Surrogacy in India: Bioethics, Human Rights and Agency Dr. Sheela Saravanan

The European Observatory for Non-Discrimination and Fundamental Rights (E:O:N:D:F:R.), France

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About

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Dr. Sheela Saravanan has two Master's degrees in Geography and Development Studies from Mumbai and Pune Universities, India, respectively. Since 1998, her academic focus has been on women and health in Asia and Europe. She has specialized on reproductive health since her PhD on birthing practices in India from the School of Public Health, Queensland University of Technology, Brisbane, Australia. Her post-doctoral work in German Universities was on maternal and child health, selective abortions, reproductive technologies; surrogacy and prenatal screening. Conceptually, she has applied `authoritative knowledge, intersectionality, reproductive justice and transnational feminism` in her research on reproductive health. Author of a book on commercial surrogacy in India, she has been invited as a keynote speaker on this topic on several prestigious forums, including the United Nations.

The European Observatory for Non-Discrimination and Fundamental Rights (E.O.N.D.F.R.), France.

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Abstract

At the juncture when India has banned commercial, it was an appropriate time to examine what is the situation of commercial surrogacy and its transition to altruism in India. This was a follow-up study, from the previous study conducted in 2009-2010. I interviewed 45 surrogate mothers (SMs), who had completed 63 births and given away 90 babies since 2007 to 2017. All the surrogate mothers had completed surrogacy when I interviewed them.

Some of my findings reiterated my previous findings. Some serious violations of human rights and medical ethics continues to take place; women are detained in surrogate homes against their wishes and desires, sex selective abortions are performed, the restrictions imposed on women in the surrogate homes are inhuman, none of them are given a copy of their contract, the manner in which the children have been relinquished is also inhuman as some are shown the face of the children, some are not, some are expected to bond with the babies, most are eventually alienated. Women are selected into surrogacy based on their class, age, skin colour, religion, caste and the payment varied according to these categories. Women are doing all this for money. Most of the households are poor, some are very poor and the remaining are at subsistence level, doing this to gain a higher order in their present class status. Couples from abroad and non-resident Indians formed the bulk of the clients. Almost all surrogate mothers (93%) think the surrogacy process is a form of slavery and most (67%) felt the process was similar to a form of sexual exploitation of their reproductive organs. Most didn't repeat surrogacy again and those very poor who did repeat surrogacy were the only ones who could build/buy a house. Financially, it was only the very poor without any agricultural land or house ownership who have repeated surrogacy more than once who could buy or build a house. The very poor one timer surrogate mothers have not been able to buy a house, some slipped back into abject poverty. It is only the few who were already at a subsistence level who have been able to take advantage of this extra money to enhance their economic situation. Most women did surrogacy for building/buying a house. It is the housing, health and education situation that is the root cause of surrogacy practices in India. It is important that the public and private educational, health and housing sector in India is focused towards health and education for all and also to provide low-cost housing.

The surrogate mothers described the embryo transfer period as intrusive, painful, clamped down, harsh and dreadful. Pregnancy was over-medicalized with injections, medicines, ultrasounds inutero selective abortions, cervical cerclage for twins and filled with experience of illness and depression. During delivery they experienced; fear of death, complications, fear of caesarean section, pain, neglect by commissioning parents and cruel ways in which the child(ren) is separated from them. Overall the physical and emotional impact of surrogacy has been immense on their lives. Many are suffering from an emotional setback, physically they have become weak after the surrogacy treatment, multiple embryo transfer trials, miscarriages, uterus removal and do not have the capacity to work as they used to earlier and many have developed some kinds of morbidities and have experienced near-death situations during surrogacies. Some surrogacy and egg donor deaths have been hushed up and not been reported. Not only the surrogate mothers, but also their children carry the sorrow of giving away the children born through surrogacy. The relationship with the commissioning parents as expressed by all surrogate mothers, was nice only until the baby was in their womb. After the delivery, most commissioning parents turned into inconsiderate, selfish and even cruel beings. From a global perspective, India is a typical case of how rampant violations of human and child rights, women's bodily integrity and medical ethics thrived on global structural inequalities. In the garb of reproductive liberty, the surrogacy practice promotes deeply embedded pronatalist, patriarch, racial, ageist, casteist, sexist and ableist hegemony. This raises globally relevant questions of geneticisation, alienation of the gestational role, human and child rights violations, trafficking and reproductive injustice. Surrogacy hence needs to be included as a form of universal human rights violation.

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The target of surrogate mothers was huge, 45-50, and I was doubtful if I could meet it. Listening to the life experiences of the surrogate mothers had taken a toll on my health and well-being. I myself fell into a depression mode and was unexpectedly hospitalised in Gujarat of stomach ailment. I found it very difficult to pull through the study beyond 35 interviews. At this time, apart from the encouragement of Christine Monty, it was my family and friends who kept me going and hence I am taking this opportunity to thank them specially. My apologies if I missed mentioning anyone. I wish to thank my loving and supportive family; Saravanan V.S., Sudarshan and Sridharan for backing me in all my endeavours. Vardini`s kind and motivating words who kept my motto going in the field at the times when I was almost giving up. I thank Prabhu S, Gita Prabhu, Sunder Mama and Thangam Chithhi for their affection.

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1. Introduction

India had become one of the most popular destinations for third-party childbearing in the last one decade, until commercial surrogacy was banned in India in September 2015. According to some estimates, surrogacy had grown into a 2 Billion dollar business (Perappadan 2014). Media and research sources estimated that around 60–90% of surrogacy in India has catered to foreign couples (Bhalla and Thapiyal 2013; NDTV 2015). As Nepal, India, Thailand, Mexico¹ and Cambodia limited or proposed a prohibition on commercial surrogacy, the practice has moved to Laos, Malaysia, Kenya, Nigeria, Ghana, South Africa, Argentina and Guatemala. The ethical concern of this pattern is the development of biomarkets, in which certain bodies (generally poor and women) become more bioavailable within the existing global or national structural inequalities. This global pattern of moving reproductive biomarkets is based on exploitative capitalization of women's bodies. The control over human reproductive biomaterial² by the affluent using global inequalities and vulnerabilities is a form of recolonisation of women's bodies and labour. Several ethical issues have been raised on commercial surrogacy in India such as; reproductive justice, exploitation of structural inequalities, physical, medical and emotional control over women's bodies, child rights and the reinforcing of social hegemonies. It also raises human rights concerns of; right to movement and right against arbitrary detention, right to dignity, right against sale of body part for financial gains, reproductive distinction, and protection of child rights against separation from parents, knowledge about their birth, sale/trafficking of children and additionally the rights of the surrogate mother's children.

I conducted one research study on transnational commercial surrogacy in India in 2009-10. This report is the findings of a follow up study conducted in February 2019 funded by The European Observatory for Non- Discrimination and Fundamental Rights (EONDFR), France. The research aimed to explore some of the above mentioned ethical issues, human rights violations and the physical, psychological and monetary impacts of surrogacy on the surrogate mothers (SMs) and their family. I conducted in-depth interviews in Anand, Nadiad and Ahmedabad with 45 surrogate mothers who had completed 63 surrogacies and had given birth to 90 babies. Most surrogate mothers had participated in surrogacy with a very popular clinic in the region.

2. Methodology

I visited the surrogate mother's house wherever possible, except for few who met me at various locations in Nadiad, Anand and Ahmedabad. The interviews lasted from 25 to 60 minutes based on how much the surrogate mothers shared about their life experience. The questionnaire was primarily designed by OENDFR along with my inputs. All names (of surrogate mothers, doctors & clinic) have been changed to maintain the confidentiality of the participants. The major themes covered in the interview were;

¹ Mexico prohibited surrogacy in Tabasco state (Photopoulos, 2015). In Nepal, The Supreme Court (SC) of Nepal has issued an interim order to immediately halt the surrogacy (The Himalayan 2018). Thailand banned commercial surrogacy for foreigners (BBC 2015). India has proposed a ban on commercial surrogacy since Sept 2016 with the Surrogacy (Regulation) Bill (MoHFW 2016). Cambodia has proposed a ban on commercial surrogacy (Meta 2017).

² Reproductive biomaterial refers to the child making industry that is based on biological material such as oocyte, sperms, stem cell, tissues, breast milk and the surrogate mother's womb.

- 1. Violation of medical ethics,
- 2. illegal surrogacy practices,
- 3. the surrogate mother's socio-economic background,
- 4. details regarding the surrogacy,
- 5. their motivation to do surrogacy,
- 6. agency and decision making, (decision making to do surrogacy, the selection criteria and the surrogacy contract),
- 7. medical aspects,
- 8. relationship with; the child(ren),
- 9. the commissioning parents and
- 10. the clinic,
- 11. the psychological,
- 12. physical and
- 13. financial impact of surrogacy on their life,
- 14. judicial aspects of surrogacy and
- 15. their fundamental rights.

The present study conducted in 2019 reconfirmed many of my previous research findings, filled some gaps and there was several new evidence that emerged on;

- 1. violation of medical ethics,
- 2. impact on surrogate mother's lives,
- 3. impact on the surrogate mother's existing children's lives,
- 4. their relationship with the clinic, commissioning parents and the children born,
- 5. the violation of human and child rights, and
- 6. trafficking of women.
- 7. The impact of the present laws preventing commercial surrogacy on the ground in India was also an important finding of this study.

A structured questionnaire on the above mentioned topics was primarily to guide the interview but being a sensitive topic the surrogate mothers were allowed to guide the interview in the direction they wanted to speak and not probed further if they felt any discomfort or had other serious issues ongoing in their life. Attempt was made to cover all the questions in the questionnaire as much as possible. Their consent was taken and accordingly interviews were recorded and analyzed using ethnomethodology. Apart from their responses, the surrogate mother and her family member`s language, expression, talk and interaction was also analysed.

I was unable to enter the surrogate homes (dormitories/hostels managed by the clinic), as it would have been very dangerous for me to do so. The surrogate mothers were scared for themselves and my safety and hence they advised me to interview those surrogate mothers who have completed surrogacy. Hence I interviewed 45 surrogate mothers post-surrogacy at their home, at their workplace, in the car outside their workplace and wherever they felt comfortable to speak to me. The advantage of this methodology was that; the surrogate mothers were able to share the impact of surrogacy on their life.

I begin the report with the ongoing illegal practices in the IVF surrogacy clinics that are a violation of the ART (Bill) 2005, the violation of fundamental human rights and the violation of medical and human ethics.

3. Violation of Fundamental Human Rights

The Universal Declaration on Bioethics and Human Rights 2005 recognizes that technological advancements in medical science should be ethically sound, giving "due respect to the dignity of the human person and universal respect for, and observance of, human rights and fundamental freedoms" (UNESCO 2006: 3). The study reveals that this fundamental right was violated in the surrogacy practices.

The Universal Declaration of Human Rights, Article 9 states, "No one shall be subjected to arbitrary arrest, detention or exile" (UNESCO 2006). However this popular clinic forcefully detains women in dormitories throughout the surrogacy against their desire, which has a detrimental psychological impact on them. (Refer section 13) Their family members were allowed to visit them, once a week. Surrogate mothers are retained in these dormitories without any freedom of movement and food and are restricted from; sexual intimacy with their husband, sharing food with their children, keeping their children in the surrogate home, on the kind of music they can listen to and what they watch on television. Some surrogate mothers; were prevented from calling up their husband until after the results of the embryo transfer, were followed to the toilet, restricted from laughing or talking loudly, confined to their beds with their legs crossed and raised, restricted from drinking coffee and several more such rules.

Indeed, almost all surrogate mothers (93%) think surrogacy is a form of slavery and most (67%) felt the process is similar to a form of sexual exploitation of their reproductive organs. None of them felt the surrogacy contract protected them from the risks of pregnancy. After the birth, some surrogate mothers were not allowed to see the face of the babies, most are expected to provide breastmilk using a pump, some are expected to become the nannies to these babies and abruptly separated thereafter. During the feeding period, they are allowed to see the babies through a glass door, but not allowed to hold or touch the babies after birth. In some cases these babies are shown to the surrogate mother`s young children as their sibling and then abruptly separated.

"Here it's all her (Dr. Nisha's³) wishes, she can do whatever she wants." (Surrogate Mother - SM 14)

3.1. Restrictions imposed on Surrogate Mothers

Invariably all surrogate mothers said, they were restricted from movement during the pregnancy. In 52 out of the 63 pregnancies, the surrogate mothers (SMs) were restricted from movement throughout the pregnancy. While in 11 pregnancies, the surrogate mothers were restricted in movement in some periods during the pregnancy (after embryo transfer and before delivery). Their husbands were not allowed inside the room during embryo transfer or delivery. The restriction hence goes far beyond allowing any sexual intimacy with their husbands.

One main surrogate agent of this clinic explained the detailed rules that women were supposed to follow in the surrogate home. (Refer SM 3) Women were supposed to remain on the bed for two months. The sleeping position was also specific; legs crossed and raised. They were not allowed to talk loudly. Women were restricted from laughing loudly. They can walk but very slowly only to use the toilet and nowhere else. They were warned against urinating forcefully. They are made to believe that it is only if they follow these rules that the pregnancy report would be positive. They should not take any tension and do whatever they do, very peacefully

³ Dr. Nisha runs a popular clinic in Anand, Gujarat.

and hence they are restricted from speaking to their husband and family members after the embryo transfer until the pregnancy results. They are told that the child is placed in their womb artificially and these rules are followed to take utmost care in order to avoid miscarriage. The surrogate mothers had to eat whatever they were given. Some women did not like the protein mixture but they were forcefully given this mixture. In one case, Banu (SM 5) was restricted to the extent of making her feel suffocated. She was followed until the toilet, the commissioning parents snatched her phone and personally kept a 24 hours watch on her until her positive pregnancy result.

The Universal Declaration of Human Rights, Article 14 states, "Everyone has the right to freedom of movement and residence within the borders of each state", which is blatantly violated as stated in the above experiences. The clinic now has a newly built all-inclusive complex; with the clinic, surrogate home, residence for the commissioning parents, canteens, shops, everything within the building. The present surrogate home in this newly built clinic is located at the basement. Hence there was no fresh air, no windows or balconies. There were two guards at the gate and hence the surrogate mothers cannot step out of the building easily. In the previous surrogate home, I visited in 2009, women used to step out sometimes or manage to smuggle inside some food of their liking but here in the basement they couldn't do all that and felt even more caged.

3.2. Other Violations

Most (67%) of the surrogate mothers (30 out of 45) felt that the medical practices were violating to the extent of drawing analogies to sexual exploitation. Most (93%) said the process of surrogacy can be compared to slavery. If they were not helpless for money they would never do it. Most (87%) of the surrogate mothers (39 out of 45) said that they felt their physical integrity was violated at the maternity hospital and ward.

The other violations were; the surrogate mothers were restricted from sharing fruits, food and dry fruits with their children when they came to meet them at the surrogate home. The surrogate mothers are mistreated after the delivery such as; not showing the face of the baby to the surrogate mother, abruptly taking the children away after bonding, commissioning parents cutting off all contact with them and the clinic chasing them away if they return with a health problem.

4. Illegal Practices

One of the findings from my previous study was that; India had become a classic case of rampant violations of medical ethics practiced by clinics because of the structural inequalities and that surrogacy in India was unregulated within a permissive legal paradigm until September 2015.

This study revealed that the clinics were engaging in illegal practices by;

- not giving a copy of the contract to the surrogate mothers,
- performing in-utero sex selective abortion if more than two embryos progressed into positive pregnancies,
- engaging in traditional surrogacy (using the surrogate mother's oocyte), and
- simultaneously transferring embryos in more than one surrogate mothers.

4.1. Copy of the contract

None of the surrogate mothers were given a copy of their contract. Despite realising that this is a violation of their basic human rights, they accept this fact because there is nothing they can do about it. The surrogate mothers have no control over their body or the children throughout the process and they cannot question any medical or physical intervention on their body whatsoever. There was no additional payment for miscarriages. There was no health or life insurance. They are not given a copy of the contract lest they have a record that can be used for any legal procedure against the clinic. Even the payment was made in cash, so that there is no evidence of the surrogacy or how much money was paid to the surrogate mother.

4.2. (Sex) Selective Abortions

During my last visit 10 years ago, I was told by surrogate mothers that they had witnessed other women who experienced complications after selective abortion. I was told that this is a risky procedure and might cause abortion of all fetuses. I assumed that sex determination and selective abortions may also be used in this procedure.

This follow-up study in 2019 confirmed that sex selective abortions was actually being performed with all its evident complications. Gracy (SM 2) said she had two surviving girls and one boy growing in her uterus after a transfer of five embryos. One of the female fetuses was identified and selectively aborted by Dr. Nisha (name has been changed). She merely informed Gracy that there are two girls and one boy, so she will be aborting one of the girl fetuses. She didn't take Gracy's consent for the same, Gracy became emotionally very upset after this procedure.

Bhavya (SM 33) was carrying twins and one fetus was aborted inside the uterus on the request of the commissioning parents. Selective abortion was performed on Ujwala as she was carrying triplets. She faced complications and experienced a complete fifth month miscarriage because of this fetal reduction procedure. Similar fetal reduction procedure was also performed on Nargisa (SM 14). Neither Bhavya, nor Ujwala or Nargisa were given any information about the sex of the children they were carrying or whether it was a girl or a boy foetus that was aborted.

Madeeha (SM 39) was taken to a clinic in Kerala for surrogacy, catering to the demands of Muslim commissioning parents from the Middle-East. After a few months into the pregnancy her agent told her that there are two children, and that she should abort one foetus. She refused to abort one child. The agent warned her that she would not get any money from the clinic if she refused an abortion. She shouted and screamed and demanded they allow her to speak to the commissioning parents directly. They didn't allow her to talk to them, but she didn't allow the abortion and gave birth to the twins. Her friend Rabeena was not so lucky; she was carrying twins and selective abortion was performed on her. She felt the commissioning parents are also to be blamed for allowing this.

This recent study revealed evidence that sex selective abortions were being conducted which is illegal and moreover these abortions were being conducted without the consent of the surrogate mother.

4.3. Traditional Surrogacy

Use of traditional surrogacy has been illegal in India since the first Assisted Reproductive Technology (Regulation) Bill in 2008. Traditional surrogacy means using the surrogate mother's egg for a surrogacy which makes her also a genetic provider of the child. But a smaller clinic in Anand engaged in this procedure, using Banu's (SM 5) oocytes for her second surrogacy.

4.4. Simultaneous Embryo Transfer into two Surrogate Mothers

Several commissioning parents had embryos transferred into two surrogate mothers simultaneously, such as in Kaavya's (SM 12) case. Both the surrogate mothers became pregnant with one baby each and both gave birth to one girl child each. In this clinic, at any point of time, at least two surrogate mother's body was always prepared for an embryo transfer. Sriya's (SM 20) commissioning parents chose both the surrogate mothers who's uteruses were ready for transfer. The embryos was transferred simultaneously and while Sriya became pregnant, the transfer into the other surrogate mother was unsuccessful. Finally the commissioning parents didn't pay Sriya much, saying that they had spent a lot of money on two sets of embryo trials on two surrogate mothers. Sriya didn't even know what would be her final payment, she couldn't read the contract written in English nor was she informed, she never asked. Dr. Nisha suggested to Yasifa's (SM 29) commissioning parents that as her egg quality was weak and hence another surrogate mother should be transferred with embryos simultaneously. Yasifa became pregnant while the other surrogate mother surrogate mother didn't.

5. The Surrogate Mother's Socio-economic Background

In this study, many (38%) surrogate mothers had attended school only up to primary level and very few completed 10^{th} (15%) or 12^{th} (11%) class. Almost 40 percent of the surrogacy mothers were non-literates or studied only up to primary schooling level. This has an effect on their bargaining power, understanding of the contract and their agency within the surrogacy. None of the surrogate mothers I met, could read English and hence they were unable to read and understand the contract they had signed.

Another important aspect that is related with the lower education of surrogate mothers is that; many of these women have been pulled out of school only to care for younger siblings, for participating as agricultural labourers or to be pushed into early marriage. Some faced traumas such as illness and death of one or both parents. Almost all the women interviewed in this study openly mentioned that they have been married below the legal age (18 years). Child marriage is a serious barrier for the girls involved, leading to early birthing that has an adverse impact not only on women's health and wellbeing but also on their self-identity and confidence. Although the purpose of this study did not include an analysis of the impact of women's childhood neglect on their adulthood, surrogate mothers indicated evidence of their selfperceived subordinate or subdued positioning in the decision making regarding their involvement in surrogacy.

Overall the surrogate mothers were largely home makers, and those who were involved in paid labour were employed in varied jobs such as; cleaners in malls or hospitals (SM 31,32,33) and

as housemaids. One surrogate mother worked as an old age care taker SM (35), some were labourers (SM 25, 36, 38), garland makers (4,5,6) and home based tailors (SM 11,39). One exsurrogate mother just returned from working as a housemaid from Saudi Arabia, (SM 22).

The surrogate mothers had an average of two children. All the women were married and living with their husbands except for three who were widows. Two of the husbands who passed away were alcoholic, and the third died of kidney failure.

Economic Condition	Number ofIn		
	Surrogate mothers	percentage	
Land/house owners ⁴	12	27	
Poor ⁵	22	49	
Very Poor ⁶	11	24	
Total	45	100	

 Table 1: Economic Condition of Surrogate Mothers

Most (63%) of the of the surrogate mother's household were poor or very poor. Almost one quarter were very poor (11/45) and half (22/45) were poor. (Refer Table 1) The other twelve (22%) households were house or land owners with earning household members and hence they have not been considered as poor. The land/house owners have invested the surrogacy money into education or buying an extra piece of land or livestock (buffaloes, cows). I have defined poor as non-land/house owners households but at a subsistence level with both husband and wife working and earning a steady flow of income. The poor and very poor are the non-land/house owners households with only one or no steady earning member in the household respectively.

There were three seasoned surrogacy agents among those I interviewed (SM 1,3,32) and their primary household earnings continued to be based on the commission they earned as a body market agent for surrogacy, egg donation and clinical trials.

Although this was not part of the questionnaire, I found myself asking the surrogate mothers this question because apart from surrogacy other forms of body market was also a source of their household income. Almost half the surrogate mothers spontaneously told me that have been egg donors. Once they go for any of these body market activity; they receive follow-up calls from clinics constantly inviting them again and again for surrogacy, egg donation and drugs trial.

Most surrogate mothers told me that they would never become a surrogate agent and take any women to the clinic in return for money because they feel surrogacy is a risky process and their conscience wouldn't allow them to put another woman through this risk.

"I sacrificed my health and risked my life, but I will never put another woman through this just to earn an extra Rs 10 thousand rupees" (Megha SM 44).

⁴ Land/house owners with subsistence income.

⁵ Poor: Non land/house owners with a subsistence income.

⁶ Very Poor: Non land/house owners with no subsistence income.

This is precisely what I have referred to in my book as `reproductive justice` (Saravanan 2018). As long as commissioning parents use IVF technology on their own bodies to have children, it can be considered their reproductive rights. But when they use surrogacy they are likely to put another woman (the surrogate mother) through social stigma, psychological challenges, violation of her bodily integrity, and also put the surrogate mother's health, freedom, liberty and even her life at stake. Hence, surrogacy cannot be considered a socially justified practice. The surrogate mothers I met in India are using the same approach in explaining why they were unwilling to put another women`s health and life at risk. Their conscience doesn't allow them to do it, according to what they said. Some were also worried that if anything untoward happens to the surrogate mother, her family members may hold them responsible.

