</sup> The Baby M Case(1988)

Surrogacy Research Guide: In The Matter of Baby M

<https://libraryguides.law.pace.edu/c.php?g=452971&p=3156877>

the determination of legal parentage. The New Jersey Supreme Court ruled that the surrogacy contract was unenforceable due to violation of both statutory law and public policy. Custody was awarded to the Sterns, but Mary Beth was granted visitation rights. This case highlighted the emotional and legal complexities of surrogacy arrangements and set a precedent for future surrogacy cases in the United States.

**Baby Manji Yamada vs Union Of India & Anr (2008)**<sup>13</sup> In this instance, a Japanese couple named Drs. Yuki and Ikufumi Yamada were searching India for a surrogate mother. The surrogate mother was an Indian woman. The couple used gestational surrogacy, where the surrogate mother carried an embryo created from Dr. Ikufumi Yamada's sperm and an unidentified Indian egg donor. Manji, the baby, was born on July 25, 2008. However, the couple got divorced before the baby was born, and Dr. Yuki Yamada refused to raise the child. Dr. Ikufumi Yamada had to return to Japan because his visa had expired when he requested custody. The case was brought before the Indian Supreme Court in 2008. The court must decide on Baby Manji's custody and the validity of surrogacy. The Supreme Court advised the petitioner to take any legal action if they had any complaints and dismissed the writ petition without issuing a cost order.

### **International Scenario and Comparison**

Surrogacy practices around the world vary greatly, and the emotional experiences of surrogate mothers are often shaped by the legal and cultural frameworks in place. In the United States, surrogacy is largely regulated at the state level, with some states permitting commercial surrogacy and others banning it. Research from the U.S. shows that surrogate mothers, particularly in states with well-established support systems, generally report positive emotional experiences. In a study by Piyush D. Jadhav (2018)<sup>14</sup>, most surrogates in the U.S. reported no significant attachment to the child, citing clear communication with the intended parents and robust psychological support as key factors in maintaining emotional distance. In contrast, countries like the United Kingdom, where only altruistic surrogacy is allowed, offer a different perspective. A study by Horsey (2015)<sup>15</sup> found that while surrogates in the UK generally expressed satisfaction with their experience, they were more likely to form emotional bonds with the child compared to their American counterparts. The altruistic nature of surrogacy in the UK often results in closer relationships between the surrogate and the intended parents, which can blur emotional boundaries. However, the availability of counselling and legal protections helps mitigate potential emotional fallout. When comparing these international experiences with surrogacy in India, several key differences emerge. In India, the recent shift to altruistic surrogacy through the Surrogacy (Regulation) Act 2021 is likely to influence the emotional experiences of surrogate mothers. Without the financial incentive that characterized commercial surrogacy, the emotional stakes for surrogates may be higher, as they are more likely to engage in surrogacy for personal or familial reasons, rather than purely economic motivations. This shift could result in stronger emotional bonds being formed between surrogate mothers and the children they carry, potentially leading to greater emotional distress during the detachment process. Furthermore, the lack of psychological support and counselling services in India, especially in

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<sup>13</sup> Baby Manji Yamada Case

<https://www.legallore.info>

<https://www.legallore.info/post/commercial-surrogacy-the-baby-manji-yamada-case#:~:text=The%20case%20of%20%22Baby%20Manji,the%20legality%20of%20such%20arrangements.>

<sup>14</sup> Optimal design of savonius wind turbines using ensemble of surrogates and CFD analysis(2018) – Piyush D Jadhav, Palaniappan Ramu, Vishaal Damotharan

<sup>15</sup> Oxford Academic : Kirsty Horsey(2015)

rural areas, sets the country apart from nations like the U.S. and the UK, where such services are often mandatory. The absence of structured emotional support systems in India makes it difficult for surrogate mothers to navigate the complex emotional terrain of carrying and relinquishing a child, particularly in a cultural context that places immense value on motherhood.

## LEGAL FRAMEWORK

India's legal framework governing surrogacy has undergone significant changes in recent years, aimed at addressing concerns around ethical practices, exploitation, and the welfare of surrogate mothers. The most notable legislation, the Surrogacy (Regulation) Act, 2021, marked a pivotal shift by restricting commercial surrogacy and promoting altruistic surrogacy arrangements.

**Key Provisions of the Surrogacy (Regulation) Act, 2021 :** The Act strictly prohibits commercial surrogacy, permitting only altruistic surrogacy, where the surrogate mother does not receive any monetary compensation other than covering medical expenses and insurance. This shift aims to prevent the exploitation of economically disadvantaged women who previously engaged in surrogacy for financial reasons. By banning financial transactions, the law seeks to protect surrogate mothers from potential coercion or commodification.

The Act specifies eligibility criteria for both surrogate mothers and intending parents:

**Intended Parents:** Only Indian citizens, married for at least five years, and unable to conceive due to proven medical reasons are eligible. This excludes LGBTQ+ individuals, single parents, and foreigners from availing of surrogacy in India.