6. The Surrogacy Information

To understand the surrogacy practice in the study area, this section specifies the details regarding;

- the clinics that the surrogate mothers were linked with during their surrogacy contract,
- the number of surrogacies the surrogate mothers were involved in,
- the number of children given,
- the sex of the children born,
- the year of the surrogacies and
- their renumeration.

The 45 surrogate mothers I had interviewed were involved in totally 63 surrogacies and had given birth to 90 babies. Of the total 63 surrogacies in this study, 52 (82%) were from one particular popular clinic in Anand, 8 (13%) were from other clinics in Ahmedabad, Surat and Anand and remaining three (5%) were from Atthani (Kochi) Kerala. 16 percent did surrogacy more recently between 2016 and 2018, almost half (49%) of the total surrogacies were in the year range 2011 to 2015. A little more than one-third were surrogacies between 2007 and 2010 (Refer table 2)

Year range	Number of surrogacies	Percentage to Total
2007 to 2010	22	35
2011 to 2015	31	49
2016 to 2018	10	16
Total	63	100

 Table 2: Distribution of Surrogacies by Year Range

Most (62%) of the surrogate mothers (28 out of 45) were involved in surrogacy only once. A little more than one-third (35%) repeated surrogacy (16 out of 45) for a second time. Only one surrogate mother (SM 1) repeated it thrice. She is also a seasoned body market agent. Half (8 out of 16) of the surrogate mothers who repeated surrogacies, did it because their remuneration after the first surrogacy was insufficient to build/buy a house.

Table. 5. Number of Surrogacies by surrogate mothers			
Surrogacies per	Number of	Percentage to	
surrogate mother	Surrogate mothers	Total	
1	28	62.22	
2	16	35.56	
3	1	2.22	
Total	63	100	

Table: 3: Ni	umber of Surro	gacies by sur	rogate mothers
1401010101111	moer or purro	Sucies by but	i ogate mothers

There were totally 37 single babies, 25 twins (50 babies) and one triplet (3 babies) born to surrogate mothers adding to a total of 90 babies. (Refer Table 4) According to the surrogate mothers, at the clinic in Anand, five embryos were transferred into their womb. If only one embryo progresses into a positive pregnancy in the surrogate mother's womb, Dr. Nisha does not interfere with the foetus in-utero unless specifically requested by the commissioning parents. But if more than two foetuses survive, she invariably selectively aborts the remaining foetuses. In one case, she even aborted one baby in-utero when there were twins. According to the surrogate mothers, Dr. Nisha is very particular about keeping a minimum only two or lesser embryos in the womb. There is also clear evidence that Dr. Nisha identifies the sex of the foetus to selectively abort according to the information gathered in this study.

Gracy (SM 2) mentioned that there were two girls and one boy in her womb and Dr. Nisha specifically aborted the second girl foetus without asking her consent. Nargisa (SM 14) and Ujwala (SM 9) also mentioned that they were carrying triplets and she had selectively aborted one baby in-utero during their surrogacy pregnancies. (Photo 1) They were not even informed about any details regarding the foetuses before this procedure was conducted on them. According to Dimpy (SM 15) in-utero selective abortions is commonly practiced in the clinic, usually in more than two babies, after identifying the sex of the foetus. Nargisa (SM 14) questions the morality of Dr.Nisha when she kills female foetuses in the surrogate mother`s womb, in spite of putting up a huge notice board in the clinic against killing of girls in the womb.

Knowing that, it is usually the surviving triplets (three), quadruplets(four), and quintuplets (five) that are tampered with and reduced to twins by Dr. Nisha, it is interesting to analyse the number of boys as compared to girls among the twins born. Among twins, there was a much higher number of boys (32) born as compared to girls (18). While amongst singles born, the number of girls (23) was much higher than boys (14). (Refer Table 4) Of the 25 twins born, 7 twins were two boys each and 18 were 1 boy and one girl each. There have been no twins of the combination of 'two girls' that were born.

Sex Composition among Twins, Singles & Triplets		Total Babies	Boys	Girls
Twins	25	50	32	18
Singles	37	37	14	23
Triplets	1	3	1	2
Total	63	90	47	43

 Table 4: Number of Babies born and Sex Distribution

As the surrogacy clinics are not accountable to submit any official list regarding surrogacy, there is no exact account of the number of surrogacies or number of surrogacy babies born in India. However there are estimates made by other different sources. According to one estimate,

one-third to half of the total commissioning parents seeking surrogacy in India were from abroad (Bhalla and Thapiyal 2013; Desai 2012). Frontline, a media journal in India, estimated approximately 60-80% percent of foreigners involved in surrogacy in India (Frontline 2016). A popular clinic in Anand claimed the birth of more than 1100 babies born through surrogacy until 2016 and that for two-thirds of these surrogacies, the commissioning parents were from abroad.

This study reveals a total of 57 percent of the commissioning parents came from abroad (Refer Table 5). This includes the 16 percent of Non-Resident Indians (NRIs) living abroad and 41 percent of commissioning parents from; Africa, Dubai, Canada, Turkey, USA, Bahrain, Bangladesh, Nigeria and the Gulf. Another 41 percent of the commissioning parents came to Gujarat from different parts of India (Delhi, Mumbai, Ahmedabad, Baruch, Bangalore, Andhra Pradesh, Hyderabad, Bhopal, Rajasthan and Belgaum). The not-known case is because this one surrogate mother had neither met the commissioning parent nor was she told this information (Refer SM1).

Source Countries	Number of	Percentage	Average payment
	CMs	of CMs	to SMs in lakhs ⁷
NRIs	10	15.87	4.09
From abroad	26	41.27	4.26
Indians	26	41.27	3.37
not known	1	1.59	
Total	63	100.00	3.85

Table 5: Source Countries of Commissioning Parents (CMs) and payment pattern

The average remuneration received by surrogate mothers was 3.85 lakhs (Refer Table 5). On an average the remuneration paid by commissioning parents from abroad (4.26 lakhs) was slightly more than local Indians (3.37 lakhs). The average remuneration paid to surrogate mothers by NRIs (4.09 lakhs) was also slightly more than local Indians (3.37 lakhs).

Surrogate mothers mentioned that; the payment for twins was higher as compared to single babies, birth of boys meant a higher payment as compared to single girl babies. Even the complexion of the babies has determined the payment of surrogate mothers. SM1 was paid lesser for the twins she gave because their complexion was not to the liking of the commissioning parents. Some commissioning parents who are slammed with huge bills by the clinic compensated it by reducing the remuneration of the surrogate mothers. Surrogate mothers do not know how much remuneration is actually mentioned on the contract as they don't have a copy of the same. The commissioning parents pay a lot more for the surrogacy to the clinic. I was informed that the commissioning parents from abroad were charged a much higher cost. The profits the clinics made from their surrogacy clients from abroad as against the marginal payment they make to the surrogate mothers had hence turned this into a very lucrative business using women's bodies.

⁷ 100 thousand is referred to as lakh in India.

7. Purpose of surrogacy

All the surrogate mothers opted for surrogacy as a means to earn money in a short span of time. They all said they would have done surrogacy even if the remuneration amount was lesser. Whatever money they received was anyways a big amount, says Parul (SM 7). Being poor, they would accept any amount but the remuneration of a surrogacy is generally quite low to be able to buy/build a house. All surrogate mothers said that they would not have done surrogacy if there was no money involved. *"There's no point risking one's life for nothing in return"*, says Parul (SM 7). *"We were already poor, who would do it for free"*, said Nitya (SM 4). Others said, they were doing surrogacy for a specific purpose, for their children's education or for housing, they wouldn't do it for free. Savita (SM 36) described the entire surrogacy exercise as physically, and emotionally draining, hence she explains no one would do it for free of cost. Hence, altruism as a primary purpose of surrogacy can be completely ruled out.

Most (77%) of the surrogate mothers (35 out of 45) got involved in surrogacy to buy/build a house. Out of them, most (25 out of 35) did manage to build/buy a house (71%). Of the 25 surrogate mothers who bought a house 15 (60%) had repeated surrogacies, and the others were additionally involved in egg donation and clinical trials selling their body in this market to buy a house. A few did surrogacy for saving money for their children's education (3 households). None of the surrogate mothers who were poor and wanted to buy a house could do so in one surrogacy. It was only with a second round of surrogacy or involvement in all forms of body market such as egg donation and clinical trials that they were able to earn enough money to buy or build a house.

All the surrogate mother's households had some means of livelihood, they were in a condition to work and were working but they wanted to upgrade their economic status, such as; from a labourer to a more stable employment situation. Basic subsistence was not an issue in these households. However some households faced challenging situation such as; debts (two households) and loss of their home due to flood or deterioration (two households). Some specific family conditions such as; drunkard husbands or sick family members puts them further into a helpless position (SM 1, 16, 26, 31, 39). There are many more drunken husband cases, but these were the only ones who were severe and hence the surrogate mothers openly shared their situation. Sriya and Kalpika had children with disability and spent some of their surrogacy money on their treatment (SM 20, 32). It is clear that the women doing surrogacy are vulnerable; most (82%) of the surrogate mothers (37/45) said that they were vulnerable when surrogacy was proposed to them.

Food and clothing was not a major problem, the households were surviving, but health, education and housing was the main reason to do surrogacy in India. The reasons for doing surrogacy may be different from how they actually spend the money after surrogacy. (Refer section 15) The Government of India needs to focus on providing cost-efficient housing, education and health care for the poorer people of India, as an utmost priority.

8. Agency and Decision Making

Almost half (49%) of the women (22 out of 45) were convinced into surrogacy by the surrogacy agents and 42 percent (19 out of 45) by the husbands. Before the surrogacy contracts are actually signed there is a ground work being done by the clinics through a widely spread out network of surrogacy agents, doctors and nurses in the Western India belt from Ahmedabad to Mumbai. The surrogate agents look for poor women in their neighbourhood, among friends and relatives, in drug trial clinics and among egg donors. Everyone involved in bringing a surrogate mother to the clinic gets a commission (Rs 10 thousand) after the child(ren) is handed over to the commissioning parents.

In this study, three major surrogacy agents; Narmada & Sarala (SM3), Kalpika (SM32). and other smaller agents take women to the clinic for surrogacy for a commission in return. Dr. Nisha is well connected with clinics throughout the Western belt in India and she spreads a word to all her networking clinics to supply her with poor women willing to become surrogate mothers.

One of the agents in my study, also asked me several times to provide her with the contact information of the surrogate mothers who have slipped back into abject poverty so that they can approach them for the body market business. I didn't share such information, but this is very much the approach adopted by surrogacy agents to prey women into earning quick money by coercing and convincing them into surrogacy. If the women seem to be disinterested, their husbands are convinced to influence the minds of the women.

Those women who have already become a surrogate mother once are constantly called up repeatedly by the clinic requesting them to return for another surrogacy. They are encouraged to repeat by saying that they have a healthy uterus and they should come for another surrogacy. Similarly, the clinic calls up ex-egg donors regularly to return for egg donation. This is also the case for drug trials, the clinics maintain a database of all those who have participated in clinical trials once and their marketing strategy is to repeatedly call them up to return for upcoming trials.

8.1. Decision making regarding surrogacy

Women's agency in getting involved in surrogacy is included in section II (motivation) and III (decision making) of the questionnaire. The narratives further reveals different forms of coercion by the husbands, family members and the role played by surrogate agents and clinics at this stage of the process.

All the surrogate mothers said that they were apprehensive about surrogacy. Most (49%) surrogate mothers (22 out of 45) were coerced by the big surrogacy agents; Narmada & Sarala (SM 2), and other smaller agents; Kalpika (SM 32). The second level of coercion is done by husbands (42% - 19 out of 45) and doctors (24% - 11 out of 45). Dr. Usha or Dr. Nisha from this popular clinic in Anand. Dr Nisha informs doctors in other clinics to keep a watch on poor women working in their clinics in the entire Western India belt in order to persuade them into surrogacy.

Dr, Nish had requested Dr Sejal (her sister-in-law) running another clinic in Anand, to watch out for poor women in her clinic. Dr.Sejal asked Mariam (SM31) to enrol for surrogacy. Mariam didn't want to do surrogacy; she felt it is like selling one's own baby'. But Dr. Sejal persistently chased her. Dr. Sejal also spoke to her husband and tried to coerce Mariam through him into surrogacy. Her husband was successful in convincing her and had an accident on the day her pregnancy was declared as positive. After one surrogacy, Dr.Nisha called her again to repeat surrogacy and she refused saying *"this money is sinful, I cannot do it again"*. While in another case, Nitya (SM4) wanted to go for surrogacy but her husband didn't allow her, so Dr. Nisha helped her in convincing her husband to allow her.

Gracy (SM2) felt surrogacy is not good for the society and her husband felt the same, but Sarala (SM3, also a surrogacy agent) coerced both her and her husband for hours and pulled her into surrogacy. Dimpy (SM15) was coerced by her husband to accompany his sister into the surrogate home. Several surrogate mothers was very apprehensive about surrogacy but their husband convinced them to go (SM11, SM5). Kalpika (SM32) was very scared about surrogacy but was convinced by a popular surrogacy agent. Later, Kalpika herself went on to become a surrogate agent coercing other women into surrogacy in return for money. Madeeha (SM39) felt it was morally wrong to do surrogacy, but her husband convinced her into it. Several surrogate mothers felt, even if they would die during surrogacy, its fine, but they would sacrifice their life for the sake of their family. (Refer SM7, 20, 21, 24, 28, 35, 42)

8.2. Selection Criteria

The Universal Declaration of Human Rights, Article 2, states, "Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status" (UNESCO 2006). But the surrogacy clinics in India blatantly violate this human rights by choosing surrogate mothers on the basis of their class, colour, religion and social origin (caste). This human right is blatantly violated in the surrogacy selection criteria adopted by the clinics. A popular surrogacy agent revealed that good looks, religion and caste preference is strongly practiced in selecting surrogate mothers in clinics not only in Anand but also all over Gujarat. Fair complexion was the clinic's criteria for choosing Madhuri (SM1). Especially after she gained popularity among commissioning parents as an egg donor. 'Younger women' was another factor of preference in selecting surrogate mothers. Madhuri (SM1) was rebuked by the commissioning parents when she gave birth to children not as fair in their complexion as her own skin.

A popular surrogacy agent said Christians from abroad wanted Christian surrogate mothers (SM 3, 31). Muslim commissioning parents from Middle-East and Bangladesh specifically looked for Muslim surrogate mothers (SM 3, 29). Poor women were transported from Western India (Gujarat) to South India (Kerala) to cater to the needs of Muslim commissioning parents coming from the Middle-East. Kerala is a state in India that has been supplying labour force to the Middle-East since the 1970s and more recently has been providing medical tourism to people from the Middle-East. This is a new form of reproductive market developing in this Southern state. In this study, Madeeha, Saara and Rabia (SM 39, 40 & 41) were transported to Kerala, confined in a house for 10 months, exploited and paid lesser than the promised amounts and sent back in trains to their respective home towns.

Hindu commissioning parents and the clinics preferred certain castes in selecting women as surrogate mothers. Patels⁸ were generally preferred as surrogate mothers and were also paid more compared to other castes. Especially Patel commissioning parents wanted Patel surrogate mothers. (SM 3,4,5) The behaviour of the surrogate mothers was also another criteria. Neelam (SM 38) explained that commissioning parents are justified is choosing women with a nice appearance, behaviour, caste and religion of their preference, as it is the surrogate mothers who would carry their child(ren).

8.3. The Surrogacy Contract

None of the surrogate mothers were able to read the contract as it was in English language and hence could not understand what is written in the contract. The main points that Dr. Nisha explained to the surrogate mother and her husband while signing the contract were; she could die of surrogacy and if that happens it is not the responsibility of the clinic, she has no right over the child, she will have to obey all the rules stipulated by the clinic during the surrogacy and the husband is specially warned that if she dies or her uterus is removed, it is not their responsibility and he should not come fighting at the clinic.

Gracy (SM2) was made to sign on blank papers and the contract was printed on it later. None of them were given a copy of their contract. They all realise that this is a violation of their basic human rights, but they do it because they feel helpless at the mercy of the clinic for money. The payment pattern is designed in such a way that the power is maintained in the hands of the clinic until the child(ren) is handed over to the commissioning parents.

According to the rules of the clinic, all the payment that the commissioning parents make to the surrogate mothers has to be routed through the clinic. One surrogate mother was complaining that many a times the nurse handing over the cash, flicks some money on the way. As the payment is all made in cash, nobody has any record. It was this sort of unaccounted money transfers that the Government of India, since its demonetisation policy in 2016 tried to curb by increasing the reach of digital payments by using mobile applications and smart cards. But it is yet to catch on in a big way. Since 2016, the cash transfers that was the norm in the clinic has now changed to direct back transfers and hence there is now proof on how much payment was made to the surrogate mothers.

The surrogate mothers cannot argue or bargain, they are supposed to receive quietly whatever money they are given as remuneration and many are given bonus amounts too, that is typical of India. The surrogacy contract was for 2.5 lakhs before 2012, which increased to 3.5 lakhs in 2013. 25 thousand was paid to the surrogate mother on the successful completion of 4th month and another 25 thousand on the completion of 6th month of pregnancy. This payment was supposed to be cut from the final payment but sometimes the commissioning parents don't cut this amount. Some commissioning parents pay an extra bonus at the end of the surrogacy, after the baby is handed over. For example Kaavya (SM 12) was paid an extra of 1 lakh Rupees. There is not much payment for miscarriage even if it happens later in the pregnancy. For example, Ujwala (SM9) was paid Rs 35000 for miscarriage at the fifth month.

⁸ Patel is a business caste in Gujarat.

9. Medical Aspects

In a natural pregnancy, the woman's entire body prepares itself for the process and childbirth. The uterus lining thickens itself preparing for embryo implantation. Implantation is a process in which the growing embryo attaches itself to the thickened uterine wall. Accordingly, the body enables formation of the hormones needed to prepare the uterus for conception, maintain the pregnancy and help the embryo grow and develop until childbirth. However, a surrogate pregnancy is not a natural conception and these hormones must be introduced into the surrogate mother's body through medication. To maintain the pregnancy, the surrogate mothers are injected with hormones throughout the pregnancy. The hormones; estrogen, progesterone and lupron used to create and maintain this artificial pregnancy which has several side effects and sometimes severe detrimental long-term health impacts. This information is not given to the surrogate mothers beforehand.

Some surrogate mothers had breastfeeding children at home. The first medication given to such women was to dry up their breastmilk (SM2). This medication also has several side-effects that are not informed to surrogate mothers.

`Over-medicalisation` and `painful` were the two commonly expressed words used by almost all surrogate mothers to describe their entire surrogacy pregnancy and especially the embryo transfer stage. Over-medicalisation meant ultrasound every second week, at least 12 to 20 medicines given every day, the hormone injections, caesarean section and all the medical procedures or specific emergencies that they experienced during the surrogacy.

Gracy (SM 2) described the surrogacy process, "as soon as I put my foot into the hospital for surrogacy, the endless saga of medicines and injections began". They are neither informed about any of the medications given to them nor can they question anything. She described the hormone injection as; painful, unbearable. Surrogate mothers carrying twins are given injections every day, while those carrying a single baby were given the same on alternate days.

Renuka (SM 45) had a haemorrhage after her delivery and her uterus had to be removed and hence she explained her pain (SM 45). "The gestone injections were very painful", Sarala (SM3) said and hence she didn't take any injections throughout her pregnancy. Being a nurse she convinced them that she would take it herself but she actually threw the injections. Many of the surrogate mothers specifically described the injections after embryo transfer and later in the pregnancy as extremely painful and that they are still suffering pain in places they received the injections (SM 4, 5, 8, 9, 14, 17, 22, 24, 26, 29, 32, 38, 43). Others expressed the pain they experienced in general with the medical interventions (SM 6, 10, 11, 12, 17, 22, 36). Some said they didn't return for another surrogacy due to the pain experienced (SM 36). One surrogate mother expressed pain during and after egg donation (SM15). While a very few said, "it doesn't matter" and that for the sake of money one has to endure some pain (SM11). Some expressed the pain after caesarean as unbearable and they continue to experience some pain years after the operation (SM 14, 21, 26, 29, 31, 44). Some of the surrogate mother's present economic situation is so disastrous that the medical pain seems trivial (SM (8, 14, 23, 30, 31, 43). Madeeha's cervix was stitched (cervical cerclage) throughout her pregnancy due to bleeding and hence she experienced severe pain (SM 39).

There are some specific cases that need a mention; one is Ujwala's second surrogacy miscarriage and the second is Renuka's removal of her uterus. Ujwala went for a second

surrogacy because her remuneration after the first surrogacy \in 5500 was insufficient for her to buy a house. She became pregnant on the fourth IVF attempt with two girls and one boy. Dr. Nisha decided to selectively aborted the second girl foetus. Selective abortion of girl foetus is illegal in India under the PCPNDT Act 1994⁹. Nargisa (SM 14) says she was very upset that Dr. Nisha had done this procedure on her. After this procedure, Ujwala developed uterine infection and began bleeding. She was kept in an intensive care unit as her blood pressure kept on increasing and the heartbeat of the children was falling. In the fifth month, the babies were removed after a caesarean and the other two died ten days after birth as well. She was badly shaken by this experience, which was a near-death incidence. Renuka (SM 45) developed haemorrhage after delivery and her uterus had to be removed. Hence more than the pain during the pregnancy, she spoke about this near-death situation.

10. Relationship with the children

All the surrogate mothers, except one (SM36), said that they felt an attachment with the babies and this attachment was as much as they felt for their own children. Almost all, except one (SM 36) said that the attachment they formed with the surrogacy child was like their own child. Sarita SM 36 felt extremely alienated by the commissioning parents, but even she said that she would like to keep in touch with the surrogacy child (Appendix 2 Table 13). Almost all, except one surrogate mother (SM2) said she doesn't think about the surrogacy children and does not want to keep in touch with the child. SM2, Gracy doesn't want to think or speak about the child because her son is badly effected psychologically because of the surrogacy. Her son feels that she has given away her children because she was unable to take care of them.

They all said that there should be a system in place that allows the children to find out their surrogate mothers if they wanted to. The clinic plays a gatekeeper's role in restricting contact and information between the commissioning parents and the surrogate mothers. Saadia gave me her commissioning parent's email address and told me not to inform Dr. Nisha and contact to them directly, otherwise if she gets to know she chastises the surrogate mothers for contacting the commissioning parents.

Those who were unable to see the child(ren) keep wondering "how the babies would like? how big they would have grown?" Parul (SM 7) had a disheartening experience. She couldn't bear the separation. At some point she felt, she didn't want the money, it was just the child that she wanted. She thinks she could have asked for custody of one of the children before she signed the contract. Some surrogate mothers were never shown the face of the babies, others were shown but keep aloof (not allowed to go near the children, touch or hold them). Madhuri (SM1) said "they didn't allow any sort of bonding after birth". Their duty was confined to providing breastmilk using pumps. Some surrogate mothers were looking after the babies as nannies and they bonded intensely with the babies. All these surrogate mothers are experiencing the pangs of separation. More about the impact of this separation on the children is detailed in section 13.2.

⁹ Pre-Conception and Pre-Natal Diagnostic Techniques 1994 that was enacted with the intent to prohibit prenatal diagnostic techniques for determination of the sex of the foetus leading to female foeticide.

11. Relationship with the commissioning parents

The clinic does not allow the commissioning parents to contact the surrogate mothers directly. This is one of the reasons why they are kept in surrogate home. They also restrict direct money transaction to take place between the two parties. Even after the surrogacy, if Dr. Nisha comes to know that the commissioning parents have paid the surrogate mother any money directly, she calls the surrogate mother to the clinic and scolds her. This disturbs the surrogate mothers because except for a very few who have been paid well, most surrogate mother feel the payment was very low for the extent of physical and emotional burdens that they have endured.

Additionally, all the surrogate mothers were unhappy with behavior of the commissioning parents describing them as heartless, selfish and insecure. The abrupt way in which they walk away with the children after using the surrogate mothers for birthing and breastfeeding the child(ren) has hurt them. Haught, cruel, inhuman, distanced, secretive, cunning, ungrateful and non-communicative are some of the words that surrogate mothers have used to describe the commissioning parents. A very few surrogate mothers had some nice words to describe them.

Regarding the payment, Yasifa (SM 29) says "we sacrificed our life for this, if we don't even get a decent payment in return, what is the purpose of doing this." The extreme inequalities between the commissioning parents and surrogate mothers leaves expectation among the surrogate mothers that the couple should help them more than what is written in the contract. The surrogate mothers feel that there needs to be a continued support from the commissioning parents to help them out of poverty or for them to build a house and have a sustainability in their lives. The surrogate mother considers the commissioning parents to be their extended family members. Hence this contract is not as simple as it seems, there are several complexities of human relationships that are knowing or unknowingly ignored by the commissioning parents. The clinic knows these expectations in minds of the surrogate mothers but they choose to ignore it.

Several surrogate mothers described the commissioning parents as, "once their work is over, they have nothing to do with us anymore". (SM 4, 5, 7, 8, 12)

Almost all surrogate mothers felt the commissioning parents were to be equally blamed for their sorrow. "We cut open our stomach only for their children, for our children we have normal deliveries. They rented our womb, used us like a material, paid some money and left, as though we mean nothing more to them. No humanity in them, at least once in a year wouldn't they remember us and call us up, if they have any humanity left in them", said Megha (SM 44).

There are also serious issues that some surrogate mothers mentioned. Manjula (SM 23), who had a serious complication in the next pregnancy after her surrogacy. Her case is detailed in section 12. The question that remains is that if the surrogate mothers face a serious birthing complication in her life following the surrogacy, will it not be a responsibility of the commissioning parents to know about this and help her if possible? When some of these surrogate mothers continue to live in abject poverty wouldn't it be more humane that the children born and the commissioning parents are at least aware of this situation and help if possible.

12. Relationship with the clinic

All surrogate mothers, except a very few, described the clinic and Dr. Nisha as opportunist, exploitative and dominating. One surrogate agent told me that the surrogate mothers treat her like God and would fall at her feet when she entered the room. She controlled the surrogate mothers with an overpowering aura; her dressing style as well as her speech.

There are several inhuman activities that are being practiced by the clinics. There is no law that restricts women from being detained during pregnancies and Dr. Nisha misuses this to her advantage. None of the surrogate mothers were happy leaving their children and family behind to stay at the surrogate home. They are doing so only because the clinic has imposed such a mandatory rule supported by the commissioning parents.

"After we have signed the contract, we cannot speak. Whatever is the hospital rules, we have to follow. We can't speak to Madam (Dr. Nisha) regarding any matter." In Kaavya's (SM 12) words,

Dr. Nisha has imbibed a fear psychosis into the surrogate mothers that if they don't follow the clinic rules, they would have a miscarriage. Hence most of the surrogate mothers followed the rules diligently. Some who raised any opposition were harassed further or not allowed to return home under any circumstances. Sangeeta, who died as a surrogate mother, was blamed for not following the clinic rules as a reason for her own death.

Most surrogate mothers do not understand the meaning of psychological counselling but a few who understand it. say they have not received any such support and all surrogate mothers should be supported with counselling.

Most surrogate mothers complained that the clinic pocketed most of the profits and paid a meagre amount to the surrogate mothers. Some of the cash and gifts that commissioning parents sent to the surrogate mothers at the surrogate homes was pocketed by the hostel matron. Some of the money that was meant to be spent on buying grocery, dry fruits and fruits for the surrogate mothers was also pocketed by the hostel matron. They are even more angry after the clinic built a massive all-inclusive hospital complex; with an in-built surrogate home, neonatal clinic, rooms for the commissioning parents and shopping area. The inequalities have become even more stark after her clinic complex was built. (Photo 2)

Many surrogate mothers said they were treated in an inhuman manner. After delivery (almost all caesareans except two cases), the surrogate mothers were kept for two days in the hospital and thereafter they were shifted to the children's hospital to provide milk for the newly born using breast pumps. In the children's hospital, they were kept on the third floor while the children were kept in a special care unit on the first floor. The surrogate mothers were strictly restricted from entering the room in which the babies were kept in incubators. They could stand outside and see the babies through the glass. Third day after the operation, they have to climb down the stairs, pump out milk and the bottles are given to nannies or nurses to feed the babies. They are not allowed to touch/hold the babies. Only some commissioning parents allow them to touch/hold the babies. They not only feel alienated and humiliated but also the pain of climbing up and down the stairs and pumping out milk using pumps immediately after the operation is felt more intensely. They have to keep doing this from 8 days to one month as desired by the commissioning parents. They are given good beds and rooms until the delivery and this quality of services drops drastically after the delivery. They hence feel they are used for the purpose of the child and thrown thereafter. Surrogate mothers who face health problems post-delivery are not entertained easily by the clinic, unless it emerges as something very serious. Some surrogate mothers return to the clinic for their own pregnancies and are slammed with high bills so that they turn to government hospitals. Once the surrogacy is done, the clinic has nothing to do with the surrogate mothers. The surrogate mothers said, they are not allowed to meet Madam (Dr.Nisha) easily.

Manjula (SM 23) became pregnant after surrogacy and had approached Dr. Nisha for her antenatal care but she couldn't afford their huge bill and went to a Civil Hospital. She experienced a severe obstetric fistula while giving birth to a boy child. She approached Dr. Nisha again for help and she was then treated at a concessional rate. Manjula cried while talking to me thinking about her experience.

The sisterhood that researchers have referred to, is not visible in the relationship between the surrogate mothers and the commissioning parents (Pande 2011). It ends as soon as the baby is handed over and the surrogate mothers are paid for their birthing, breastmilk and nanny service. But when she faces health crises such as Manjula did, neither the clinic, nor the commissioning parents or the co-surrogate mothers with whom she associated as sisterhood had anything to do with her troubles.

Yasifa's (SM 29) sister-in-law also attempted surrogacy and had a miscarriage. 15 days after she was sent home she began to bleed heavily and approached the clinic but she was refused treatment. It was only when her health deteriorated very badly that she was taken in the clinic for treatment. Yasifa had to request one of the nurses to speak to Dr. Nisha to provide her with treatment. The nurse convinced Dr. Nisha to treat the surrogate mother, before something serious happens and she dies, it is only then that she took her case.

One surrogate mother, Sangeeta, who died during surrogacy in the year 2012 was not reported in any media. Another surrogate mother who died during egg donation, this was also never reported in media. Both were associated with this popular clinic in Anand.

Many surrogate mothers complained that Dr. Nisha promised that she would provide a pension for the surrogate mothers, but has not kept her promise. Some wanted me to approach the clinic with this demand.

The clinic provides one school bag and a few books for the children of the surrogate mothers every year. But this year, they have stopped this distribution saying that the law banning surrogacy will be implemented soon and since surrogacy will be closing down soon, hereafter they will not get any bags.

The clinic is frantically calling up all the surrogate agents and surrogate mothers to enroll for surrogacy one last time, as this would be their last chance before the law banning commercial surrogacy is enforced. Once the law is passed at the Rajya Sabha, commercial surrogacy will no longer be possible.

13. Psychological (emotional) Impact

Sadness was mentioned by almost all surrogate mothers, except for a few. Some of the major emotional impact that surrogate mothers have experienced are; attachment with the child(ren) and the depression of parting or not having ever seen their face, the depression of leaving their family and living in the surrogate home and the rejection and alienating attitude of the commissioning parents. Some of the problems faced with the commissioning parents and attachment with the surrogacy child(ren) has already been discussed in sections 6 and 7.

13.1. Impact of leaving home

All the surrogate mothers expressed grave sorrow in leaving their family and children to stay in a surrogate home that is not far away from their family home. Gomati (SM 17) shared symptoms that were clear signs of depression, but she was not supported with any psychological counselling. The children are left at home with the father, in-laws, or other relatives.

Kamala (SM22), a single mother at that time, had left children with her brother and his wife. The children were harassed by them and they are still angry that Kamala left them there. Shruti (SM 16) pulled her children out of school for one year to live with her at the surrogate home. Her husband was an alcoholic and she couldn't leave them home alone with him. Mercy's (SM 8) husband started drinking and became an alcoholic, her daughter ran away with a boy. She feels guilty about not being able to take care of her family when her work required her to remain out of home for months together. Nitya`s(SM4) husband fell in love with another woman while she was in the surrogate home. Similarly Banu`s (SM 5) husband started having affairs since she left home for her first surrogacy.

The surrogate home in the new building is underground and the surrogate mothers who did surrogacy after 2014 expressed the distress of staying in the basement. Earlier they had some open air, a balcony or windows for fresh air, but the new clinic seems like a cage where they feel very uncomfortable and distressed staying. Earlier they could step out of the building occasionally but now they are completely caged.

13.2. Impact of the Attachment with the child(ren)

None of the surrogate mothers could maintain any contact with the children, except for one (Appendix 2, Table 28). They are living with the pangs of separation, except one surrogate mother who said she has managed to disentangle from that emotional bond. But invariably all the surrogate mothers said they would want to know the well-being of the babies after giving them away in any possible. Some surrogate mothers argued that it is the right of the child to know about their birth mothers. Other surrogate mothers questioned why their name was not on the birth certificate of the child. Some requested me if I could do something about this situation.

The only time Nitya (SM4) was allowed to see the children and hold them was for a media video shoot which lasted only for about 10 minutes. She has saved that newspaper dearly as that is the only time she held the babies and is the only proof she holds about her surrogacy and of the children.

The helplessness on having no rights over the children was expressed by all the surrogate mothers. The common expressions were; what can we do?, what right do we have? what is

the point of bonding? how would they (the children) be looking now? what would they be doing now?

When I was asking Sneha about the children she began weeping and weeping and I had to stop my interview and give her time to recoup. (Photo 3)

Parul (SM 7) was called upon to take care of the twin boy child when he fell sick after birth. She obliged and helped in caring for him for three months. During this time, Parul bonded with the baby boy and felt extreme loss and alienation when they walked away without any further contact. She repeated surrogacy and the second time, they didn't show her the face of the baby girl just because she had become attached to the baby boy after the first surrogacy. Anyone who doesn't follow the rule is chastised in some form or the other. Cameras were allowed inside the operation theater and Parul's entire second surrogacy delivery was videoed without her consent. And when she pleaded to see the child, they were abruptly taken away. Seeing her plight, the camera person returned briefly just to show her the face of the girl child. (Photo 4)

Deepti (SM 10) bonded with the single girl child because she doesn't have any girls. Similarly, Mercy (SM 8) became attached with the surrogacy baby boy because she had lost her boy child after delivery a few years before the surrogacy. She was also attached to the children she looked after as a nanny. The commissioning parents went away without keeping any further contact. (Photo 5) Hence it was not only the surrogate mothers but the nannies who were also treated in a similar alienated manner.

Ujwala, the best case scenario in my previous study, where the commissioning mother Caroline had kept in touch with her, is detailed in my book (Saravanan 2018). Now after 10 years, Caroline has maintained no further contact with Ujwala and she was yearning to hear something from them to be able to see the children. She requested me to send her an email, which I did, but that email address is not valid anymore.

Almost every case mentioned in the report reveal a saga of sorrow, yearning, emotional attachment and the feeling of being used and cheated by the commissioning parents and the clinic.

13.3. Impact of social stigma

Mercy (SM 8) spoke about her neighbourhood; they speak ill about her character because she was involved in surrogacy. This was because, after her surrogacy, she continued being out of her house, taking care of babies for commissioning parents as a nanny,

Gracy (SM2) herself feels that she has sold her child and rented her womb and feels guilty about this. She feels surrogacy being a sinful and dishonest act, she couldn't put that money she earned to any useful purpose. All her neighbours and relatives tell her that she has done something sinful by selling her babies. Similarly, Mariam (SM 13) was upset that her husband met with an accident on the same day she heard about the embryo transfer result. Hence she feels this is a sinful act and hence her husband had to pay a price for it.

Kamini (SM 26) said, "What I did, was a sin. Why should I take another person to commit the same sin. That other lady will also suffer like me."

The pastors in Catholic churches give speeches dissuading women to do surrogacy and one surrogate mother (SM 24) expressed her sadness when she hears him speaking against it.

13.4. Impact on the surrogate mother`s existing children`s lives

Gracy's young son was two years old and remembers that she gave away two babies. Her son questions her; why, to whom did she give the children and where are they now? When she has no answers to these questions and cries, he pacifies her by saying; maybe it's good she gave the baby away because she struggles to take care of him, caring for other two children would have been a big burden on her.

Shruti's (SM 16) young children were present during her delivery. They were shown the baby girl on birth and introduced as "see, here's your baby sister" and then taken away from them forever.

Kamala's (SM 22), 21 year old grown up daughter questioned, "*aren't those babies my mother's too?*". She questions the intentions of the commissioning parents who choose to use other women's bodies to have children just because they think their genetics is superior over others. There needs to be more research focus on the impact of surrogacy on the children of the surrogate mothers.

14. Physical (health) Impact

According to WHO, 99 percent of the maternal deaths occur in developing countries (WHO 2018). In India, maternal death is known to be highest among the poor and non-literates (Khan and Pradhan 2013). A lower economic status, early marriage, early childbirth and substandard adolescent health are factors that make the surrogate mothers in India vulnerable to maternal morbidity and mortality and also impacts their bargaining capacity within the surrogacy process

A recent study found that "surrogate births had significantly higher obstetrical complications, including gestational diabetes, hypertension, use of amniocentesis, placenta previa, antibiotic requirement during labor, and cesarean section" (Woo et al., 2017: 993). Corroborating this information, many of the surrogate mothers in this study had experienced serious maternal morbidities in the surrogacy pregnancies which they had not experienced in their own pregnancies. A few women in this study had themselves experienced near death situation, some had serious complications and others developed morbidities during the pregnancy, while some witnessed other surrogate mothers experiencing near-death situation or death.

In this study, Raksha (SM 45) experienced a near-death situation; she had a hemorrhage after her caesarean and her uterus had to be removed. All deliveries were caesarean except for one surrogate mother who gave birth spontaneously before she could be operated upon.

There were severe problems experienced by some surrogate mothers. When Gracy (SM 2) was inside the surrogate home, one surrogate mother died. She also witnessed one near death incidence of another surrogate mother when she was in the surrogate home and was petrified with this experience. Sarala (SM 3) witnessed a surrogate mother who experienced a near-death situation during her delivery and her uterus had to be removed. Gomati (SM 17) also witnessed another surrogate mother who experienced near-death situation when she was in the clinic and hence she was depressed while she was inside there.

Gracy (SM 2) developed thyroid, Banu (SM 5) had high Blood Pressure, Mercy (SM8) experienced meralgia paresthetica post c-section (paresthesias and numbness of the upper lateral thigh area). Other problems faced by Gracy (2), during the medical interventions was that her nerve has been affected adversely. Kamini (SM 26) developed blood pressure and thyroid, Ujwala (SM 9), Nargisa (SM 14) and Yasifa (SM 29) also had blood pressure during pregnancy. Sunita (SM 24) and Kamini (SM 26) developed diabetes. Sarala (SM 3) and Sunita (SM 24) were discussing about other surrogate mothers who developed cancer and HIV post surrogacy. There is evidence that maternal-fetal genetic sharing increases maternal susceptibility to some diseases such as autoimmune diseases and cancer (Boddy et al 2015). While the maternal-fetal resource conflict causes maternal blood pressure, diabetes and thyroid.

Many of the surrogate mothers believed that it was the excessive hormone medication that caused these health problems. Corroborating the study findings by Boddy et al (2015), they had a feeling that many of these diseases that they developed during pregnancy was actually transferred from the commissioning parents into their body through the child.

Many surrogate mothers revealed that they experienced extreme forms of pain during the surrogacy pregnancy as compared to their regular pregnancy. (Refer section 5)

Many surrogate mothers said they have been experiencing health problems post surrogacy, leaving them with a lowered capability of even doing regular chores (SM 2, 8, 5 and many more). (Refer Case Studies) Mercy (SM 8) expressed that her body is wasted post-surrogacy,

One surrogate mother (SM 28) thinks she won't live long because of the two surrogacies she was involved in and that she won't be alive to see her children growing up. But she says that she has done her duty by earning money for their future use.

15. Financial impact

It is often portrayed in popular media that, IVF clinics and some researchers too, emphasise that surrogacy is a win-win situation, that it brings poor households out of poverty while providing babies for the infertile. This inference is not as simple as; giving some money to the poor so that they become rich overnight.

This study reveals that women from very poor households have had to repeat surrogacy at least two times to bring the family out of poverty. This is at the cost of a very high physical and psychological well-being. (Refer section 9 and 10) Many surrogate mothers (17) continue to be very poor (38%). All the surrogate mother's households who continue to be poor have been involved in surrogacy only once and were (very) poor before they did surrogacy. Women from very poor households have not been able to come out of poverty after one surrogacy (Gracy, Sarala, Sriya, Yasifa, Saadia and Nargisa). Some of these women have slipped into abject poverty, worse than what they were before surrogacy (Yasifa, Saadia and Nargisa). For the very poor, surrogacy money brings in a sudden influx of money which many spent on household expenses such as TV, fridge, scooter, bike or spent it on their daughter's marriage or health care treatment. This sudden influx of money did more harm to many of their lives of the very poor than any good, unless they go for another surrogacy to make up for this loss. Gracy works in peoples houses and her husband sells bangles and they are running their household. Women from very poor households who have done surrogacy only once, have slipped back into abject poverty. Several poor households (12/45 27%) have slipped back into abject poverty or bare subsistence level after one surrogacy.

Those living in abject poverty have only been able to buy some basic needs or pay off debts after the first surrogacy (SM 20, 29, 30, 31, 45). These women didn't repeat surrogacy because of its adverse effects on their physical and emotional health and moral considerations. (Refer sections 9 and 10) Most of the surrogate mothers said that the payment they received for the surrogacy was unfair (Appendix 2, Table 20)

None of the surrogate mothers from poor households have been able to buy or build a house after the first surrogacy. Many became a surrogate mother to buy/build a house but could not do so after one surrogacy and hence repeated the process (SM 4. 5, 6, 7, 12, 13, 19, 22, 25, 28, 32, 42).

The land/house owning households have been able to buy better means of income source such as; an autorickshaw, tempo, sewing machine, an extra piece of agricultural land or livestock (cows, buffaloes) with the surrogacy money (SM 15, 16, 17, 18, 33, 37, 38, 44).

Banu (SM 5) did two surrogacies but her husband got into a habit of spending the money that his wife earned and started taking loans regularly. He sends the money lenders to her door to claim the amount and in order to repay this she went again for surrogacy, egg donation and clinical trials. She built a house and rented out a shop and also bought an autorickshaw and yet she is in deep financial crises.

For some women, surrogacy has pushed them further into the vicious circle of selling their body at the cost of their life, health and psychological well-being (SM 1,3,4,5,9.13, 14, 22,32, 39,40,41,42). Despite repeating surrogacy, Kinjal (SM6) did not have enough money to buy/build a house. She spent the money from her first surrogacy on buying household items.

One surrogate mother (SM 31) experienced a misfortune, her husband met with an accident on the day her embryo transfer came out as positive and she spent all the surrogacy money on his treatment. She didn't repeat surrogacy because she felt that the incident was a result of her (sinful) involvement in surrogacy. Nargisa (SM 14) was involved in surrogacy and donation of her eggs for eight times, four before and four after surrogacy and she had to sell the house she bought and has now into abject poverty and in deep debt. After seeing the huge influx of money through surrogacy and egg donations, her husband has become greedy and has got into a habit of borrowing money from anyone.

Another surrogate mother experienced a severe health problem, obstetric fistula in her pregnancy after the surrogacy. She spent all her money on this treatment. Mercy (SM8) was a popular surrogate agent in 2009, but now she has lost that source of earning and has slipped back into abject poverty because she has no other sustainable source of income. Madhuri (SM1) and Sarala (SM3) are likely to follow the same pattern as they are both dependent on money earned as an agent in surrogacy, egg donation and clinical trials which is not a sustainable source of income. Kalpika (SM 32) is also an agent but she now works in a hospital as a cleaner and hence can sustain her household income. Saadia (SM 30) slipped back into poverty because she was very poor and bought a house with her first surrogacy, her mother-in-law fell sick, they

fell into debt and she had to sell the house. Now they are living in a shanty close to the railway line (Photo 24).

Madhuri (SM 1) is a seasoned agent and is somewhat stabilised after three surrogacies, several egg donations and the commissions she has earned as an agent in the body market. Mercy (SM 8) was a similar agent in her younger days, but now she has slipped back into abject poverty because this was not a sustainable form of earning.

Gracy (SM 2) spent all the money in trying to go to Israel after her first surrogacy and did not repeat because she felt that surrogacy is not only painful but also a sinful act.

Sarala (SM 3) has got into the vicious circle of selling her body to the body market.

It is only those households who are already living above subsistence level have been able to some sort of a means of sustainable earning in the first surrogacy that is; if they could use the money effectively and have not faced any health or other incidents in the family post surrogacy.

Land owners and the households having a source of income have been able to make good use of the surrogacy money (SM 7, 11, 15, 16, 17, 18, 23, 33, 43, 44, 45). Dimpy (SM 15) already owned agricultural land and bought an extra piece of land with the first surrogacy; with the second surrogacy they bought buffaloes.

For most of the households living on subsistence, one surrogacy only brings in the basic necessities. Women have to go for a second surrogacy for the money to have any financial impact. For the very poor, the first surrogacy brings in a sudden inflow of a huge amount of money into the household. The second surrogacy stabilises the income and it is the third surrogacy that brings some form of sustainability.

16. Conclusion

This report reveals certain findings that reconfirmed many of my previous research findings, filled some gaps and some new evidence that emerged about; severe forms of violation of medical ethics, some financial advantage at the cost of severe adverse impact on surrogate mother's physical and emotional wellbeing and on their family's lives. Their relationship with the clinic, commissioning parents and the children born were completely controlled by the clinic and managed according to the whims and desires of the commissioning parents. A few Muslim women in this study were trafficked into surrogacy from Ahmedabad to Kerala because their bodies were pawned with conditions that they were not informed about before signing the contract, their fundamental human rights were violated and they were mistreated, disrespected and they were finally paid lesser than their expectation.

The laws preventing commercial surrogacy in India is having an impact. Clinics around Anand and Ahmedabad have been calling up the surrogate mothers from their database information requesting women to enroll in surrogacy as a last chance because the practice is going to be banned soon. Bharatiya Janata Party, having won the 2019 elections; it is expected that they will carry forward the ban on commercial surrogacy into the Rajya Sabha.

This study revealed that; women feel they have been abused, mistreated, manipulated and exploited. They feel their wombs have been rented. The altruistic motive is rarely mentioned

by them after years of surrogacy. They carry tremendous feeling of hurt and betrayal towards the commissioning parents and the clinic. They have a craving to see the child and know about their wellbeing. Many women have not been able to build the houses for which they did surrogacy. Some houses have been built with the surrogacy money at the cost of women's physical and psychological health and well-being. Most surrogate mothers face health problems that have lasted for more than 5 years. They do not have the capacity to work as much after the surrogacy medical treatment, multiple embryo transfer trials, miscarriage and some serious morbidities during pregnancy.