**Surrogate Mothers:** The surrogate must be a married woman aged 25-35, who has a biological child of her own, and must be a close relative of the intending couple. Additionally, she is permitted to serve as a surrogate only once in her lifetime.<sup>16</sup>

## Implications for Surrogate Mothers' Emotional Attachment

By limiting surrogacy to altruistic arrangements and requiring a familial connection, the Act implicitly recognizes the emotional bond that surrogate mothers may develop with the child. This legal framework is designed to mitigate potential emotional conflicts by ensuring that surrogacy is not a purely transactional process. However, critics argue that the familial requirement may create additional emotional challenges, as surrogate mothers are more likely to maintain a relationship with the child and the intended parents.

The Act also mandates psychological and medical counseling for surrogate mothers, aiming to provide better support throughout the process. This provision is significant in addressing the emotional attachment that may arise during pregnancy and offers surrogate mothers the resources to navigate their emotions during and after the surrogacy.

## Challenges and Criticisms of the Current Framework

Despite its well-intentioned goals, the Surrogacy (Regulation) Act has faced criticism. Many argue that the exclusion of single parents, same-sex couples, and foreign nationals limits the scope of surrogacy and may lead to unintended consequences, such as an increase in unregulated, underground surrogacy arrangements.<sup>17</sup> Furthermore, some critics contend that the altruistic model may inadvertently place emotional and social pressure on surrogate mothers, given the close familial connection required.<sup>18</sup>

<sup>16</sup> Legal Framework: <https://www.indiacode.nic.in/>

<sup>17</sup> Calder, Vanessa Brown. *Defending Gestational Surrogacy: Addressing Misconceptions and Criticisms*. Cato Institute, 2023.



Legal scholars and human rights activists have highlighted the need for more robust support systems, including post-birth psychological care, clear guidelines for the rights of surrogate mothers, and a more flexible approach to post-birth relationships between surrogates and children.<sup>19</sup>

## SOLUTIONS AND RECOMMENDATIONS

### • **Enhanced Psychological Support for Surrogate Mothers**

One of the most pressing solutions to mitigate the emotional distress experienced by surrogate mothers is the provision of robust psychological support. Counselling should be mandatory at all stages of the surrogacy process, from the decision to become a surrogate, through pregnancy, and post-delivery. Professional psychological support will help surrogate mothers process their emotions, deal with any attachment they may form with the child, and cope with the social stigma that can accompany surrogacy. Additionally, counselling should include family members of the surrogate mother to create a support network. This is particularly important in societies like India, where family plays a central role in decision-making. By ensuring that surrogates receive emotional and psychological support, policymakers and healthcare providers can better address the emotional toll of surrogacy, leading to healthier outcomes for both the surrogate and the intended parents.<sup>20</sup>

### • **Education and Awareness Campaigns**

Educational initiatives are crucial in reducing the stigma attached to surrogacy in Indian society. Public awareness campaigns should emphasize that surrogacy is a legitimate and ethical practice when carried out under legal guidelines. These campaigns could help dispel myths about surrogacy and highlight the importance of emotional and psychological support for surrogate mothers. Furthermore, surrogacy agencies and medical professionals should be trained to identify emotional risks in surrogacy cases and take proactive measures to address them. Training healthcare workers to provide both medical and emotional care can create a more supportive environment for surrogates, ensuring that their mental health is prioritized throughout the process.<sup>21</sup>

### • **Developing Comprehensive Support Networks**

In addition to legal and psychological support, creating support networks for surrogate mothers is essential. These networks can include community-based organizations, peer support groups, and advocacy groups that focus on the emotional and social well-being of surrogates. By connecting surrogate mothers with others who have gone through similar experiences, these networks can provide emotional solidarity, reduce feelings of isolation, and offer practical advice on navigating the surrogacy journey. Support networks can also advocate for better legal protections, healthcare access, and ethical practices in surrogacy, ensuring that the emotional and psychological needs of surrogates are given priority.<sup>22</sup>

<sup>18</sup> Scott, Elizabeth S. "Surrogacy and the Politics of Commodification." *Law & Contemp. Probs.* 72 (2009): 109.

<sup>19</sup> Igareda Gonzalez, Noelia. "Regulating surrogacy in Europe: Common problems, diverse national laws." *European Journal of Women's Studies* 26.4 (2019): 435-446.

<sup>20</sup> Lamba, N., Jadv, V., Kadam, K., & Golombok, S. (2018). The psychological well-being and prenatal bonding of gestational surrogates. *Human Reproduction*, 33(4), 646–653. <https://doi.org/10.1093/humrep/dey048>

<sup>21</sup> Global fertility education poster campaign: Fertility\_education. (n.d.). <https://www.eshre.eu/Home/Fertility-education>

<sup>22</sup> Surrogate.com. (2023, November 17). Building a surrogate support system | Surrogate.com. Surrogate.com | <https://surrogate.com/surrogates/people-involved-in-your-surrogacy/how-to-build-your-surrogacy-support-system/>

- **Providing financial support for the psychological well-being of surrogate mothers**

Providing financial support for the psychological well-being of surrogate mothers is crucial to ensure their mental health during and after the surrogacy process. Surrogates often face complex emotions, such as attachment to the child, grief, identity struggles, and societal stigma. Financial assistance can be used to offer comprehensive psychological counseling, therapy sessions, and support groups tailored to their needs. This support helps surrogates navigate emotional challenges more effectively, reduces stress, and promotes their long-term well-being. By investing in their mental health, society can promote ethical and compassionate surrogacy practices that benefit all parties involved. Providing medical expenses and insurance support has been already mentioned in the provisions of the act but the suggestion is to include financial support for psychological well being.