A popular clinic in Anand, continues to transfer five embryos into the surrogate mother's uterus and performs in-utero sex selective abortions of foetuses inside the womb if more than two foetuses survive. This is completely illegal in India. This clinic also continues to keep surrogate mothers compulsorily in surrogate homes against their wishes which is not legal nor illegal by law. Detaining women is a human rights violation. Recently surrogate mothers are detained in the basement of a large clinic building with no windows. Overall, this practice has caused huge adverse psychological problems as well as family problems to surrogate mothers. The surrogate mothers have never been given a copy of the surrogacy contract. Children have been commodified with price tags attached to per child, based on their birth weight, sex, appearance, and accordingly foetuses are selectively aborted according to the wishes of the commissioning parents. Surrogacy violates children`s rights to know and be cared for by their parents.

There was a death of a surrogate mother in Asha clinic in Anand Sangeeta died in 2012 during surrogacy and this never came out in news, it was all hushed up. Many women are facing near death situations and or their uterus have to be removed due to haemorrhage but this never comes out in news. Some other clinics in Gujarat are engaging in some unethical practices such as; one smaller clinic in Anand was using the surrogate mother's egg for surrogacy. Poor Muslim women from Ahmedabad were being transported to one Gift clinic, Athani, Ernakulam in Kerala to become a surrogate mother for couples coming from Dubai. They are kept in hiding in Aluva and forced into selective in-utero abortions, are paid lesser than what they are promised and not given a copy of the contract.

It is important to note that; it is generally thought that surrogacy is just another natural birth, but there is nothing natural about surrogate motherhood. When a woman becomes pregnant naturally her entire body and brain prepares itself for the pregnancy, but in surrogacy, her body has to be made ready artificially. This is done by pumping hormones into her body; right from increasing the uterus lining that hosts the embryo to maintaining the pregnancy until childbirth, as this is a foreign body. To maintain this foreign body (embryos created externally), she is given hormones injections throughout the pregnancy that are extremely painful with several and some serious side effects. Every successful pregnancy involves on an average, three embryo transfer trials. Many surrogate mothers whom I have met again after 5 to 10 years are now facing serious health problems after surrogacy.

Women's bodies are being used like a money-making object by the clinics, the family members and also women themselves who prefer to sacrifice themselves for the sake of their children's and family's well-being. The surrogate mothers themselves feel that surrogacy is a form of slavery, and feel their bodies have been violated many think this is equivalent to exploitation similar sexual intrusion into their bodies. The poorer the household, the more the number of surrogacies that is needed to bring the household out of poverty. Most women did surrogacy for building/buying a house. It is the housing, health and education situation that is the root cause of surrogacy practices in India. It is important that the public and private educational, health and housing sector in India is focused towards health and education for all and also to provide low-cost housing. There is a need to implement a strict control on all IVF clinics to monitor their activities. If nothing else, they are all involved in sex selective abortions and inhuman use of women's bodies for their own benefit. People need to be made aware of the inhuman procedure involved in surrogacy and the violations of human rights, because what is generally being published in popular media is nowhere near the reality of the surrogacy practices.

This study reveals that given the complexity of surrogacy practices in its physical and psychological impact on the surrogate mothers and their families, and the extent of human rights violations there cannot be an ethical form of surrogacy. Apart from passing the present Surrogacy Bill at the Rajya Sabha, I hope the Government of India gives a serious thought to these harms and calls for a complete ban on surrogacy in India. It would also be a suggestion that ex-surrogate mothers be included in the Pradhan Mantri Shram Yogi Maandhan (PMSYM) scheme which entails a minimum of Rs 3000 pension for the unorganised sector workers.

India banned commercial surrogacy on reported deaths of surrogate mothers and egg donors, custody battles for children, abandonment of disabled and undesired children and exploitation of women, apart from trafficking for surrogacy. The illegal networks trafficking young girls into prostitution and domestic work from poor localities in India were also being used for surrogacy. This study also revealed Muslim women being moved to Kerala to cater for surrogacy demand from the Middle- East. The surrogacy practice maintains patriarchy through familial persuasion and contracts that controls and exploits women's bodies and triple-alienation; from the children born, from their own body and physical alienation. Applying the reproductive justice framework, I argue that surrogacy is likely to put the surrogate mother through multiple forms of indignity and injustice along with physical, psychological and life risk and hence cannot be considered to be the intended parent's reproductive right. Although India banned commercial surrogacy, altruistic surrogacy is allowed and there are several loopholes left in this practice that is exploitative and a violation of human and child rights. Surrogacy hence needs to be included in declaration of universal human rights violation, from a reproductive justice perspective.

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Photo 1; Ujwala (SM9), her husband and Dr. Sheela



Photo 2: New IVF Clinic Complex in Anand



Photo 3: Sneha (SM35) and her Children



Photo 4: Parul (SM 7) and her Son





Photo 5: Mercy (SM8) and Dr. Sheela

APPENDIX 1 Case Studies

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1. Madhuri

Madhuri came to visit Sarala especially to speak to me about her surrogacy experience. After the interview, I visited her house and met her son. The house was provided to them by her husband`s employer. The house itself was well furnished and she had a well laid out kitchen with many utensils. (Photo 6: Madhuri Preparing tea)

She's 35 years old, originally from Nepal, a Hindu, and studied only upto 7th. She was not very interested in studies. She couldn't put her mind into it and was married off at 15 years of age. Soon after marriage she had a child; she has two children, one 18-year-old girl and a 17-year-old boy. She was involved in surrogacy thrice; once in 2013 and in 2017 and then again in 2018. She received Rs 3,50,000 for each of the surrogacy. The first was in Usha Nursing Home, the second in Female First and the third time in Trinity Test Tube Baby Centre. She did one surrogacy in Anand and twice in Surat. Because they expected the surrogate mothers to remain in the surrogate home throughout the pregnancy in Asha clinic in Anand, she didn't go there as she was uncomfortable with that clause. "*My children will be left alone*", she said. Her first surrogacy was two boys, second was a boy and a girl and the third surrogacy was two boys again. She has also been involved in egg donation several times.

No.	Year	Place	Clinic	Child(ren)	In lakhs	CPs
				born		
1	2013	Anand	Usha Nursing Home	2 boys	3.5	American
2	2017	Sural	Female First	1 boy, 1 girl	3.5	Not known
3	2018	Surat	Ashish Viradia	2 boys	3.5	Gujaratis

She was a housewife before she became a surrogate mother. She was also engaged in sex work earlier. Her husband is an alcoholic, he drinks for 15 days in a month and is sober for the remaining 15 days. He works as a labourer in a factory that makes sacks for packing rice. "When he drinks, he bickers all day and then he sleeps". But he doesn't beat her, she added. She was both emotionally and financially vulnerable when she went in for surrogacy for the first time.

Presently she is a cook and also works for an NGO called Jankalyan Seva Samiti motivating sex workers to get medical examination for HIV/AIDS and STIs. She also continues to be an agent for egg donors and surrogate mothers, taking women to the clinic in return for a commission.

It was her friend who introduced her to egg donation and took her initially to the clinic for this purpose. After one egg donation, she was requested by the clinic for surrogacy.

(She has a fair complexion and many clinics seek this as criteria for recruiting surrogate mothers. Women with fair complexion are in high demand by commissioning parents too.)

Initially when she first heard about surrogacy, she wondered what was all this about, how can one have a child without having physical intimacy. After she came to know about surrogacy she told her husband about this as an earning possibility. He immediately agreed and was happy about the high monetary returns, there was no issue about convincing him. Everybody in her neighbourhood now knows about her involvement in surrogacy. Lately, she feels like the bread earner of the family and in control of her life. Initially when she went for sex work and surrogacy it was only due to a sense of duty towards the family, there was no sense of altrusive motive, it was need. "When there was not enough money to eat, I got involved in this."

In 2013, she went to Asha clinic and witnessed a huge fight there. Then she heard about one woman who had died in the clinic during surrogacy and got scared about this clinic. ¹⁰Her other apprehension about this clinic was that they expect women to stay in surrogate homes for almost a year. She was uncomfortable leaving her teenaged children at home alone and go away for surrogacy.

"Money is the only reason for surrogacy, other than money there is nothing. If the husband doesn't earn anything then we (women) have to do this only", she said. She received Rs 350000 (\notin 5000) for her first surrogacy and the same amount for all the three times. She did feel that surrogacy was medically intrusive and similar to sexual abuse for the first time, but with repeated trials she got more and more used to it.

Selection Criteria

At the clinic she submitted her photo, Aadhar card and ration card¹¹. "It is the commissioning parents who get to choose the surrogate mothers", she said. "They make five women stand in front of them (the commissioning parents), and they can choose one. (this is very similar to how sex workers are chosen)

Then they interview the chosen woman. They ask "where have you come from? what does your husband do?". Some commissioning parents demand for good looking, beautiful surrogate mothers, they also prefer younger women. "The commissioning parents generally assume that if the surrogate mother is black the children will also be black", she said. "Take for instance, in my third surrogacy; the commissioning parents selected me because I have a fair complexion. I gave birth to two boys; the weight was ok as both babies were 3.5 kilograms, but both the babies were of a darker complexion". The commissioning parents taunted her after the birth of the children," this girl is so fair and beautiful, how is it that the children are dark". Madhuri said; "in their family both the (commissioning) husband and wife were of dark complexion, so how can the children look like me, the children will look like them."

She was irritated with their behaviour and had refused to sign the final agreement. She was demanding for more money (Rs 50000 \in 700) for signing the agreement, it is her way of showing resentment. In recent times, some clinics involve a lawyer in signing contracts and after the surrogacy before relinquishment of the children.

(This is a recent phenomenon that the court and lawyer is involved in surrogacy agreement, and yet the surrogate mothers are not given a copy of their contract, so even if they go to court they have very less chances of filing a case. Although Madhuri feels she is in control of the surrogacy by not signing the final contract, she is unaware that without a copy of the contract she doesn't stand any chance in the court of law even to prove that she has been a surrogate mother in the clinic.)

¹⁰ In Gracy's interview, there is a mention of Sangeeta, a surrogate mother who died in the year 2012. This was never reported in any media. There was another egg donor who died in 2017, which was again never reported in media.

¹¹ Aadhar card and Ration card are identity proof in India.

Monetary motivation

She would not have done surrogacy if the cost was lesser. They (the clinic) pay Rs 300000 (\notin 4000) for one child and an extra Rs 50000 (\notin 700) for every additional child. While Asha clinic was paying Rs 75000 (approximately \notin 1000) for every additional child.

Yet, she didn't go to Asha clinic because they make it difficult for surrogate mothers by compelling them to stay away from their home and leave their family behind. *"The women inside the surrogate home suffers and her family suffers outside. I was very uncomfortable with that"*, she said.

Initially when asked, she felt that the payment is fair as she didn't know how much the commissioning parents pay for the surrogacy. "*The doctor will never reveal the actual charge they take from the commissioning parents*" she said. Further into the interview after gaining her trust, she shared that the doctors have been unfair to surrogate mothers. She said, the clinic take Rs 20 to 25 lakhs (\in 30 to 35 thousand) from the commissioning parents for a surrogacy and give only \notin 4000 to the surrogate mothers. Hence she said; "*the doctors make a lot more money out of women's bodies. They take so much money and give only little to the surrogate mothers*". The first time she became a surrogate mother, she didn't feel any resentment because she was desperate for money and also because she was naive, but the second and the third time she says she "*realised that this is nothing but a business for the clinics based on our bodies, so it is nothing but an exploitative body market just like prostitution.*"

The second time she went to the clinic only because she was in urgent need of Rs 10000 (\notin 140). She went to the clinic thinking she would have an embryo transfer and return home with that much money after an unsuccessful embryo transfer. But then the result was positive and she had to go through the entire surrogacy.

In Asha clinic, although they paid comparatively more for an additional child, they paid lesser (Rs 2000, \in 30) for embryo transfer and staying there for 15 days as compared to Rs 10000 (\in 140) in the clinic she went to.

(She has explored the body market (egg donation, surrogacy) and the remuneration accordingly she makes decisions).

As an agent

She has been actively involved as a surrogate agent. Recently she introduced a woman for surrogacy in a clinic and she has given birth to twins and Madhuri is expecting her commission payment from the surrogate mother soon. The two surrogate mothers (Sarala SM3 and Madhuri) in the room start discussing about how Mr Piyush, also an active agent in the area, takes unmarried girls for surrogacy and how some Muslim families take their young (14 to 16 years old) unmarried girls for egg donation.

She says she recently got a call from the clinic to refer poor women for surrogacy as soon as possible as the law is likely to be passed soon at the Rajya Sabha and commercial surrogacy will have to close down thereafter. (Hence there is evidence that law banning commercial surrogacy has had an impact in reducing the surrogacy markets in India. The criticism that all the market will go underground is an over exaggeration.)

Her relationship with the clinic

It is an ongoing relationship because she is also a surrogacy agent. She says, they're kind and good and allowed her to eat whatever she wanted when she was a surrogate mother. There was no restriction on food ¹²during her pregnancy.

About leaving home

She didn't have any tension because her clinic allowed her to remain at home with her family. She was only restricted from travelling and also from having any physical relationship with her husband. She was allowed to do light household work such as; cooking and washing clothes.

Relationship with the child

In the clinics she went to, they take away the children soon after birth, they don't even show the face of the child to the surrogate (birth) mother. She has not even met the commissioning parents, except for the first surrogacy. They didn't allow any sort of bonding after birth. "During the pregnancy, I felt a strong emotional bonding during the first surrogacy. After that, for the second surrogacy I restrained myself from feeling much bonding. Anyways they don't even show the face of the baby." (Her expression was one of frustration, because although she says she hardened herself for not feeling any bond, she became attached to the children in all the three surrogacies. Not only the surrogacies, she also felt attachment for the children that may have been born through her egg donation.)

"I was involved in egg donation many times. It's a natural attachment, anyone feels it. I also felt it", she said.

During the first surrogacy, they showed me the children and I also breastfed them for 15 days using a breast pump". They paid her Rs 200 (\in 3) per day extra for breastfeeding.

According to her, there should be a way in which contact with the children born out of her through surrogacy and egg donation, can be maintained. She showed me the photos of the children, she was able to take the photos when they were here with her for 15 days. "I was very upset and sad on handing over the children. It is important to have psychological support not only for me but for all surrogate mothers. My sadness in all the three surrogacies was because of thinking about the children and worrying about how they are and what they will be doing".

Relationship with the Commissioning Parents

The first commissioning parents selected her from three or four women. After that, they came only during delivery, to take away the child.

The first commissioning parents were American, the other two she doesn't even know who they were. She thinks the second commissioning parents were Gujarati. But she has no contact with any of them, they didn't keep in touch with her.

¹² In Asha clinic, surrogate mothers are not allowed to eat food ordered from outside. Neither to they make the food choices exciting for the surrogate mothers. A mundane lunch box comes every meal and the surrogate mothers are expected to eat that food.

She expressed pride in her fertility and that she got a positive result in the first IVF trials itself in all three surrogacies so she was sought after by the clinics not only for her fair complexion but also for her success rates (positive results with IVF trials).

Sending her daughter into the body market

"I will never leave my daughter into surrogacy or egg donation. We don't want our kids to get involved in this. We are struggling so that our children don't have to do this in their lives."

Copy of the contract

She was not given a copy of the contract for all the three surrogacies.

Effect on her child

Her son saw her in the clinic after the first embryo transfer, he saw her unconscious and cried and cried thinking that his mother has died. He was very upset and the entire clinic came to pacify him and to explain that all is well.

Conclusion

- She was very poor, no house or land ownership, financially suffering because her husband was a drunkard for 15 days in a month and whatever her earned was insufficient for a living.
- She feels, monetarily her life has improved with the money she earned through surrogacy and egg donation, but this is not a sustainable employment.
- Emotionally she was effected but she has managed somehow by pacifying herself.
- Physically she doesn't feel that she has been much adversely affected.
- She felt demeaned by the disrespectful behaviour of the commissioning parents towards her.
- She thinks the clinic indiscriminately exploits their bodies and labour mainly for their selfish commercial gains.

2. Gracy

When we (myself and Sarala) entered her house, she was washing utensils near the entrance of the house. It was a row house with one room and a kitchen. Gracy is 40 years old, completed 10^{th} and was married soon after. She was not very interested in studies. She married when she was 20 years of age. She has a son who is 9 years old. She was involved in surrogacy in the year 2012 at Asha clinic and received Rs 4 lakhs (€5700). She and Sarala worked together at a hospital in Nadiad. She didn't know to read and write Gujarati at that time.

Before doing surrogacy, she was a housemaker at home. The household earning was Rs 6000 per month. She first heard about surrogacy from Sarala (SM3). It was Sarala who convinced Gracy and her husband. She spoke to him for hours before he got convinced. Gracy was very apprehensive about surrogacy when she first heard about it. She felt, "what is this? how is it done? I didn't feel good about it. I felt as though it's not good for the society to do something like this. My husband said the same. Moreover, my child was very small, only one year when I went for surrogacy. I was very worried about staying away from my child. My mother was there to look after my child, but it's not the same." (Photo 8 Dr. Sheela and Gracy)

No.	Year	Place	Clinic	Child(ren) born	In lakhs	CPs
1	2012	Anand	Asha	1 boy, 1 girl	4	Delhi

Motivation

"My main motivation was finance; my household situation was not that great at that time. I wanted to send my son to a good school. At that time, even if I had got lesser amount, I would have still done it. Even if they had given me Rs 200000 (\in 3000), I would have done it" Gracy said. If there was no money involved, she would never have done it.

Selection Criteria

When she went to the clinic, she was asked how many children did she have? The age of her son and "who will look after him when you are in the surrogate home?" They also took details regarding her age, her photograph and marriage certificate.

Relationship with the Commissioning Parents

She was not introduced to the commissioning parents before the embryo transfer, she met them much later. They were from Delhi, they gave their genetic material and went off abroad for 3 to 4 months. When they returned from abroad they came to meet her once during the surrogacy. They spoke to her twice on the phone during the surrogacy when she was in the surrogate home. They spoke in Gujarati, the local language spoken in this area. They told her "you are carrying our twins, eat healthy food, if you want anything let us know. If there's anything you want ask Madam¹³, don't get scared." At that time she was very thin and couldn't eat much and she had an urge to eat some different kinds of food. They told her, "tell Madam if you like any specific food from outside. They can get it for you." She refused and said she will eat whatever is given to her in the tiffin box by the clinic. (Dr. Nisha had scared her that eating outside food is one of the reasons surrogate mothers may die.)

Initially they (the commissioning parents) would call the clinic, then they started calling her up. "They would find out from Madam about the dates of the check-up and call me accordingly. After

¹³ The surrogate mothers commonly referred to Dr. Nisha of Asha clinic, Anand, as `Madam`.

the check-up, they would call me. They call her first and then they call me to cross-check and get direct updates from me about the babies and my health."

About leaving home

"I was very frustrated in the surrogate home. I was waiting for the surrogacy to finish so that I can return home. I cried a lot. My husband used to bring my son to the surrogate home every Sunday. Surrogate mothers are compelled to stay in the surrogate home."

(at this point her husband walks into the room and scolds her saying "*keep all these talks in your mother's house. Here if the neighbours hear all this, they will gossip about us*". She calmly asked him to close the door while leaving the house. He was on his way out to work. He was still muttering, very irritated with her talking to us about her surrogacy experience. She asked me to continue but requested me to speak softly, which I did. He left leaving the door open and after he left she went and closed the main door of the house.)

Rules inside the surrogate home

The rules at the surrogate home as usual, not to eat food from outside, not to go outside, not to be with the family. She wasn't troubled about the restriction from eating outside food as she was happy with the food served in the surrogate home.

Relationship with the child

"What is the point in talking about my relationship with the child, when I didn't even see the babies. They removed the children from my body and took the baby away with them immediately." She had two children; one boy (2kgs) and one girl (2.5 kgs). As the children were healthy, there was no need to keep them in an incubator, and hence the commissioning parents returned from Anand within a week. She knows that the twins will never be informed about their birth origin and hence they will never think about her.

She said, she was not sad when the children were taken away. She had been so petrified throughout her pregnancy and hence, the fact that she was alive was a huge relief in itself for her and she just wanted to return home.

Impact on her child

She doesn't want to think about the children and never talks about them because her son is very upset that she gave the twins away. I asked her how did her son get to know that she had twins. To which she answered, *"he was two years old when she did surrogacy, he saw the babies, he hears everyone talking. He's a very intelligent child."* When he used to come and meet her at the surrogate home, he would ask her *"why is your stomach so big? Why are all these women's stomach big?"* Later when she returned home, he started asking her, *"Mummy, you had two babies, where did they go? to whom did you give them? Why did you give them away?"*. When he sees her crying sometimes, he pacifies her by saying *"it is good that you gave both the babies away. You are finding it difficult even looking after me, how would you have looked after all three of us."* This child is nine years old now and has many questions about why his mother gave away her children.

Medical procedure

When she first went to the clinic she was still breastfeeding her one year old child, and hence she was given medications to dry up her breastmilk to make her body ready for the surrogacy pregnancy. "*Then I was given medication and injections to increase my uterus lining to prepare (my body) for embryo transfer*", she explained.

She says in the surrogacy procedure, the medicines and medical interventions was too much. She observes, in her own pregnancy she had not even done one ultrasound to find out about the baby in her womb. But the medical interventions in the surrogacy was a constant interference with the baby in her womb and she felt it was very intrusive to her body. As she signed a contract where she has no rights over her own body, she simply kept quiet.

She had three foetuses in her womb, the commissioning parents wanted her to keep all three, but Dr. Nisha refused and selectively aborted one baby. *"There were two girls and one boy in her womb, so Madam told there are two girls so she is going to abort one girl child. Madam insisted that she will keep only one boy and one girl in my womb".*

"All the medicines is too much. As soon as one sets foot into the hospital, the saga of medicines begins, nobody can question anything inside the clinic. I took so many injections, endlessly. As soon as you go to the hospital to stay, the injections start. Even when the transfer had not taken place, just to make my body ready for the embryo transfer I was given injections. Full nine months, I was given injections."

Emotional Instability

"I didn't feel good inside the surrogate home. I couldn't eat properly. Since my pregnancy began, my health simply only deteriorated. After the 7th month, my food intake reduced drastically. I used to get fever regularly and I also had thyroid. My health in the surrogate home had worsened. I didn't like anything there. I desperately waited for the 9 months to complete so that I can leave the place (the surrogate home and the clinic environs). First two months I was somewhat ok, then my health deteriorated badly. 15 days I would be fine and 15 days I would be in bad health. I was heartbroken inside." I asked if this was only because of staying away from the family. She softly replied that "this was also because one surrogate mother died inside the surrogate home, while I was living there." Sarala, who was also sitting there added, "one surrogate mother died and another fell seriously ill when Gracy was inside the surrogate home."

(I was taken aback as this was never reported in any media. I have been closely following media reports regarding surrogacy. The only reported deaths of surrogate mother in India was Easwari. The name of the surrogate mother who died here in 2012 was Sangeeta.)

Gracy explained, "first Sangeeta got fever, then I was told that she got swine flu. I could see her bed from where I slept in the dormitory." Gracy was panic stricken seeing all this. She felt she would also die and this feeling continued throughout her pregnancy. She continued narrating, "my caesarean and hers was planned at the same time. Our pregnancy started together. When she fell sick in her 7th month of pregnancy, Madam immediately conducted a caesarean and removed the babies. Yet, neither she nor the babies survived. She died 15 days after the caesarean." Gracy still seems petrified having witnessed this entire incident. She continued, "Sangeeta was healthy, no one could imagine that she would die."

Both the surrogate mothers were trying to blame Sangeeta for her death. They started saying, "she didn't rest, she used to eat outside food, she went outside the surrogate home. She didn't protect her ears from outside wind."

On knowing that Gracy was badly affected by Sangeeta's death, the doctor made regular visits to the surrogate home to convince her that Sangeeta was irresponsible and hence she died. Gracy said, "She (Dr. Nisha) convinced me that nothing will happen to you. You don't roam around. You are being a good girl. You stay within the rules and everything will be fine (with you)." The surrogate mothers are thus made to believe that they are themselves responsible for any adversities

during the surrogacy and hence the surrogate mothers have internalised this perception and blame the surrogate mother for any untoward incidents.

This sort of counselling actually put more fear into Gracy's mind, "Sangeeta's image stayed in front of my mind all the while. Whenever I opened my room door, I saw her bed and I could imagine Sangeeta sleeping on her bed and talking to me. I remember that always, even now." Gracy was tormented by Sangeeta's death while she was inside the surrogate home and still continues to be haunted by the entire incident.

Surrogate's mother's death hushed-up

What is interesting is that; Sangeeta's death was never reported in any media and was completely hushed up by the clinic. Sangeeta died after spending 15 days in intensive care unit in a hospital in Anand.

Gracy didn't repeat surrogacy again. Although Sarala urges her to say that she's now become old and both started laughing, Gracy continued that she didn't repeat surrogacy because her son is now older and there's nobody to look after him as her mother too has become old. Moreover her husband told her "once you went there (for surrogacy) and I feel your life was saved from a near-death situation. Your health deteriorated badly. Now don't go again."

Monetary impact

Gracy expresses that surrogacy is a wrongdoing (morally sinful act) and hence she feels that the money she received from this activity didn't remain in her hands for long. The money was snatched from her in other forms. The money didn't remain with her for long and whatever she invested on was also was lost eventually.

She explained, "*that money didn't remain in my hands*". She tried to go to Israel to work as a housemaid and paid Rs 2 lakhs that she earned from surrogacy for that purpose and took an additional loan of 5 lakh Rupees. But the agent she gave the money to, turned out to be a fraud and he is now in jail for cheating 30 women of Rs 40 lakhs.

The house she lives in presently was built by her mother-in-law for them. With the money she earned from surrogacy, she put Rs 2 lakhs in a fixed deposit and the remaining she gave to the agent for going to Israel and lost all the money. She didn't have a birth certificate and even paid extra money for getting the Israel visa.

Thereafter there was a robbery that took place in their house. The robber took two phones and Rs 10 thousand cash. So she feels since she was involved in surrogacy, some mishap or the other has befallen her.

Social Stigma

She didn't tell anybody at the time she went for surrogacy but everybody got to know eventually about her surrogacy. If anyone goes away for one year and returns with lots of money in hand, everyone comes to know that she might have gone for surrogacy. Gracy explained that she was always at home and hardly moved out before the surrogacy and suddenly she vanished for more than a year. Everybody around her neighbourhood guessed that she might have gone for surrogacy. Yet, earlier during the interview, her husband was angry with her for speaking about her surrogacy experience with me, lest someone hears us talking and gossips.

Her husband tells her, this kind of money, one cannot put for any good purpose. People around her also tell her that "this kind of money will never stay with you, you sold your womb and earned money, how can that ever stay with you."

Justice Consciousness

She would never become a surrogacy agent and take another woman for surrogacy just in order to earn Rs 10 thousand. "I wouldn't want to put anyone's life and health at risk by taking them to the clinic".

Contract Copy

No copy of the surrogacy contract was given to her. There are other surrogacy documents too that are preserved in a file in the clinic, but they don't give a copy of those documents to the surrogate mother. The contract has to be signed by the doctor, the commissioning parents, the surrogate mother and the husband before the embryo transfer. But in Gracy's case, she didn't know when they (the commissioning parents) came and when they signed the contract. "*The doctor didn't introduce me to them at that time. Actually they took my signature on three blank papers and printed the contract on the paper later. I was not given a copy of the contract later"*. I asked her if she had full trust on the clinic and if she had any doubt in her head at that point of time to which she answered, "I was not happy, but what can I do?" They showed her the contract later and explained what was written on it, but the contract was in English and she couldn't read it nor was she given a copy of it for her to translate it elsewhere.

Overall experience with surrogacy

"It's good and bad". She says this is only for people who are very poor and don't even have food to eat. But for people who are not in abject poverty such as; doing it for housing, education and health, she thinks they should never do it. "It is extremely risky with serious impact on the surrogate mother's physical health. All the medicines, medical interventions and injections is unbearable. My body exists only on the outside, from inside my body has become hollow. I can't work as I used to work before the surrogacy. I face so many physical problems now. I have terrible pain on my waist area, and also in my hands." In her hands she says the pain began with the injections and intravenous. "They gave injections on my hand regularly. I don't know whether my nerve has got crushed or what has happened."

Physical Impact

"The extent of medicines and intrusive medical procedures such as selective abortion and injections and ultrasound was painful and distressing. The medical interventions was a sickening experience." She went to a doctor and the doctor says her nerve has got crushed and there is no easy treatment for it and she cannot spend lots of money on it. Although after consultation with a doctor, she got to know that the time for for treatment has already passed, now nothing can be done. If she works a lot, such as, lifting weight with her right hand. For example, she cannot pick more than 5 kilograms of weight, as her hand pains, she also gets swelling on that hand. In short she says, "my body has physically deteriorated."

In conclusion she says, her life is going along despite several disappointments. She works as a housemaid and also as a cook, her husband sells bangles on a handcart. She is adversely affected both psychologically and physically with no monetary benefit from the surrogacy.

Conclusion

- Gracy's household was poor but they were working and having a sustainable income. She did surrogacy for housing but couldn't build a house.
- Gracy has been adversely effected by the surrogacy.
- Financially she didn't benefit from the surrogacy. She has lost most of the money she earned in surrogacy, to an agent who promised to give her a visa to Israel. Her house was robbed.
- She hence feels surrogacy is a dishonest way of earning money that doesn't stay and cannot be used for any useful purpose.
- Psychologically she has been badly effected because she witnessed one death and one near-death situation at the surrogate house.
- She is also facing health impacts from the surrogacy treatment and says her work capacity has reduced drastically.
- Her son feels upset that she gave away two babies.

3. Sarala

Sarala worked as a nurse and earned Rs. 900 (US\$12.50) per month. She was already extensively involved in drug trials before she became a surrogate mother. Her husband worked as a gardener in a Christian Mission and the Church had given him a family housing quarters to stay within the church campus. This saved them their rental money. The Church has not paid their employers salary for several years and her husband has hence filed a legal complaint on them. The case is ongoing and if they win the case, they will be paid their arrears all together. (Photo 9 Sarala in Parul's house)

Sarala came to know of surrogacy through some friends. She was unable to convince her husband about this alone. So she persuaded her brother Dhiraj to send his wife Dimpy to go along with her for surrogacy. Both women from the household set out to earn money through surrogacy. Both went to the clinic together and went through the initial clearance. However, Sarala became pregnant at the first attempt to a couple from Rajasthan and remained at the surrogate home, while Dimpy was unsuccessful and had to return home only to join her again a few months later. Sarala's commissioning parents were non-resident Indians (NRIs), originally from Rajasthan. She received Rs. 350,000 (US\$4800) for the surrogacy. Sarala has three children, two daughters and one son. She had left her two children in the hostel of the Christian mission for a year because her husband was unable to look after them at home and her mother-in-law refused to care for them. She was worried about their well-being but couldn't go to meet them although her home was very close to the surrogacy home. She had told everyone that she has gone to Rajkot. But people got to know as I didn't not return for almost a year and Rajkot is not far away from Nadiad.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2009	Anand	Asha	1 boy, 1 girl	3.5	Rajasthan

Selection of Surrogate mothers

Good looking surrogate mothers are selected more often. Muslims are not taken into easily for surrogacy, nobody wants them. Christians from outside India prefer Christian surrogate mothers. Harijans or the untouchable caste cannot become surrogate mothers easily. Although I interviewed one surrogate mother, Gunjan, who is a Harijan and she did her surrogacy from Bavishi clinic. Harijans are generally not educated or smart so they are selected easily. If the surrogate mothers are of a Patel caste or Brahmins, then they are sought after for surrogacy. They pay more for Patel surrogate mothers. Lower caste women have a very poor health standard and hence they are not preferred for surrogacy. The doctors are worried that this will affect the birth outcome and the health of the child.

There was no life or medical insurance for her.

At the surrogate home

She was 34 kilograms when she went inside the surrogate home. When she came out she was 45 kilograms.

Medication also causes the body to swell and bloat.

Experience with pregnancy

Sarala being a surrogacy agent gave a detailed explanation of the medicines to be taken during the pregnancy. The uterus lining has to be strengthened to hold the embryo. Proginova is given for improving the uterus lining that has to be taken 3 times a day. As long as the lining is not formed, transfer cannot be done. At any time at least two surrogate mothers are ready for embryo transfer in the clinic and any commissioning mother is matched with a surrogate mother with a ready uterus. There are several injections given at that time, also hormones. She didn't take any injections. She requested the clinic nurse to give her the injections reassuring them that she would self-administer them, but she never took them.

To stop infections, tablets are put into the vagina. Those who don't want to put tablets into their vagina can take oral medicines. The injections goes on for 15 days until the reports come out as positive pregnancy. Injections then continue until three months. Then again from 5th month onwards, gestone injections are given to the surrogate mothers. In case the haemoglobin level is low then they are also given syrups to improve the blood level.

She described her surrogacy experience as: "This process is so distressing that I would not have done it even if someone paid me 10 times the remuneration, had I been well-off, But I am so desperate [for money] that I would do it even if I was paid just one third the amount." She was allowed to come home for festivals only because she had a good relationship with the matron. Her sister-in-law, Dimpy, joined her as a surrogate mother at the surrogate home after a few months. Her brother and her husband would visit them every weekend and brought them some homemade food. Sarala resisted intermediary power such as the dormitory matron and tried her best within the home to improve the food and facilities. Sarala said the only time they cleaned the dormitory nicely was when a TV documentary crew came with cameras. 'Commissioning parents' never came to this dormitory as it was situated around 20 km away from the clinic. Sarala said, the food provided was sub-standard although the commissioning parents paid Rs. 6000 (€77) per month for each surrogate mother for this purpose and there were at least 10 women housed at this dormitory at the same time. When she complained about the food in the surrogate home, the matron would say, "At least here you are eating two full meals a day and not just the Baakhri [unleavened bread made of millet flour] and green chilies that you get at home, so be happy with whatever we give you." Sarala complained about the food to Dr. Nisha but it was to no avail. Sarala's husband complained that the commissioning parents were not bothered and never tried to find out about what was happening in the dormitory homes. He opined that they should take more care of what the surrogate mother eats and in what condition she lives. This surrogate home at Nadiad has now closed down since 2014.

Relationship with the Commissioning Parents

Sarala said that some of the cash and other gifts that were sent by the commissioning parents were also generally pocketed by the matron. Phone calls from commissioning parents were not passed on to surrogate mothers in order to keep control over their relationship.

Sarala gave birth to twins, one boy and one girl. and she showed me their photographs. Both were grossly underweight.

Overall, Sarala had a bad experience with the commissioning parents after birth. She tended to the babies as the parents arrived late and she was breastfeeding the children using breastpump. After the parents came and took the babies to their hotel, Sarala too left for home without waiting for payment. She was eager to see her children and husband who had been without her for a year. After a week, she called the parents and requested to see the babies and they agreed. They asked

her to wait at the clinic in the evening where they would bring the babies. She waited there patiently all day expecting them to come. She even called them several times and was assured that they would bring the children, but they never came. She waited with her son but returned home very late at night, feeling dejected. As in many other cases, the parents never called her thereafter to enquire about her or to ensure the well-being of her family and children. The behaviour of the commissioning parents changed from kindness (during pregnancy) to neglect (after relinquishment). This was observed by all surrogate mothers. Sarala remarked, "*In a way it is good that they are not in touch, otherwise I would have asked for the children to be returned*".

During the delivery

Sarala was petrified during her delivery. She experienced something similar to Gracy. "There was a surrogate mother, Anju, who was with me at the surrogate home. She also delivered at the same time as me. She got into serious (emergency obstetric) complications during her delivery. Both of us had caesarean around the same time. After her delivery Anju started bleeding profusely. As much blood transfusion they gave her, much more blood she lost. The operation theatre floor was full of blood, the entire place was stinking badly. Everybody started praying for her life. Then they had to remove her uterus and her life was saved. This doesn't happen to everyone but those who see this incident first hand, get very scared."

After surrogacy

After her surrogacy, the onus continues to be on Sarala's shoulders to provide consistent income for her family. Sarala has continued actively participating in drug trials and as a surrogate agent. She is the primary earning member of the family.

Her health has deteriorated considerably but she continues to participate in these drug trials to cover the fees of her two daughters; one is studying for an ANM (Auxiliary Nurse Midwifery) and another a GNM (General Nursing and Midwifery) course. Her son, on the other hand, has failed in 10th class. She enrolled him in a technical ITI (Industrial Training Institute) course which he has dropped out from too. She is planning to pay a bribe and get him a 10th class certificate from a rural location of Gujarat. She has three children, two daughters of age 20 and 18 both studying nursing and a son, 15 years of age. Sarala, very clearly pampers the boy child in the house and expects the girls to do all the household work while he relaxes. It is only when there is nobody in the house that he is forced to do household work. Sarala is already thinking about her daughter`s marriage. She hence falls back into the same pattern of gender stereotypes and roles; educating girls for the purpose of marriage and prioritising marriage over their career.

Some of the other surrogate mothers complained that she has become very complacent about her duties as a surrogacy agent. "I heard she takes the surrogate mothers only to fill her pockets. She doesn't inform us about the risks. She doesn't support us by coming along with us to the clinic or providing any moral support during the surrogacy", said Kamini (SM 26). Several other surrogate mothers bypassed her and took someone else to the clinic as their agent although Sarala was the first one to inform them about the surrogacy (Gracy SM 2, Kamini SM 26).

Work after Surrogacy

She could go back to her nursing job and earn 10 thousand Rupees per month but she doesn't want to work hard for less remuneration anymore. Instead, she has been more and more drawn into the body markets (dangerous drug trials, egg donation) and also as an agent for making quick money.

They don't have to pay rent for the house in which they are living. Her husband has a job as a gardener at the missionary church and they have provided this housing quarters to them for free. This is the husband's contribution to the household, but he doesn't get any regular income from

the Church authorities¹⁴, so it is Sarala who runs the house through various means. I was able to observe her household very closely as I spent a lot more time with her family. Sarala initially worked as a surrogacy agent for the clinic, but now she is earning money through drug trials and she also works as a guard in a clinical trial centre. Apart from this, she directs women into drug trial and for surrogacy as an agent and receives commission for the same.

She has realised that her body has been exploited by the clinic and by her husband. This realisation has affected her relationship with her husband. She has major fights with her husband to unresolvable levels. Ujwala mentioned that this has happened in many ex-surrogate mother's families. Some surrogate mothers have been experiencing depression, which left untreated, have also affected the familial interrelationship. She now has affairs with men and also takes financial and material favours from them in return. Her husband knows about this and they are constantly in conflict because of this.

Physical Impact

Sarala says, her body has swollen because of the clinical trials that she participates in. When she returns from any clinical trial her haemoglobin reduces and her body gets swollen.

Emotional Impact

During another interview, Sarala enquires about the mothers name on the birth certificate; "whose name is written as the mother?" She asked me, "why is the surrogate mother's name not on the birth certificate?" She is upset that the commissioning mother is registered on the birth certificate, when the surrogate mother is actually the birth mother.

Conclusion

Sarala's household was poor. No land or house ownership. She dragged her brother's wife, Dimpy (SM 15) into surrogacy.

She has now become a seasoned agent for surrogacy and clinical trials.

Sarala (SM3) may not be able to sustain her household income with this occupation. She has no alternative earning and as she gets older, she will not be able to continue participating as an agent at the same pace.

¹⁴ Sarala's husband told me that earlier they received a lot of money from abroad but when they got to know that the church authorities in India were squandering for filling their own pockets, the incoming money from abroad has drastically reduced and they are unable to pay their employees.

4. Nitya

Nitya is 35 years old, she`s a non-literate and never gone to school, now living with her husband and her four years old son in Nadiad. Her parents died when she was young. She is the only child and doesn't have siblings. It was her mother's brother and sister brought her up. She was working as a building labourer before she became a surrogate mother. There was not enough income so she became a surrogate mother.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2010	Anand	Asha	1 boy	3.5	Africa
2	2012	Anand	Asha	1 boy, 1 girl	3.5	Baruch, India

She did surrogacy first and had her son later. According to the ART Bill in India, only women who have children of their own can involve in surrogacy.

(I realised that she was very reluctantly answering or dodging some of my questions. I was wondering how could she be a surrogate mother twice without having her own children. It is only after interviewing Nitya, when I also interviewed her friend Banu (SM 5) in the presence of Nitya, I got to know more about Nitya's life experience. Banumati spoke very openly about her experience and also revealed some more information about Nitya's life. Banumati told me that Nitya was married to another man earlier and had three children with him, this was her second marriage. Nitya and her husband separated because of an extra marital affair when she was in the surrogate home for one year. The man she is now married to is a Christian, so she has converted to Christianity. She has a four year old son with him now. Earlier she was a Hindu.)

She first heard about surrogacy from a lady near her house. She became a surrogate mother twice; once in 2010 and another time in 2012. The first was one boy child for which she received 3.5 lakhs rupees, and for the second surrogacy she received 3.5 lakhs again and the second time she gave away twins; one boy and one girl.

Selection

It is the commissioning parents who chose her. When she became a surrogate mother the second time, the commissioning parents insisted that she become their surrogate mother; "because I was a Patel¹⁵, they didn't want any other woman". Before she converted into Christianity, she was a Hindu from Patel caste. In her first surrogacy, "the commissioning parents were Whites from Africa. The children were born with a fair complexion and no hair on their head". (she laughs)

Fair Pay

According to her, the money is already less, especially for the extent of risk, medical interventions and pain that she had to go through. She was willing to do surrogacy for 2.5 lakhs in 2010-12, as was mentioned in the contract. It was only after the child was born that they paid her more. "*Why would I do it for free, we were already poor, no house*" (and she laughs and laughs at the mere thought of it).

Apprehension about Surrogacy

When she first heard about surrogacy, she was confused and questioned "how can anyone have children like this?" She told her husband she will go and enquire what all this is about and how

¹⁵ Patel is a community largely known for their involvement in business in Gujarat.

does it happen. Dr. Nisha then explained the entire procedure to her. First her husband refused to allow her. Then she convinced him to go with her and speak to Dr. Nisha and eventually Dr. Nisha convinced him to allow her.

Monetary Benefit

She has invested the payment that she received from her first surrogacy in building a house with her husband and four year old son. With the money she earned with her first surrogacy, she bought an autorickshaw which her second husband drives. He earns about Rs 250 per day. She bought the land to build this house for Rs 80 thousand.

With her second remuneration she built this house. Although the ground area is only of 200 sq mts, the building has three floors, downstairs her Mother-in-law stays, on the first floor they have a studio apartment (Photo 9 Nityas house). They have built a small temple upstairs, which is also a source of income. Overall, she said surrogacy is good for poor people. (It was Banumati in the following interview who revealed the interpersonal havoc surrogacy has caused in their lives). She says, for poor households, at least two surrogacies are required to build a house.

Rules at the surrogate home

Nitya was trying to dodge my questions on her experience of leaving her family behind when she lived at the surrogate home. She told me that she was ok at the surrogate home. There were rules to stay at the surrogate home and they were restricted from going out anywhere. They were forced to eat whatever they give, "just eat and eat, how much should we eat?" They gave snacks, drinks and lot of food. They were not supposed to have any physical relationship with their husbands; it is obvious when they are bound inside this dormitory and not allowed to go out. She followed the rules, ate whatever they gave her and remained there.

She then diverted the topic and started speaking about the newly built clinic complex in Anand. (Photo 2) Since 2014, the clinic is now a huge complex in which the surrogate home, the clinic, rooms for the commissioning parents, intensive care unit for the new born babies, souvenir shops, household items shops, are all in a self-contained complex. The surrogate house is now underground and well-guarded. Nitya says "earlier it was better, the surrogate home had a small varandah and a little more space. But now although the clinic has expanded and become so big, it's bad for the surrogate mothers. Underground there is no open space, no window to look out and it's even more suffocating and depressing to live there".

(Her four year old son was very playful and emptied all the toys on the floor, much to the dismay of his mother.)

Medical Procedure

She didn't feel the procedure equivalent to sexual abuse. But she spoke a lot along with Kinjal and expressed the pain and discomfort she felt during the embryo transfer, pregnancy and the delivery. She even clarified later that she was embarrassed to share with me these details in our first meeting.

Relationship with the child

Sarcastically she said, "Whosever child it was, they took the baby away". I asked her if she had a photo of the children. She went to her cupboard and brought out a newspaper article. This was an article published in a local newspaper that described the glory of surrogacy. The article carried a photo of her, holding one of the baby and the commissioning mother with another baby and Dr. Nisha and the nurses gleaming over this achievement. She explained "This was the only time, in front of the video camera, that I was allowed to hold the babies. Just for the camera. The babies were less than 10 days old. They didn't even give me a copy of this photo." After she returned home, it was a friend who called her up to inform her that her photo was on the newspaper. It was

only then that she realised the purpose of the photo session. Now she has preserved that newspaper, as her only memory of the children.

(She began calling her friend Banumati to ask her if she would like to join for the interview too.)

I asked her about her feeling for the children, "no", she said, "we have no feelings for the children. We have no right over the child, what feeling can we have? We can't even ask them to give the baby even to hold for a little while or to play. They don't give the child. They take the babies away immediately, then what's the point talking about any feelings." "Whosoever child, they take it away, that's how it works here", she reemphasized. Thinking about them she mused, "they might have grown up by now; one boy – nine years old and the twins, seven years old".

Relationship with the Commissioning Parents

The first commissioning parents contacted the clinic a few years after the surrogacy and came to visit her at her house.

The second commissioning parents called her regularly for nine months when she was pregnant; she felt good about that. "But after that, they changed, who are you? what do you want? that's how they behave."

Surrogacy Experience

"I was very uncomfortable using the breast pump, but we cannot say anything. It's their child and whatever they want us to do we have to do."

As a Surrogacy Agent

She tried taking two women to the clinic as a surrogacy agent. They registered her name as an agent and then later took her name away and wrote someone else's name and hence she didn't get any payment for it, so she got fed up and gave up any attempt to be a surrogacy agent.

She could never encourage children in her house to do surrogacy.

Contract

She did not get a copy of the contract. She cannot read so she doesn't even know what was written in the contract. They showed the contract to her husband, he read it and asked her to just sign the contract. The payment she says is unfair and when she did surrogacy it was even lesser. Later the payment at the clinic had increased. She has no idea how much the commissioning parents paid the clinic for the surrogacy..