### **FUTURE PROSPECTS:**

- **The Evolving Role of Altruistic Surrogacy**

With the implementation of the Surrogacy (Regulation) Act 2021 in India, which permits only altruistic surrogacy, the future of surrogacy in the country is set to shift dramatically. This transition away from commercial surrogacy places a stronger emphasis on the emotional dynamics of surrogacy, as altruistic surrogacy often involves a personal connection between the surrogate and the intended parents. In the future, the emotional attachment between surrogates and the children they carry may become a more significant issue. As the motivations for surrogacy shift from financial need to more personal reasons—such as familial or close relationships—the emotional complexity of surrogacy could intensify. To address this, further research will be needed to explore how surrogate mothers cope with emotional attachment in an altruistic framework and how the law can support them in managing these emotional challenges.<sup>23</sup>

- **Advances in Surrogacy Healthcare and Support**

As surrogacy continues to evolve, advancements in medical and psychological support systems will likely play a crucial role in improving the well-being of surrogate mothers. Future prospects for surrogacy should include the integration of comprehensive emotional and mental health support into the surrogacy process. This may involve the development of specialized healthcare units focused on surrogates' physical and emotional needs. Technological advancements in healthcare, such as telemedicine, may also enhance the availability of mental health services for surrogate mothers, especially those in rural or underserved areas. The use of online platforms for counselling could help ensure that surrogate mothers have continuous access to psychological support before, during, and after pregnancy.<sup>24</sup>

- **Legal and Ethical Developments**

As surrogacy practices evolve globally, India will need to adapt its legal framework to ensure that the rights and emotional well-being of surrogate mothers are adequately protected. In the future, we may see legal reforms that focus more on the emotional aspects of surrogacy, incorporating mandatory counselling and post-birth support. Internationally, there could be greater convergence in surrogacy laws, leading to more standardized practices across borders. This might include clearer ethical guidelines

<sup>23</sup> Rudrappa, Sharmila, and Caitlyn Collins. "Altruistic agencies and compassionate consumers: Moral framing of transnational surrogacy." *Gender & Society* 29.6 (2015): 937-959.

<sup>24</sup> LIU, JIAMING, and SARA BICE. "Surrogacy, social policy and economic development." *Asian Journal of Advances in Medical Science* 3.1 (2021): 72-92.

that prioritize the mental health of surrogate mothers, ensuring that emotional well-being is treated with the same importance as physical health.<sup>25</sup>

### • **Shifting Societal Perceptions**

As surrogacy becomes more common and widely discussed, societal perceptions of surrogacy, and by extension, surrogate mothers, are likely to evolve. Public attitudes toward surrogacy may shift from seeing it as merely a transactional relationship to recognizing the emotional complexity and sacrifices involved. Future prospects include increased social acceptance and understanding of the role surrogate mothers play in building families. As awareness grows, it is expected that there will be greater empathy for surrogates and more support structures to help them navigate the emotional aspects of surrogacy.<sup>26</sup>

### **CONCLUSION:**

One important—yet frequently disregarded—aspect of surrogacy is the emotional and psychological health of the surrogate moms. The complicated emotional experiences surrogate moms go through, especially with regard to their bond to the child they carry, have been brought to light by this study. It is clear from case studies, current research, and worldwide comparisons that surrogate mothers' emotional tolls vary greatly based on personal, cultural, and legal circumstances.

These emotional difficulties have gained attention in India as a result of the Surrogacy (Regulation) Act 2021's shift toward altruistic surrogacy. Since economic incentives have been eliminated, surrogate women are now more inclined to use surrogacy for private reasons, which may strengthen their emotional ties to the child. This, together with the cultural and societal importance of motherhood, may make the surrogate's emotional journey more difficult, need legal protection and psychological care now more than ever.

The results of the study offer a number of important suggestions for enhancing moms' surrogacy experiences. These include increasing public knowledge of the intricacies of surrogacy, offering complete legal safeguards that address emotional well-being, and delivering improved psychological counseling. Future surrogacy procedures in India and around the world can better conform to moral principles that place a higher priority on mental health by concentrating on the surrogate's emotional requirements.

Furthermore, it is crucial to address the emotional aspects of surrogacy as surrogacy practices continue to change in India and around the world. Future studies should concentrate on how surrogate mothers can benefit from support networks and the long-term emotional effects of surrogacy, especially in altruistic agreements. This study adds to the increasing understanding that surrogates' emotional experiences are essential to the morality of surrogacy and that future legal and medical frameworks should prioritize their psychological wellbeing.

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