Conclusion

- She is from a poor household without any house or land ownership. It took her two surrogacies and several egg donations to build this house.
- It was the surrogacy separation period after which her husband and she separated and thereafter she found a new partner.
- She built a house and bought an autorickshaw which her second husband drives. She was able to put her remuneration to good use after the second surrogacy.
- There are no changes on her body after her surrogacy.
- She held her babies only once during a photo shoot.

5. Banu

She first clarified with me that if her name will not be revealed anywhere then she will share all my experience with me. She also didn't want to be photographed, which I fully respected. She is 32 years old, married with two children; her elder girl child is 13 years old and her son is 7 years old. She had her second child after her first surrogacy. The boy was born through a caesarean. Her first surrogacy she did in the year 2008 at Asha clinic in Anand. She said; she went there only once, she never returned to that clinic again.

Sarala and Banumati were living in the surrogate home at the same time.

She failed at her 8th class, "*if I had passed I would have found a job somewhere*". At that time, she said there was no value for education. After two caesareans she is making garlands at home, "*it's a back breaking job.*"

All the three friends, Banu, Nitya and Kinjal are making garlands. Now she repents that if she had studied upto 12th class, she would have got a job somewhere.

After marriage her life changed completely. She was the pampered youngest child of her house and at the in-laws house she had to do a lot of hard work and they treated her very badly. She didn't have a father so she didn't bring much dowry. They made her look after buffaloes, wash everyone's clothes, so she left her in-laws house and returned to settled in her mother's house. She has three sisters, no brother, no father, so her mother was finding it difficult to fend for herself. Later, her husband followed her to her mother's house.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2008	Anand	Asha	1 boy	3	Africa
2	2016	Anand	Asha	1 boy, 1 girl	4	Balasore

There was some discussion about surrogacy in her living complex. One lady asked her whether she would like to do surrogacy. The immediate thought that came to her mind was "no,. this is not good. I will not do this. But we had taken loans." Even her husband didn't like this, but then she felt she would have to do it to repay the loans they had taken. She didn't have a house at that time and she thought she would get a house. Her daughter was only six months old when she went away for surrogacy. Initially she felt it was a dirty work and she would not do it. She was 21 years old at that time, she had no idea about what is the process of surrogacy. But then she had made up her mind that whatever it may be, she will do it.

First she was given medicines to dry up her breast milk. She then went to Narmada, the surrogate agent in the locality. The first thing Narmada warned her was; "*I will take you to the clinic, but there is no guarantee, you may even die.*" To which she replied "*where am I am alive now, its equivalent to death. So if I die, I die, take me.*" When she went there, an assistant to the doctor told her all about how surrogacy works. At that time, they didn't even ask her any document, for age of residence proof.

At the surrogate home

"For the first time, when they were doing the IVF procedure, I felt very weird and uncomfortable, the feeling I had was almost similar to being molested (medically). I used to take the medicine, take the injections, I used to follow all the orders meticulously. I kept reminding myself that I had to do it because I needed the money." She got a positive report in her first attempt but had a miscarriage within 3 months. The heartbeat of the child went very low and then there was a

miscarriage. The first time they spoke about her creatinine level and she felt very scared and she was very young. She cried and returned home because she didn't receive much money after all this pain. *"I didn't have the courage to return again. I was also fed up"*, she said. Then the surrogate agent, Narmada called her again and asked her to come. The second time she went; the IVF transfer was unsuccessful again. "After the second time, I lost the uncomfortable feeling with the IVF procedure and got used to the intrusive medical procedure." At the third attempt she became pregnant and gave birth to twins.

Surrogate Home

She was in the surrogate home for nine months. "I used to cry and cry but remained in the house, there were no android phones at that time, so we were extremely bored inside. Some women didn't even have a normal phone. I spent the entire time crying in the surrogate home."

Sarala (SM3) and Nitya (SM8) at this point intervened and told me that Banu used to fight with everyone in the surrogate home.

To which Banu explained "usually pregnancy is a very sensitive time and here we were expected to adjust with everyone. I was unhappy in the surrogate home, I was vomiting, not happy about anything. In this situation if anyone would say anything to me, I would start fighting. I also had a habit of speaking non-stop and some were irritated with this habit of mine."

She was the youngest in the surrogate home and used to cry to go back home. The others in the surrogate home used to run their hand on her head to pacify her by saying "only some more months, then you can go home. Then when you get the money you can stay well".

At the surrogate home, she was upset that they were forcing her to drink the protein powder. She didn't like eating the protein but she was forced to eat it. They would say *"you have to drink it, you have no choice."* She did not like milk, but they would stand over her until she finished the last drop of milk in the glass. Even if she feels like vomiting she has to drink it.

The first time, her family was already disturbed after she left her family for a long time. Her husband started having extra-marital affairs ans continues to do so.

Delivery experience

When she was shifted to the clinic in Anand at the 8th month of pregnancy for caesarean section is when she became scared about what will happen during the operation. She was already informed that as she was carrying twins, it will be a caesarean. In the beginning of the ninth month, she started getting labor pains. They gave her IV for 2 days and that day her husband had come to meet her at the hospital around 12pm. She started experiencing partial blindness. (a sign of increased blood pressure and a high risk obstetric emergency). She informed Narmada about her symptoms and it was 6pm that they took her to the operation theatre. "*I was crying and crying because I was feeling I am going to die. I was thinking whether my eyes will open ever again.*" She was seeing everything during the caesarean and also talking constantly. Dr. Nisha told her to stop talking, otherwise they would be unable to concentrate on their work.

That night, she says, she can never forget in her entire life. "*It was so painful*", when she started regaining consciousness and feeling after the anaesthesia effect. Third day they took off the catheter and she didn't have the courage to go to the toilet. Then after several hours when she couldn't control her urine anymore, she went to the toilet with the help of her husband and the nurse. But she didn't have the courage to sit on the toilet as it was hurting very much. It was only after the 4th day that she started getting a little relief. "*I was dying to return home*." At that time

in 2008, they were giving only 2.5 lakhs for the surrogacy and they gave her extra 48 thousand rupees. After the surrogacy, she first went to the jeweller and released the jewellery that she had kept on lease. On returning home, she handed over the remaining 1 lakh, 80 thousand to her husband. They couldn't buy a house in that much money so they deposited that money in fixed deposit. It was only after the second surrogacy that they bought the house that they were living in and repaired it.

Monetary Benefit

"It was good", she said "because many people's life is now set. I felt it was good, even if I had money I would still go to earn more money" (she laughed).

She bought land and built a house on it. Additionally her husband asked her to buy him an autorickshaw which she did. She has also bought a second hand car on instalment payment.

Just like Nitya, she too has built three floors on a very small area. The ground floor she has rented out as a shop, because her house is road facing. The upstairs area she has rented out to a family. She also bought an autorickshaw for her husband. He simply roams around in the auto, so she told him "roam wherever you want but bring me a minimum amount every day." He couldn't do that, so she has given the auto to another person to drive to give her share every day. Now he works in a shop and earns Rs 300 every day. She's very proud that she built that house with her money. "I made that house" (she laughs). Whenever they have a fight she asks her husband to get out of the house, "this is my house". She throws food waste inside the car and when he pleads her not to throw garbage in the car, she reminds him by saying "the car is mine. I am paying the monthly EMI¹⁶ for this car. I will do whatever I want." Whenever they have an argument she taunts him by saying such things.

Her child after surrogacy

I wanted a boy child myself so I didn't go again immediately for surrogacy." Without a boy child, what will I do with all that money." After her miscarriage during surrogacy and was very worried whether she would be able to have her own child. Finally after seven years of trying her pregnancy stayed and she had a boy child. "I was so happy, now my son is seven years old", revealed her desperation for a boy child.

She had her second child through caesarean and Dr. Nisha had a clause that she doesn't take anyone after two caesareans, so she couldn't go back to that clinic. The agent Narmada was persuading her that she should come to the clinic for another surrogacy before having a second child. She assured her that after her second caesarean in the clinic as a surrogate mother, she would arrange for her third caesarean in some other clinic in case she needs a caesarean during the delivery of her own child. But Asha clinic strictly does not recruit women as surrogate mothers who have already had two caesareans.

The assurance by the surrogacy agent proves that, this is a money making business where women's life and health is only a second priority over profit making motive.

Banu told Narmada, "money comes and goes, but I want a boy child."

¹⁶ EMI is Equated monthly instalment is a fixed payment amount made by a borrower to a lender at a specified date each calendar month.

Relationship with the Commissioning parents

They were black, Africans, their name was Ola so everyone in the surrogate house started calling her Ola. They bought gifts for everyone in the clinic. They bought clothes also for the nanny who was looking after the children. The children were born healthy, so they bought four pair of clothes for her. They bought clothes for the clinic staff too. They paid her extra 48 thousand rupees which they handed over to Dr. Nisha.

She didn't have any relationship with these commissioning parents after the surrogacy. After she became more relaxed with me she revealed that she wanted to keep in touch with them but they didn't want anything to do with her. They didn't even show her the baby. After the positive embryo transfer, they became very selfish. Their selfishness was aimed towards the child. "Until you carry the baby they keep such good relationship, and after the birth of the baby, they become like "who are you?" It's better to keep a distance to maintain one's self-respect. I don't want to run after them." They called her up all the time when she was pregnant to ask, "how are you? did you eat food? eat this and the child will be happy, do this and the child will be happy, read religious books and it will be good for the child. So on and so forth". She continues irritably, "after that they don't even want to recognise us. They don't even come into the caesarean room. They don't want to come and see what condition they have made of a woman. Now when I'm saying this, I am getting so angry".

I asked Nitya (SM 4), again who was listening to this conversation if she too felt the same. "All the same story, but we cannot tell you all that, in the first meeting", replied Nitya. Banu continued unabatedly, "What I'm saying is, at least they should have a little humanity in them. They should think "we have left the surrogate mother in such a terrible condition". Tearing open our body to take the children out. At least for two days after the delivery, they can come only for our sake, just to ask our well-being, are we being looked after well? But they don't care. After the child is in their hands, their attitude changes to; who are you?"

Banu continued that after a positive result of the embryo transfer, it was different, they fully concentrated on looking after her. Every day they would call up to ask what she was doing.

She paused at this point and I had a feeling she was now starting to speak about things that she didn't initially plan to reveal to me. Her tone of speech changed. She said, "I wouldn't recommend anybody to do this. Because Nitya did it, I also did it and then I got dragged into a whirlpool that I couldn't easily come out of."

She said, "I have wasted half an hour coming here. I was not willing to come, it was Nitya who persuaded me to come for this interview."

Social Stigma

She again clarified with me that her name should not be revealed because her in-laws don't know that she was involved in surrogacy. I asked her, how did she manage to keep this secret from them and we continued talking. Surprisingly from this point onwards she spoke to me for an additional half an hour and revealed a lot more about her surrogacy experience and also about Nitya's.

She and her husband told her in-laws that she was in Israel. She prepared them (her-laws) by saying that her visa papers are in process. Everyone knows that maidservants who go to Dubai, Saudi Arabia or Israel cannot return for at least one year. As she returned with lot of money, nobody suspected anything else.

Her father-in-law passed away when she was in the surrogate home and nobody expected her to come, although she was in a surrogate home in the same city.

She then revealed to me that she had done one more surrogacy.

Her second surrogacy

After the first surrogacy, she went to another clinic in Anand. A couple from this clinic stared chasing her for surrogacy. The clinic wanted her to use her own eggs as the commissioning mother was above 50 years of age and couldn't provide her oocyte. This couple was a Patel and they specifically wanted her because she was a Patel. They insisted and chased her relentlessly so she agreed to try. The couple was from Balasore. She didn't become pregnant at the first attempt and then they chased her again for another attempt. She thought if she fails again, she would take the 25 thousand rupees and leave, but the second time she succeeded and had to continue with the entire pregnancy. This was her third caesarean and she had a boy child. The man continued calling her again and again even after the birth,. She finally blocked him from her contact list. They were an elderly couple, he was 60 years of age and she was 55 years old. This couple already had three daughters but they wanted a boy child. Each attempt only a male embryo was selectively transferred into her womb.

Their daughters are married and having their own children. They paid her 12 thousand for the egg and 22 thousand for the embryo transfer so she repeated the attempt after the first unsuccessful attempt. Being a traditional surrogacy, there was no IVF procedure, injections and medicine involved, so this option was more appealing to her.

At her first attempt, they provided her a rented house and left her by herself. At the second attempt, they sat in front of her throughout the four weeks. They would not allow her to go to the bathroom alone. They would not allow her to remain in the toilet for a long time. If she coughs they would ask her to hold her stomach. "Don't stand up, don't get up to pick the air-conditioner remote." Even if I stand they would complaint to the clinic. Until my report came they were standing on my head. They wouldn't allow me even to speak to my husband. Don't talk now, when you get the report you can talk to him. I was fed up in the 15 days that I thought I would run away home with the money if the report comes negative. But unfortunately it came positive and I had to go through the surrogacy." This was her third caesarean. This traditional surrogacy she did after her son. This was two years ago in 2016

Physical impact of surrogacy

Banu says, "we are in our early 30s and we are already unable to do any hard labour because we had been given so many injections on our arms and hips."

Husband-wife Interpersonal Relations after Surrogacy

Despite all the physical troubles, they have some money in hand, she said. But another impact of surrogacy is the impact is the familial relationship. "When we are in the surrogate home for one year, the husband who was straight becomes twisted (like Jilebi¹⁷). They start having extra marital affairs." She is thinking after all this trouble was the money good or was it better to have the husband to oneself. "If we had not gone for surrogacy, these men would have been with us." For example, she says her husband has become spoilt, "he has affairs, he takes loans from other people. I can't throw him out of the house, nor can I keep him in the house." Talking about Nitya,

¹⁷ An Indian spiral sweet made of a batter fried and steeped in syrup.

she says "see Nitya, it's the same story. When she was in the surrogate home, he fell in love with someone else and spent the monthly income he was receiving on the other woman and finally left her. My husband eats other people's money." After her involvement in surrogacy Banu`s husband got used to spending big money and he is constantly taking loans. Money lenders come to her door step demanding the money back. She has lost all the gold she had. She tells the money lenders to take everything from the house. Her fixed deposits are broken. "It was better when he was earning little and leading the family, now the entire burden on providing for the family is on my shoulders." She has also donated her eggs numerous times, "countless", she says. Whenever she wants extra money she goes there. Since three years she didn't go anywhere (body market) and they went into deep debt so both she and Nitya went for egg donation. She laughs and starts eating pan parag¹⁸. I advised her against eating this and to look after her health, to which she answered "my husband has got spoilt why, should I remain good and look after myself." And she left without saying anything further.

¹⁸ From the health point of view pan masala contains ingredients like tobacco or betel nut with lime (gutkha) which is very injurious to health and consequently may lead to cancer.

6. Kinjal

Kinjal is also a friend of Nitya and Banu. She walked in after Banu left. Nitya began complaining to her that Banu revealed everything to me and both laughed. This might have toned her down. In contrast to Banu, Kinjal spoke very less. Kinjal is originally from Nadiad and married within Nadiad too, so her in-laws and mother`s house is in Nadiad. She has four children; two girls and two boys, Her eldest daughter is 16 years old, followed by a boy 11 years old, then a girl of 8 years of age and the youngest is a boy 6 years old.

She studied upto to 9th class. She got married soon after that; "*what to do?*" (she laughs). At that time her husband was a labourer. She wanted to study further but her parents got her married and sent her to her in-law's house, after that she never got a chance to study any further.

She was involved in surrogacy twice; one in 2014 and another time in 2017. The first surrogacy was at Raipur, Mahalakshmi Hospital and the second surrogacy was at Bavishya clinic in Ahmedabad. In both the surrogacies, she was allowed to return home after positive embryo transfer. Her first commissioning parents were a couple from Raipur and the second were a Muslim couple from Mumbai.

She didn't inform her relatives or in-laws about the surrogacy. They don't live in Nadiad anymore but don't know about it. She says whenever anyone came suddenly, she would cover her stomach with a long cloth and managed to hide the surrogacy. She was first informed about surrogacy by Nitya. She didn't plunge into it, she thought about it for three years before she went for surrogacy. She went basically because the financial condition in her house was not good. She doesn't go for egg donation because she is unable to form good quality eggs she said. She would have gone for lesser money. Eventually both she and her husband agreed and she went for surrogacy.

"The selection is done by the clinic, they select the surrogate mother according to what the commissioning parents want and inform us that this is your commissioning parent."

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2014	Raipur	Lakshmi clinic	2 boys	3	Africa
2	2017	Ahmedabad	Bavishya	1 boy, 1 girl	4	Balasore

Medical Experience

"After the embryo transfer I felt as though something has gone completely upside down in my body. The stomach felt heavy; it felt as though I was nine months pregnant. This happens especially after embryo transfer because this is a child made through medicine. It's not normal. The stomach feels hard and feels like you are already carrying something heavy, even in the first few months. In nine months, the brain feels as though it's going to tear apart."

She also tried a third surrogacy at Godhra, Gujarat, but the report came out as negative.

Delivery Experience

During the caesarean they gave her an injection and after that there is no feeling, It pained a lot for ten days after that. "Naani yaad aa gayi". (A word-to-word translation of this phrase is "I

remembered my grandmother", meaning `at times of extreme distress (extreme pain) one remembers the dearest one in life`, mother`s mother).

Relationship with the clinic

She was happy with the way Bavishya clinic treated her. They didn't have many restrictions on her life. They told her, not to have any physical relationship with her husband, but she was allowed to stay at home, roam around and eat whatever she wants. They told her that if she gets any pain anytime during the pregnancy, she should come to the clinic immediately.

Relationship with the children

For the first surrogacy, Kinjal saw the children gave milk to the children through breast pump. At the second surrogacy, at Bavishi clinic, she was not allowed to see the children. "Earlier they were allowing the surrogate mothers to see the children briefly before taking them away but because many surrogate mothers became emotional, started crying, heartbroken to give away the children, they stopped showing the baby to the surrogate mothers. I have the satisfaction of having seen the children of the first surrogacy, although it was only one time. I can spend the rest of my life thinking of and remembering that one sight of the children."

But the second time, I didn't see the children at all so I always wonder how they will be looking. They transfer the children immediately away from the operation theatre in Bavishya clinic, even before the surrogate mother has the chance to request to see the children. "*They don't even show us the face of the child*", they are moved to another clinic straightaway, the surrogate mother is not informed where. She always thinks about the children. "*I feel how would they look like, I sometimes feel, if they could come and visit me, it would be so nice*", but she tries her best not to keep any emotional attachment, like some other surrogate mothers who keep crying for the children. "*It is because of some such surrogate mothers that we are not allowed even to see the children*".

Regarding attachment she says, "*I think, this was not my child(ren), it has to be given away.*" She clarifies, "look, we did this for money, why keep an attachment? They don't have children, that's why they did this. In a way its good, my body came of some use to me and for someone else."

Relationship with the commissioning parents

Both the commissioning parents didn't keep any relationship with her. Very rarely some commissioning parents bypass the clinic and contact the surrogate mothers directly. Some pay the surrogate mother regularly Rs 20 thousand per month or some amount per year. But this is totally dependent on the commissioning parents.

The first commissioning parents were good, they regularly brought her food from their home. They were Jains (a religious group that is strictly vegetarian, they don't eat onions or garlic). Later, their entire extended family came to meet her 3 to 4 four days after the delivery. But after that, they completely cut off all relationship with her.

"The second commissioning parents were probably both working so they came 3 to 4 days after delivery and met me. Sometimes later they used to call up but now they have not kept any contact."

Monetary Benefit

She spent her first surrogacy money on household expenditure.

With the second surrogacy, she bought an autorickshaw. Her husband drives this rickshaw and earns a steady monthly income.

She still lives in a rented house in spite of doing surrogacy twice. She tried to buy a house but the amount was insufficient for her to buy a house.

She now makes garland along with Nitya and Banu. They earn Rs 2 per garland, these garlands are used in marriages.

As an agent

She doesn't go to the clinic as a surrogate agent. Then she said sometimes she goes, but she didn't answer this question clearly.

Copy of the Contract

She didn't get a copy of the contract, she didn't even see the contract. The doctor just showed her the place she has to sign and she just signed it.

Nitya added, "it's all in English, we don't understand anything."

Furthermore, added Kinjal, any matter regarding money is kept very secretive. She was told that she would receive 2.5 lakhs and she got 50 thousand more for the second child.

Overall impact of the surrogacy

- Kinjal is from a very poor household. They did not own a land or house and her husband was a labourer with no sustainable income. After two surrogacies she has managed to buy an autorickshaw for him to drive and earn some sustained income for the family. But she has not been able to buy a house.
- With the money she earned in her second surrogacy, she also paid off some loans, the money has been spent long time ago.

7. Parul

Parul is 36 years old, married living with her husband and children in Shodpur village. Her eldest daughter is 18 years old, her second daughter is 14 years old, another daughter 14 years old and the youngest is a son 12 years old. (Very clearly she continued having children until she had a boy child and then stopped.)

Parul didn't study at all, her parents were not in a position to educate her. She is from a agricultural labourer family. She has two elder brothers and one elder sister. Her two brothers studied up to 10^{th} class.

She went into surrogacy just for money; their income as an agricultural labourer was Rs 200 per day. So her monthly income was Rs 6000. It was her cousin sister who told her about surrogacy. Her husband told her *"you can go now (for surrogacy) if you want to because the children are small."* Her eldest daughter was 12 years old when she went for surrogacy for the first time. But he also told her that finally it is her wish. He also visited the clinic to cross-verify if it is a nice place to stay and reassured her that the place is good. So she went for surrogacy in 2013.

The only thing that was going on in her mind at that point of time was the money, "I can die even without the house. So I thought even if I die, the children will get the money after my death." (Photo 4 Dr. Sheela and Parul)

She would have gone even if the money was lesser. She knew if she doesn't go, someone else will become willing to go for that lesser cost. So there is no choice, whatever money they gave her was a big amount, so she would have gone. But she would not have gone if there was no money. "*There is no point in risking your life for nothing in return.*" She knew it was risky but she left everything in the hands of God and went. "*Nothing moves here without money*", she emphasised.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	In Euros	IPs
1	2013	Anand	Asha	1 boy, 1 girl	4.75	6000	Bangalore, India
2	2015	Anand	Asha	1 girl	3.8	5000	Dubai

She became a surrogate mother twice; once in 2013 and then again in 2015.

She clarifies that, "*it is not a bad work. These people (commissioning parents) get children and we get money.*"

Selection

It is the commissioning parents who get to choose the surrogate mother.

Tension about leaving home

She didn't have any tension because her husband was at home, they paid a monthly salary. Her husband cooks and looks after the children when she is not around.

Monetary Benefit

She got good money for the first surrogacy because she gave birth to twins; one girl and one boy. She felt she could get a similar amount the second time, but she was disappointed that she got much lesser for the second surrogacy because she had given birth to one girl child.

Overall she says her situation has improved. She was able to renovate their present house with the surrogacy money. She paid for her mother-in-law's illness. *"Nothing can be done without money"*, she said. She educated her children. She also got the power to be able to decide and spend money which she had not experienced previously in her life.

The rules in the Surrogate home

The rules were to sleep in time, eat in time and bathe at time. They were not allowed to roam around. "*If we don't look after ourselves and follow the rules and if something happens to the child(ren) in the womb, then they will blame us.*" It is only if they follow the rules, do they get the monthly income properly. She thought about the money and obeyed all the rules. It's also a responsibility, she also mentioned that her husband would taunt her saying "you went there and stayed for so long and didn't return with any money." There was always a fear she had that nothing will happen to them (the commissioning parents), but her body will get destroyed.

"But fortunately", she ponders, nothing happened to her and she returned safely.

Relationship with the Children

She said, they were in her womb so they were her children, there is no second thought about it. During the pregnancy, during the delivery, she felt very much like they were her own children.

She still thinks about them very fondly and wonders; how big would they be now?, how will they be looking?, will they be educated?, what kind of employment will they take up in future?, what would be their interests?

"If they are in Gujarat, I would do anything to go and see them, definitely", she says.

Her three daughters were listening to our conversation. I asked her, how do her children feel about her surrogacy and her middle daughter walked out of the room. She answered that, they know that their mother did this sacrifice for their sake and the family as the household situation was bad. Her children had seen the twins but they never ask about the children.

After her first surrogacy of one boy and one girl; the boy child was with her for three months. The boy child fell sick and the commissioning parents informed her about it and requested her to come and help if possible. She didn't even have to think twice and decided to go and look after the child. As he needed special care, he was in Apollo hospital for some time and Parul stayed with the child for three months altogether, first in the hospital and then in a hotel. She also breastfed the child using a breast pump.

Relationship with the commissioning parents

The second commissioning parents came from Dubai and she gave one girl to them through surrogacy.

Both the commissioning parents don't call her anymore, *"nobody calls"*, she moaned. They didn't share their phone number with her.

Regarding the first commissioning parents, she said, they were good people, the commissioning mother's name was Sonal from Bangalore.

It was only after I probed with further questions that she started narrating her true experience and feeling.

The first commissioning mother became very possessive about the children. Parul stayed with them for three months especially to look after the sick boy child. Her husband didn't want her to go, but she insisted that her boy is sick and she has to go to look after him and that she`ll return after he gets well. So he accompanied her to the hotel and she requested her mother-in-law to look after the children during that time.

During this stay at the hotel, the commissioning mother would chase Parul away back to her room after completing her work. She expected Parul to behave strictly like a nanny and not like a mother of the children. "*Now your work is done, get out, go back to your room*", she would tell Parul. "*Don't simply come to this room*".

Experience with the first Relinquishment

She started crying. At the time of relinquishment of the first twins, she felt "*I don't want any money now, instead just give me the children* (the boy and the girl). She paused, then gave me a hi-five and laughed.

"Definitely it hurts, the children were with me for three months.", she emphasised. She felt emotionally attached to the children. The commissioning mother became very obsessively possessive about the children during those three months. She would bring the children to Parul but won't let her hold the children for long, she would take them back. After staying at the hospital for some time they shifted into a hotel. Sonal, her husband and the children were in one room and Parul and her husband were in another room. Parul's husband accompanied her because he didn't want her to live alone in a hotel room.

She didn't take their photo as she didn't have a phone at that time. But she adds, "*it's good I didn't take a photo, otherwise I would have be more and more depressed juts looking at those photos.*"

She repeated, "I felt I don't want the money anymore, just give me one of the babies. I wanted to keep the baby boy with me. I became very attached to him".

One fine day they came to her and told Parul, "we are leaving tomorrow morning". Parul became very upset, "will you take the children along", she asked. Then Sonal replied, "then what, should I leave the children with you, they will go with me." It was very difficult for her to bear this jolt. When Sonal called her saying the child was sick, she dropped everything and came running here and stayed here for months, that was the affection she carried for the children and how will be able to tolerate that she may never see the children again in her life. She started crying, to which Sonal became very angry. "Now don't cry, it is only now after so much care and time that my child has become well. Now if you cry he will fall sick again. Your negative aura will affect the child. So you should not cry" she insisted.

At that point I felt so heartbroken and sad. She had so coldly alienated me that I felt "*let them go, I don't care. Let them (the children) be happy. Let them be safe with them (the commissioning parents)*". Parul was very upset that Sonal cared only for the children ultimately and not for her. She felt, she should have told the clinic earlier that if there are two children, she would keep one child. But her feeling at that time was "*let God Bless you, you take the children and go.*"

At first she told Sonal, "don't show me the children, just quietly leave in the morning. I can't bear to see them leave." Then later, she reconsidered her decision and changed her mind. She felt, "this is the last time I would get a chance to see them ever again. Never will I be able to see them again because Sonal will never bring them to me ever again." So in the morning she went to the next room to see them. Sonal scolded her, "why did you come here? You told yesterday you will not

come then why did you come?" Parul felt very demeaned by her behaviour, *"it was inhuman. Nobody would do like this."*

"She had no value for me, only for the children. If something had happened to me, she would have said that she had paid for the surrogacy and her responsibility is over".

I asked her, why she returned for another surrogacy after such a bad experience. She answered, there were two reasons; one was she thought maybe next time she will have some good commissioning parents who will let her keep in contact with the children to balance out the hurt she experienced the first time. The second reason was because she felt greedy. She wanted some bank balance for her children's education. She got a lot of money the first time and she thought she will at least get a similar amount or more the next time, but unfortunately she says, it was a girl child so she was not paid much. The second time her husband told her that the children are grown up and she should not go again, but she went again in 2015. Her mother-in-law was also not supportive of her repeating surrogacy and yet she went. She also felt that, this was her chance to do something more than her capacity for the family.

Delivery of the child in the second Surrogacy

They brought a camera into the delivery room to take complete shooting of the caeserean. Parul's consent was not taken for this video shoot. After the child was born and taken away, the commissioning mother came back to her to ask her how she was feeling. Parul told her she is OK, but she would want to see the baby. The commissioning mother refused to which Parul pleaded "*I will not take away the baby*." The commissioning mother replied, "*you have other children at home, I have only this one child*", and left the room, while Parul continued pleading her to have one look at the baby. That was the last time she saw her. She left without showing her the baby. The commissioning father came back to her and caught her feet and told

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"but for you, we would not have out child. You risked your life for having this child. God Bless you."
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The video man who had been listening to this entire conversation felt sorry for Parul. After everyone had left, he returned to meet Parul just to show her the baby girl. "See, Parul Ben (sister), this is how your daughter looks."

They returned 15 days later to the doctor's cabin, made the payment and left without meeting her.

She feels that she was not allowed to see the baby as a punishment that the doctor gave her for becoming attached with the children in her first surrogacy.

As an agent

She would never become an agent. She is against taking anyone to the clinic for surrogacy as an agent, knowing the risk involved in surrogacy.

"If I take someone and she dies, her children will be orphaned. How can I live with that guilt. Throughout my life it will haunt me. I thought, if I die, that's ok, behind me my children will get the money. I can take that risk for myself. But I cannot put another person at risk on my responsibility."

Effects of the Surrogacy

Financially her husband tells her "if you had not gone our condition would not have improved".

Her daughter, who was listening to this conversation, told me "*I will never let my mother go again, my elder sister will start working soon.*" Even now, she says their financial condition is not that great. The majority of their expenditure is on education. Her husband earns about Rs 300 per day running the autorickshaw.

Psychologically she is very badly affected with both her surrogacy experiences but she lives with it with no psychological assistance

In terms of health, she says she`s fine. (Many other surrogate mothers told me that it takes about five years to realise the impact it has on their body.)

8. Mercy

Mercy is one of the surrogate mothers, I met in 2009-10. In my book she was the nanny for Mary's children. (Photo 5 Dr. Sheela, Mercy)

She is a widow, now 42 years old. Her husband was an autorickshaw driver. He was sick and her leaving to the surrogate home and later for nanny care had several detrimental effects on her husband's health and her daughter's life. She was brought up by her Mama (mother's brother), she never lived along with her parents. She didn't tell me clearly why. She has studied upto 5th class, her Mama never allowed her to go to school. After marriage at 22 years of age, she came to Nadiad. She was working as a cook in a church. Her husband didn't have a stable job. He was a garage mechanic; whenever a vehicle comes in for repair he will get some money, otherwise there was no income. She had her mother-in-law, her mother-in-law's mother-in-law, her husband 's three sisters and her two daughters, all living under one roof and she had to arrange for their food. She and her husband had the burden of getting his three sisters married off and think about the future of their two daughters. That's the reason she went for surrogacy.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2009	Anand	Asha	1 boy, 1 girl	2.4	Andhra Pradesh

She heard first about surrogacy through her husband`s sister. She wanted a child and tried IVF and had twins. During this process, Mercy came to know about surrogacy in the clinic.

After she completed her surrogacy, she used to work as a nanny for commissioning parents who needed this service and she also worked as a cook sometimes at the surrogate home.

During pregnancy

During pregnancy she wasn't able to sit on the floor and she was so weak that she couldn't even eat by herself. The other surrogate mothers in the home helped her to eat, sit and stand up and they brought in chairs for the surrogate mothers to sit.

During Delivery

After the anaesthesia injection, she couldn't feel anything. But when she got her consciousness back, she had lost sensation on one leg. She was petrified thinking what if something happens to her leg and she cannot walk again. She experienced a temporary paralysis on one leg for one week. She couldn't move that leg and was crying. She had experienced meralgia paresthetica post c-section (paresthesias and numbness of the upper lateral thigh area).

Social Stigma

After she returned home, people started talking bad about her character; that she`s a prostitute. Even if she has any visitors, everybody's eyes are on her house, even today. All those who went for surrogacy have been effected by this social stigma.

Impact of the surrogacy

She lost her job as a cook at the church, they did not take her back.

When she was away for one year, her elder daughter fell in love and ran away from home and married.

Her husband became very depressed after this and started drinking alcohol. After some time he started getting swelling on his foot and the doctors diagnosed kidney failure. She admitted him to the hospital and he was kept there for one month. But the doctors told her, they cannot do anything, she just has to look after him as long as he lives. Mercy and her sister did everything for his life but he didn't survive for long. Her husband's three sisters didn't help her.

Problems post-surrogacy

Physical: She says her body is wasted after surrogacy. She can't work as much as she used to before. She has slowed down. When she works, she gets tired in sometime itself. Whoever employs her say "do the work fast, why are you so slow." So her employment opportunities even as a housemaid has reduced. She doesn't many work options now.

"It is only now after 10 years that I am realising all the adverse impact of the egg donation and surrogacy has had on my body. We have to take medicines and the number of injections we took for the surrogacy, all of that has affected our body badly".

Emotional: When her husband died, his sisters blamed her for ignoring his health and causing his death. It has been five years since his death and she is managing the house somehow. She worked and educated her younger daughter and got her married off within the Christian community. The elder daughter studied upto 10th class but her husband doesn't allow her to work after marriage. He comes late at night and doesn't care for her. Although she got a job, her husband doesn't allow her to go. Mercy tried to go to Saudi Arabia. The agent took her passport and ran away. She's presently struggling to make ends meet, even for adequate food and clothing. Moreover, Mercy's husband's sisters want their share from the property. She and her husband have been living in this house along with her parents-in-law. Her husband's sisters want the property to be sold and distributed among all. She has spent a lot of her surrogacy money in renovating this house and presently there is an ongoing court case.

Relationship with the Clinic

She (Dr. Nisha) takes so much money from the commissioning parents. They pocket a huge amount and pay only 2.5 lakhs to the surrogate mother.

"The money they gave us was not enough, especially for the risk and the torture we have gone through in doing surrogacy."

For her daughter's marriage, she herself went to give Madam the wedding card, but she never came for the marriage.

"She (Dr. Nisha) has given away 1130 babies through surrogacy in her clinic (Asha clinic website record). There is nothing much that we got from this. We are as poor as we were earlier. I spoke to many researchers like you and also to media persons. But nobody has been able to help us."

"The clinic was my last hope so I went to them to ask for work, but they shunned me. They ask me to sweep and swab the floor, I have been a cook and nanny and I don't have the energy to do heavy work anymore. Madam has no time for all this. Even if the surrogate mothers go to meet the doctor, she doesn't allow us inside. She made this glass castle because of the money she earned from us. It is because we became surrogate mother that she could built this palace for herself." (Photo 2 the clinic now expanded into a complex) She says the business has gone down now. Firstly prosperity had improved generally. Nowadays not many women are willing to do this for money and since the law has come up, the business is not flourishing much. Between the surrogate mothers and the commissioning parents, it is the clinic that minded money. Narmada became a queen being a surrogate agent. They keep so many layers of people so that people don't go directly to the doctor. So that no one can blame them or file a case on them, she doesn't give any legal papers. They cut Rs 10 thousand from the surrogate mother's payment just for paying the serrate agent. The dealing with the commissioning parents is 20 to 30 lakhs and the money that reaches the surrogate mothers is only 2 to 3 lakhs.

Relationship with Commissioning parents

"They were from Andhra Pradesh. They spoke Hindi and English. The commissioning father was very sensitive. If anything happens to me, he would collapse. After the birth, they took the children and went away and never turned back again."

She also bonded with Mary, the German lady who had twins through surrogacy in Anand and was living in hiding from the German and Indian Embassy. She helped Mary bringing up the children. She was a nanny for these children and for another couple who came from Japan. "Once the children grow up and start understanding people and things, then they say "who are you? I remember these children so dearly. How I used to feed them, bathe the. They used to splash water on me. When they started to walk."

"They kept relationship for 6 months and then changed their phone numbers. They said when the children grow up, they will bring them to me at least once. But they never kept in touch When they visited India, my brother's wife cooked homemade food for all of them. But they never bothered about us after they left."

She feels like crying and also cries sometimes but "what can I do?", she laments.

She blames the commissioning parents. She says, "the children were with me, then you take them away. Why can't you keep any relationship. We don't want your Bungalow. But at least you can ask about our wellbeing, how are you? What are you doing?"

Relationship with children

She had one boy and one girl child for this couple through surrogacy. She kept the children with her for 15 days. She became very attached to the baby boy. (She showed me the photos of the children). She told me that she lost a boy child of her own. He died when he was four months old. When her son died, her in-laws taunted her that she is incapable of having a boy child. They troubled her a lot and she was very upset and depressed for a long time. She gave birth to her younger girl after the boy died. When this boy was born through surrogacy, she was very happy. (Photo 10 Mercys surrogacy baby)

Monetary Impact

Mercy had a lot of expenditure after her surrogacy. Her mother-in-law was sick and died. She spent money on her health. Her husband had sickness and he died, she had that expenditure on her shoulders too. Her younger daughter's studies and marriage expenses was on her. She built a drainage (gutter) line for her house, a gas line for the house. She also built a toilet and bathroom inside her house. Her expenditure has gone far beyond the 2 lakhs that she received for surrogacy and apart from that her health deteriorated. Post surrogacy she worked as a cook ad hoc.

Conclusion

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She is from a poor household, no house, but both her husband and wife were have a sustainable job. But they had a lot of responsibilities of marrying off her husband's three sisters, their own daughters, sickness in the family. She has not been able to buy a house. She assumed that the inlaws that she was living in would become hers and hence she never aspired to buy a house but now that may not be the case as her husband's sisters want a share from the property

9 Ujwala

Ujwala was from Bhumel, a village 9 kms away from Nadiad. She studied upto 10th and was married off in Petlad. She's now 39 years old, and was involved in surrogacy two times, once in 2009 when she was 29 years old and another time when she was 31 years old in 2011. In the first surrogacy she gave twins, a girl and a boy to Christine and Lars and the second time her surrogacy ended in a medical mishap; a miscarriage at the fifth month due to selective foetal reduction. It was good with Christine, even after the birth she was with the children for one month.

Selection

Ujwala mentioned about her experience with selection of surrogate mothers when she first went to the clinic.

The nurse came out of the doctor's cabin later and told Ujwala that "*the commissioning parents have rejected you*". Yet the embryo was transferred into her because there was no other surrogate mother's body ready with the required uterus lining at that point of time. But the transfer was unsuccessful. "I were the only match available, and hence although both me and the couple were reluctant after this incident, the embryo transfer was done and was unsuccessful". After that, she became a surrogate mother for Caroline and Lars.

I had met her commissioning mother, Caroline too in my previous research on surrogacy in 2009-10 supported by Asia-Europe Cluster, Heidelberg University, a DFG funded project. Caroline had chosen India because surrogate mothers had lesser rights over the child and their bodies, the payment was convenient and the surrogate mothers were monitored in surrogate homes. She told me that she chose this particular clinic because it did not charge any upfront payment until the baby is finally handed over. She was satisfied that the surrogate mother was paid only nominal instalments during the pregnancy. Surrogate mothers in this clinic were paid Rs 2000 (\in 25) per month and approximately 2.5 lakhs (\in 3500) when the child(ren) were handed over.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2009	Anand	Asha	1 boy, 1 girl	4.3	Canada
2	2011			a miscarriage		

Social Stigma

Ujwala's husband first came to know about surrogacy and came and told her about it. When they decided to go ahead with it, she didn't inform her father-in-law and mother-in-law. Only one aunt (her father-in-law's brother's wife) knew about it. Her brother, his wife, her mother, nobody knew about this. When she shifted to the surrogate home, her husband visited his mother's house alone a couple of times along with their son and after a few visits her mother started enquiring about Ujwala. He didn't have the courage to tell her anything. Ujwala called up her mother and explained and then she agreed. Now everybody in the neighborhood knows and there are about 15 to 20 women who went for surrogacy from this area.

Christine was a full-time professional and her husband owned a computer firm in Canada. Desperate for a child she had undergone several rounds of IVF, and explained that she was on the verge of suicide. She first adopted a girl child from another South-East Asian country. However, she wanted a boy child with German phenotypes. She had used her friend's oocyte and her husband's sperms for this process. I met her after the children were born and she was very happy that her boy child had the German features that she desired.

After Ujwala, gave birth to twins (one girl and one boy), Caroline retained her in her hotel to look after the babies while the passport application was in process. While Caroline stayed in one of the hotel rooms, Ujwala and the children stayed in the adjoining room. Ujwala was asked to pump her breastmilk to feed the children. "I got tired of pumping and removing it into the bottle, so sometimes I would stealthily breastfeed the children directly without anyone's knowledge. As a top up, Caroline still fed the children with powder milk."

Caroline had also appointed another helper to assist Ujwala with the children. Caroline paid her \notin 5500 for the surrogacy, breastfeeding and nanny work. Ujwala wanted to buy a house with the money and was falling short of Rs. 100000 approximately \notin 1300. Caroline offered to pay the money but the clinic refused on the ground that other surrogate mothers would become greedy. To fulfil this shortage, Ujwala went in for another surrogacy in the same clinic.

In her second surrogacy, Ujwala became a surrogate mother for a couple from Hyderabad. She had tried four attempts of surrogacy and it is only at the fifth attempt that she conceived. Although this is widely critiqued, this clinic continues to illegally transfers five embryos into the surrogate mother's uterus, in case of Ujwala too five were transferred. During the pregnancy, it became known that she was carrying triplets. In this clinic surrogate mothers are not allowed to carry triplets, so the doctor conducted an in-utero abortion of one fetus. Ujwala doesn't know the sex of the children she was carrying or whether a girl or a boy was aborted. Some of the risks of in-utero selective abortions include; infection, miscarriage, preterm birth, bleeding and blood pressure. After this procedure, Ujwala developed symptoms of high blood pressure (BP), infection on the uterus and heavy bleeding. Ujwala was kept in the hospital under intensive care for two months. Her BP kept on increasing and she was taken for an emergency cesarean in the fifth month of pregnancy. The babies were removed and kept in a ventilator but they didn't survive for long. Ujwala was paid Rs 35000 (€ 500) for this pregnancy. Now Ujwala says BP is persistent and has become her permanent health problem. After the second surrogacy, she became pregnant again naturally and experienced a miscarriage due to high BP. Since then, her capacity to work has reduced. She's not going anywhere to work anymore. Her husband intervenes and tells us that she goes out for tailoring classes although she doesn't keep well, she feels dizzy and falls anywhere due to her high blood pressure problem. She tries to assure him that she will be fine, but he doesn't allow her to work fearing for her well-being. He says, "no need to work, you be at home." Now she's learning some tailoring classes, so that she can work from home. Her husband now works in the mill and earns Rs 15000 (about €200) per month, sufficient for them to run their household.

She still has not bought the house that she initially did surrogacy for. Now the rate of houses has gone up and the house that would have costed them Rs 500000 (\in 7000) in 2009 is now costing Rs 2000000 (\in 28500). "If Caroline had given me a little extra at that time, we could have bought a house", she says. Now they have helped her husband's parents to build a house on the land they owned and are staying along with them upstairs with their own kitchen. The remaining money she has deposited for her son's education. After Ujwala's second surrogacy miscarriage, Shivani Kumar Shambu, the commissioning parent tried embryo transfer again with a very young girl, 20 years of age, which also failed. Ujwala has developed a permanent high BP problem after her second surrogacy.

About repeating surrogacy again

She folds her hands and says "no, never again. Good bye (Ram Ram) to surrogacy". Her husband adds "too much greed is not good". Ujwala explained "if my body goes bad and is destroyed, of what use is the money. We are not so rich and not so poor. What I earned in the surrogacy would have taken me some more years to earn but it has affected my health badly. Touch here, feel this place", she asked me to feel the place she regularly received injections during the surrogacy, an

area in her hips was all hardened. "Still this place hurts and is very sensitive to any touch after all the injections", she told me. "Sometimes when my son pats me playfully on this place, I still experience a piercing pain". They were given one of the injections continuously for a period of time, which was gestone. There were several other injections but she couldn't remember the names and she, like all other surrogate mothers, has no record of the medication she had received during surrogacy.

Ujwala told me that Nafisa (another surrogate mother had received Rs 1000000 (about \notin 14000) and a gold chain for the surrogacy, so there is a huge variation of remuneration between surrogate mothers.

If there was less money, she would still do surrogacy, but she wouldn't do it for free. She was doing it for her son's education and future, "*if I don't get any money, how will my life improve*?"

She did not have any doubts or fear when she heard about surrogacy "but, I was not informed about the injections" (we all laugh).

Surrogacy should be an open contract, "even if I cannot go there (to Canada) and meet the children, they should be able come here, find me out and meet me, that would be better. The children should be given the information that I was their surrogate mother and should be able to track me."

About leaving home

"I was very sad. First month in the surrogate home, I was very upset. I felt, I should run away from there. Then when my husband and son came and met me every Sunday, it became somewhat better." Her son was four years old when she moved into the surrogate home for one year. She again left her 6-year-old child for more than a year in 2011 fro her second surrogacy. She tried embryo transfers four times during the second surrogacy and the successful pregnancy itself lasted for five months. (It was a special case mentioned in the health effects section.)

Bonding with the children

The twins, Hannes and Lucia stayed with Ujwala for three a month. When the time to say goodbye came closer, Ujwala felt am happy to have given life to these children but was feeling compelled to give them (the children) away as a gift (to this couple) although her heart was hurting: These children are part of my life but the deal (the contract) was made right at the beginning and I had to keep it up by giving them away.

Ujwala said, "*the boy was always holding to my fingers, never leaving it. I became very attached to him*". Ujwala`s husband became very attached to the girl child. He was not willing to leave her. He was telling Ujwala, "*tell Caroline to take the boy and leave Lucy with us.*" (she laughs)

Caroline told me later that our reasons for inviting her (Ujwala) to spend so much time with us were really to help us tend to our babies better through provision of breast milk and extra babyminding. As she was obliging, our reasons could be considered selfish by some and while we also had an interest in getting to know her better and developing a relationship, sometimes I wonder if we did her a disservice as she was far less interested and attached to them immediately after they were born."

Regarding trauma after the relinquishment Caroline said, "phrases like 'give the baby away' is usually introduced by the media. But from the very beginning the doctors try to counsel the surrogates in a way that makes the surrogate aware that the baby(s) are not theirs to 'give

away' and that they result from embryos belonging to the biological parents." Ten years later, I met Ujwala and asked her about how she feels when she thinks about the children, she said "I miss them so much". She says, "who knows whether Caroline has told the children about me". She asked me to contact Caroline as I have her contact email address.

The surrogate mothers told me that this is what the commissioning parents are repeatedly told and made to believe by the doctors. Simultaneously, the surrogate mothers are constantly told that they should not bond with the baby in their womb. The commissioning parents are also told repeatedly to keep away from the surrogate mothers and resist any relationship with the

After Caroline left with the babies to Canada, the girl child had somewhat settled to the changes but the boy child was very restless: "*It can be very difficult to get him to stop crying… when the crying really escalates, he becomes apoplectic.*" She complained about not having enough assistance, she had not found a nanny, and was struggling with the children for several months until she found one (a young Filipino woman) who was dedicated and managed well with the children.

Relationship with the Commissioning parents

The First Surrogacy

With Caroline, it was all good when the babies were here in Anand and she needed the children to be breastfed and required nanny care. After that the relationship has distanced. Caroline depends too much on the clinic to keep in contact with Ujwala. She also depended on researchers like me even to show photos of the twins to Ujwala. When she got to know that I am going to Petlad, she sent me photos to my email. During my second visit in 2019, I showed Ujwala all the photos again on my computer. (Photo 11 Dr. Sheela with Ujwala and Deepti) In between, Caroline has sent her any more photos.

Since 2016, Caroline has stopped contacting Ujwala. During my recent visit, Ujwala requested me to send her an email to revive the contact; which I did but her old email address is invalid. Ujwala said, the clinic surely discourages the commissioning parents from keeping in contact with the surrogate mothers and also scares them that the surrogate mothers are greedy for money.

The second surrogacy was a medical mishap after a forced foetal reduction and didn't result in a successful childbirth. During the pregnancy, the commissioning parents constantly called her up to say "*eat well, you are like God for us*". But when her emergency caesarean took place at the fifth month, the commissioning parents didn't show up. The babies died 15 days after birth and at that time it was the commissioning father's father who came briefly.

The contract

She didn't receive a copy of the contract in both the surrogacies. Ujwala added *"if we have jumped into a well, we have to find a way out"*.

The money

She signed her first surrogacy contract for Rs 250000 (\in 3500) and at that time she felt it was a lot of money, but when the money came in to her hands, she realised it fell short to buying a house. Caroline deposited some money in fixed deposit for Ujwala's son, which he can withdraw when is 18 years of age. Caroline also paid her fees for a nursing course, but she is work after her second surrogacy miscarriage.

Whatever extra money she received was because of the commissioning parents were rich and from abroad.

Later, since 2013 the clinic started paying Rs 350000 (€5000).

It is only later she came to realise that the clinic was exploiting women. For the second surrogacy she received only Rs 35000 (\in 500).

With the clinic

They make a lot of money out of surrogacy, they have made a huge complex and we are still struggling with our lives.

10. Deepti

Deepti is Ujwala's neighbour and her friend. She's married with two children; one boy 18 years old and the younger son was 15 years of age. She first heard about surrogacy from Ujwala, but it was someone else who took her to the clinic. After she got to know about surrogacy, she told her husband and he said *"if you want to go, you go, I am not forcing you."* Initially she was very apprehensive about surrogacy and yet she went only to construct her house. She was working as a caterer before surrogacy.

She went for one surrogacy in 2014 and the second pregnancy resulted in a miscarriage in three months. The child`s pulse count became very low and then she miscarried.

When I asked if they would have done surrogacy for lesser money or no money, they (Ujwala and Deepti) laughed. Deepti mentioned that the Modi (present Indian) Government is now giving loan of 3,5 lakhs for house construction for BPL (Below Poverty Line). Ujwala said in Gujarat they also get scholarship for children's education. Rs 1000 for children studying in government schools and Rs 500 for children studying in private schools, so there is no absolute need to go for surrogacy anymore.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2014	Anand	Asha	1 girl	3.75	Bhopal
2	2016			a miscarriage		

Monetary Benefit

She has still not been able to build the house, it remains half done. The money she received was not insufficient to complete the building.

Surrogate home

She felt very bad about leaving my children and going to the home. "*I cried a lot*". Every Sunday her family came to meet her at the surrogate home. Apart from the separation, I was going through all that physical pain in this surrogacy process.

Relationship with the Commissioning Parents

Just like most of the surrogate mothers, the commissioning parents didn't keep any relationship with her. (She still looks very frail), she didn't have enough breast milk, so they arranged for another surrogate mother to provide the child with breastmilk. The stayed there for 15 days. When they didn't discuss with her before taking another surrogate mother for providing the baby with milk made her upset and the relationship between them became distanced.

Relationship with then Children

"I certainly miss the child, whenever the birthdate comes I remember the baby." She doesn't have their photo. "I carried the baby in my womb for 8 months, how would I not bond with the child. I don't have a girl child so I became even more attached to this baby girl."

Experience with the Embryo Transfer

"Yes it was an extreme form of intrusion into my body equivalent to a form of abuse. But after we sign the contract and go to the clinic, we have no choice, no say in anything. The experience was bad but we have no rights anyways. We have to our duty, as signed."

She did not describe her delivery experience.

Physical Impact

She was working as a caterer and she is unable to do that kind of heavy work after the surrogacy. Her husband works as a tempo driver, so the house runs with his income.

After the brief interview, she invited me to her house. (Photo 11: Dr. Sheela with Ujwala at Deepti's house)

11. Charu

Charu did one surrogacy. She did surrogacy because house they were living in collapsed and they wanted to reconstruct the house. She gave birth to a boy and a girl. The commissioning parents were from Kolhapur. Her husband is a priest and she does tailoring work. Both unstable works but inconsistent. So the income was not steady and moreover the house collapsed. There was no electricity in the house in the scorching heat. "My child was so upset. I thought about that and went for surrogacy." (Photo 12: Charu and her husband standing in front of the old collapsed house)

Husband Convinced Charu into Surrogacy

She had heard about surrogacy since a long time, but she was very apprehensive about it. "*What is it? And what not?*" Her husband wanted her to go for the sake of the family. She has no parents-in-law. She asked her mother and her mother said "ok, go", so she went for surrogacy.

Her husband mentioned that Charu was very scared to go for surrogacy. "She came to me and asked whether is it absolutely necessary for me to do surrogacy? She was also worried about that people will talk bad about her." But he assured her that nobody will say anything. "Who will talk? and even if they talk, why bother about them?", he explained. She tried one trail and the result was negative. Charu then went again for a second trial. He prayed to God that they would be blessed if it is positive this time and it was positive. Her husband described, "I struggled cooking, making chapatis for the children, waking up early in the morning. I washed their clothes. For ten months I did this because she was there. I became the mother and father for the children. Then we got the money. We spent 2 lakhs on building the house. My elder son can get married in this house." (Photo 13: Dr. Sheela with Charu in their new house)

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	20	Anand	Asha	1b 1g	4	Kolhapur

She would have gone for surrogacy even for a lesser amount. She had made up her mind, with her husband's request and the condition of the house was enough motivation for her. "Anyways there is so much of uncertainty in surrogacy. I didn't even know exactly how much I would get in the contract. I had not read it. I am illiterate. If there is a miscarriage, if the trial fails, anyways the payment is so low. It is fate." There were two children and that's the reason she was paid 4 lakhs. If there was no money, she would never go, "who goes?" she asked me.

The clinic did not give a copy of the contract to her. "All the documents and file will be with Madam, she says."

She would never do it again because her children have now grown up and it is embarrassing carrying someone else's child in front of them. "Earlier they didn't understand what it is. But now they know what surrogacy is."

Selection

They don't get to choose anything. "Whatever Madam gives, we have to take. How do I know what is the nature and behaviour of the commissioning parents. So she shows us that this is your commissioning parents and we have to accept, nothing else."

About leaving Home

She was very sad about leaving her children. Her elder son was in 6th class and the younger boy was 7-8 years old. Her husband had to do all the cooking. Her younger son walks into the room. He studies in 6th class, she introduces him. (she laughs). "*He was very small when I went for surrogacy. He used to ask for me all the time, when I was there.*"

Experience with delivery and the treatment

She had a caesarean. She didn't have any problem, she says.

It is important to have a good toleration to pain. The process is very painful. (she laughs) The injection pains for a few days and then it becomes OK:

Relationship with the children

"*I remember them every new year. They were born on 1st Jan.*" They showed her the children and then she was shifted from the operation theatre to the clinic surrogate hostel. Thereafter they never showed her the children. She continued extracting her breastmilk using a pump and the commissioning parents would come three times a day to take the milk. She was in the clinic and they were in a hotel.

Relationship with the Commissioning parents

"They never keep in touch. If they had been in touch, it would have been good. I remember them, but they don't call, what can I do?" If they had come just once again to show the children before they left, she would have felt so good. She cried after they left. They showed her the babies for a few days, then they went away. They didn't come to say goodbye. So she feels sad.

Monetary Benefit

With the 4 lakhs they rebuilt the house. There is still some work pending, but now she feels her son has grown up and he can earn and finish the pending work in the house. Earlier in the cold and rain, her children were sleeping outside. It was a time of sorrow. (Photo 13: Dr Sheela talking to Charu in her newly built house)

Her elder was studying 3rd year in retail management course. The younger son is studying in 12th class.

Conclusion

- She is a land owner, but her husband has a very low paid and unstable job and he is the only earning member. They had an old house on that land which was destroyed due to wear and tear. With her surrogacy remuneration, they built a new house.
- It was her husband who convinced her into surrogacy.
- She bonded with the children and would have been happy if the commissioning parents kept in touch with her.
- She made up her mind to tolerate the physical and psychological pain for the sake of her family.

12. Kaavya

One of the first things I was told when I entered her house was that she is an orphan. Both her parents died when she was young and she was brought up by a neighbouring family. She studied only upto 8th class. Her mother fell sick and she had to drop out to do housework. Her father had already died and she was the only child. Her father died when she was one year old and her mother died when she was 11 years old. She grew up with a neighbour in Karamsad, Anand.

Her husband is working as a security guard at in Nadiad. She has always been at home as a homemaker. Her husband earns Rs 6000 per month. When they married her husband's earnings was Rs 5000. But since his mill closed, he took another job as a security guard. Hence she suggests that post surrogacy too, they should get some kind of pension possibility.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	In Euros	IPs
1	2013	Anand	Asha	2 boys	4.5	5800	Jaipur – NRIs
2	2014	Anand	Asha	1g	4.5	5800	Ahmedabad

She did surrogacy mainly for rebuilding the house. She had a house but it was a Kachcha house. She also wanted to educate her children well. For the first surrogacy she went for Rs 3 lakhs and she received 4.5 lakhs finally including all the monthly income. Her first commissioning parents were Brahmins from Jaipur. Her second commissioning parents were from Ahmedabad, India. The second surrogacy too she received 4.5 lakhs. The first time the babies were premature and the babies had to be kept in an incubator. The commissioning parents incurred excessive additional costs and hence they didn't pay her much more than the original contract.

She went for surrogacy twice; once in 2013 and again in 2014. She first got to know about surrogacy from the neighbourhood. She told her husband that she would like to go and he immediately agreed. She had to tell her mother-in-law as her children were small. Her mother-in-law was not happy that two of her daughters-in-law had gone for surrogacy. Someone was needed to cook and take care of them. At the surrogate home, she thought they teach tailoring, computer skills, but there was no such training held there and she didn't learn any additional skills. She reiterates that if the condition of her house was well-built she would not have gone for surrogacy.

If the money was lesser she would have gone, but she would never have gone if there was no money. When she went for the second time, everyone in her family knew and they were very worried about her health and well-being as she had become very frail.

Social Stigma

She lied to all her neighbours that she is going to Rajkot to work. Her sister-in-law (her husband's sister) is in Rajkot, so nobody suspected anything initially. Even the two other daughters-in-law of the family did not know about her surrogacy when she left. Her husband and mother-in-law were the only ones who knew. But when she didn't return for one year, her family members were doubtful and came to know about her activities. It was only during her second surrogacy when she visited home during her pregnancy that everyone came to know. "Then whatever people had to know, they got to know. It doesn't remain a secret forever."

Selection

The surrogate mothers do not get to choose the commissioning parents. But the commissioning parents can choose. Her commissioning parents were worried mainly whether her body was fit to carry the pregnancy. But not all commissioning parents have the same criteria; some want height and some other prefer fair complexion. Some commissioning parents also look for specific caste and religion. When she was a surrogate mothers she saw some surrogate mothers were rejected by commissioning parents because she was dark in complexion, while some others don't look for these characteristic.

Experience Leaving home

The first time she cried a lot, "but what to do, I had to do it for the family". Her husband came every Sunday along with the children to meet her. She would become happy seeing the children and then again feel sad after they left. "It would be better if we were allowed to be at home with our children."

Experience with Embryo Transfer

First time she was very scared and she felt very uncomfortable with the insensitive medical procedure. But it was after three IVF trials that she got a positive result. So she got used to the procedure after 3 trials.

The second surrogacy too, she became pregnant only at the second IVF trial.

Experience during Pregnancy

She felt the babies very strongly when they were inside, especially the twins. One of the baby would rise up to her chest and kick. Seeing this the other women (surrogate mothers) in the home would also come to her to touch the babies.

Experience with Delivery

There was no miscarriage. Both surrogacies were normal. "*I delivered even before they could take me to the operation theatre*." (she laughs) When the 7th month came to an end, she had gone to sleep one night and she started bleeding. Madam said she will delivery soon and she did. Both the children were of lower weight; 2.5 kilograms each.

She is proud of her birthing capacity as both of her surrogacies were normal deliveries. It was one of the rare cases when a surrogate mother had given birth through normal delivery. She proudly said that Dr. Nisha also praised her for being the only one to have had normal deliveries. The commissioning parents said that in their house all the women in their household delivered at the 7th month, hence that's the reason why Kaavya too delivered in the 7th month. Kaavya notes that it's also probably because they were twins.

The second delivery she got fever at the 8th month and Dr. Nisha told her she would deliver soon and she did.

Relationship with the clinic

"After we have signed the contract, we cannot speak. Whatever is the hospital rules, we have to follow. We can't speak to Madam regarding any matter."

Regarding the child, she (Dr. Nisha) tells categorically right in the beginning, "you will get so much money, after that don't ask for anything. If you say we will not give the child, that is not possible. So we can't do anything or say anything. We are not given a copy of the contract. It remains with the commissioning parents and Madam. Even regarding the payment, it is only when

we hear the commissioning parents and Madam speak to each other, we sometimes overhear about huge amounts of money transfer. The payment too is not enough."

Relationship with the children

She became attached to the children. At this point of the interview, Kaavya asked me if I was married and had children. "If the baby inside was peaceful, I was also peaceful. If they were restless, I would be restless too."

A few minutes after the first baby boy, the second child was born. Then she asked what child was born and they said it's another boy. Both were long and superb babies. "They took the babies away to the children's hospital immediately."

Her sister-in-law adds that she saw the babies through glass door. Kaavya was shifted to the children's hospital on the third day to provide breastmilk to the children using a breast pump.

The sister-in-law said. Kaavya removed her milk with the breast pump and the children would be fed the milk using a bottle. "We are also not allowed to feed the babies with the bottle. We have to keep away from the babies. Only the commissioning parents are allowed to feed the babies. The appointed additional nanny can take the bottle inside the baby's room. We are not allowed to enter that room, even to take milk for the babies."

Kaavya added, "we are not allowed to move without permission. Only pump the milk and give it. If some commissioning parents are nice, they allow us to sit near and play with the babies." (Photo 15, Kaavya's surrogacy children)

Her sister-in-law said, I was in the new building and the babies were kept upstairs. All of us (the surrogate mothers) were in the basement. "Sometimes the commissioning parents came down to show me the babies. We feel alienated, but what to do. They gave us money for doing this. We are not allowed to put the children to our breasts." They say the children will get restless later.

Kaavya says keeping the babies in her womb for nine months made her feel immense attachment towards the babies and depressed thereafter when they are gone. She was very disturbed when she was saying "we are told that it's not our child so we should not feel sad. So long as the baby is inside we are supposed to consider it ours and take care of the baby, eat sleep, live only for the wellbeing of the child growing inside. After it is out, it should not be considered mine."

Second Surrogacy

I asked her how was her experience with the second surrogacy child. To which her sister-in-law answered "she cried a lot. She was very upset. She was a very cute girl and Kaavya cried saying "give her to me". Kaavya added, "giving away the baby is very sad and most difficult experience of surrogacy."

Kaavya explained that this commissioning couple had transferred embryos simultaneously into two surrogate mothers. Both the surrogate mothers became pregnant with one baby each and both gave birth to one girl child each.

They took the baby and walked away immediately. She breastfed them using a pump for 15 days. She keeps thinking about them, what would they be doing?, how would they be?

Relationship with the commissioning parents

She lost their contact when she lost her phone and she doesn't have the courage to ask the clinic for their number. Even if she asks , she is sure that they won't give it to her.

The second commissioning parents were very crude, they walked away as soon as the baby was born, they had nothing to do with her. The first commissioning parents too walked away from her soon after the delivery but they did take some interest in her when she was pregnant. Buying food for her and bringing it to the surrogate home, putting credit in her phone so that she could speak to her husband and children. I don't know if they would ever think about me, she says and becomes sad.

Monetary benefit

All the money that they pay has to come through the clinic and they control the payment. Otherwise she says, the commissioning parents would have paid her more. We can't argue or bargain because we are supposed to take quietly whatever we agreed for in the contract. The contract was for 3.5 lakhs, they paid her extra 1 lakh. 25 thousand is paid to the surrogate on the successful completion of 4th month and another 25 thousand on the completion of 6th month of pregnancy. This payment is supposed to be cut from the final payment but sometimes the commissioning parents don't cut this amount. (Photo 16, Kaavya and Vedha's house)

With the first surrogacy amount she built the house, but the building constructor cheated them and hence they lost some money. The house building remained incomplete. So Kaavya had to go again and put the entire money into the house. Now they have no money remaining with them, they spent everything on the house.

The payment is unfair she says, "but what can we do. They (the clinic) may be taking a lot more from the commissioning parents."

Health impact

Kaavya said she will not go again for surrogacy. The sister-in-law emphasises that even she wants to go, the other family members will not allow her to go. She observes that Kaavya's body has become very frail since she went for surrogacy. She adds "She has become so thin, if she dies what will happen to the children? Just for money going repeatedly for surrogacy is not good. We will not allow her to leave the house. If there is no money, no problem." The family members were saying that she has become weak after surrogacy. Earlier she was better. Now she has dark circles under her eyes, she has lost interest in dressing up well. She eats very little food, just two chapatis.

Her husband who had just walked into the room agreed that she has become very thin after surrogacy. Her husband justified that initially he refused to let her go but then on asking other people about surrogacy, he allowed her. But since she returned and especially after she went for a second surrogacy, her body has deteriorated. Her husband notes, "*it is because of repeated pregnancies and deliveries on an already weak body.*"

The referred photo shows how she looked when she got married and her present frail look now. The photo has Kaavya, her sister-in-law to the left, Sarala along with the author.

Kaavya said, she would never want to see the next generation go for such thing as surrogacy, as it is a very painful process in all ways, physical and emotional.

Conclusion

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- Kaavya and Vedha (SM 13) are sisters-in-law of the same family. Their husbands are brothers. They live in the same complex and have built two house adjacent to each other. (Photo 16).
- Both are land owners but her husband has a low paid, unstable job. Hence they will be considered as poor

13. Gayatri

Gayatri did her surrogacy from Bavishya clinic in Ahmedabad. This is a clinic, without surrogate homes.

Gayatri is 36 years old and has studied up to 10th class. She was brought up in Mumbai. She has one sister. She was married off after her 10th class. Her husband has also studied upto 10th. She has two daughters 14 and 16 years old.(Photo 17, Gayatri and her daughters)

They had a small business of undergarments which was running fine but suddenly they incurred loss in it. Additionally they had taken some loan for his sister's marriage. She had to do surrogacy to repay this loan. The second surrogacy she did to save some money for her daughter's education.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	In Euros	IPs
1	2009	Ahmedabad	Bavishya	2 girls, 1 boy	3.5	4500	Gujarati- NRIs
2	2012	Ahmedabad	Pulse	1g	3	3800	Within India

Relationship with the clinic

- There was cameras fixed in every room inside the clinic, so everything was constantly monitored. They were strictly not allowed to discuss about the remuneration except with the doctor. They were not allowed to tell anyone in the clinic that they are doing surrogacy and cannot share their contact address with anyone. They were not allowed to speak about their remuneration with the commissioning parents.
- He allowed the women to stay at home with their family, but there was constant scrutiny on their activities by clinic agents.
- He didn't allow the commissioning parents to meet the surrogate mothers.
- He strictly didn't allow the babies to be shown to the surrogate mothers.

Experience with Pregnancy

After the third month of pregnancy, Gayatri (the surrogate mother) was informed that she was carrying triplets. The clinic asked her opinion (for a possible selective in-utero abortion) and she left the choice to the commissioning parents. The next day she received a call from Jignesh that she should keep all three babies and both agreed on the condition that he would pay her extra (Rs. 50,000) for each extra baby. During the seventh month, Jignesh found out that the clinic was over-charging him so he contacted Gayatri again and requested her to break-off from the fertility clinic for which he would give her double the agreed amount, After giving it some thought she agreed to this condition too. The tension began when the clinic found out about this and started harassing her to come to the clinic immediately. Gayatri was worried that they would conduct a caesarean on her in order to control the monetary transaction by holding on to the babies.

"I was very confused", she told me, on one hand the clinic personnel began warning her, "If you disassociated from us and anything happens later we are not responsible". While on the other hand, Jignesh was reassuring her by saying, "If you trust me, I will give you the money even before the delivery". He gave her the contact of a new clinic where she should go for delivery and she obliged. (Photo 18: Gayatri with her two girls and carrying the surrogacy triplets)

She felt the movements of the triplets and bonded with them.

During her first surrogacies her two daughters were 6 & 4 years old and during her second surrogacy, her daughters were 12 &10 years old. They knew that their mother is doing this for them and so that they have a better life. They were very tensed during her surrogacy and afterwards. Whenever Gayatri is happy, they are also happy, so she tries not to think about the surrogacy children.

Relationship with the Children

"I don't think about the children much, I supress any thought or negative emotion that emerges. I just move on with my life. I'm also busy with work and my children now. But when I have nothing to do this all this suppressed feeling will erupt."

- She wonders how would they have looked like.
- She scolds her husband for not taking the photograph of the children before they were taken away to the children's hospital.
- The second surrogacy, she did see the baby girl just once.

Relationship with the Commissioning Parents

On the day of delivery, in the morning, Jignesh and Trupti arrived from America. Immediately after the caesarean they took the babies to another hospital.

Almost until four days after the delivery, the couple had not returned to check on Gayatri nor was there any talk about the payment. Gayatri's husband became anxious and started contacting Jignesh for the payment. Jignesh told him, "Now he can pay Rs. 75,000, the remaining money I will give later". After few days they received a call from him asking "how much more money should I pay you?" They were confused by his question and told him "whatever you promised us over the phone". He then began making excuses to Gayatri, "I am a very poor man; I don't have that kind of money now. Now I have only Rs. 1,00,000, the remaining I will pay when I return to America". They had no other choice but to accept what he was saying.

Gayatri told me, "*I felt very embarrassed firstly because he is a man and I felt uncomfortable demanding money for his children I had borne*". That was the last time he ever contacted them, even nine years later there is not even a phone call from him, the telephone number and address he shared with Gayatri and her husband did not exist, and the local Indian mobile number he had given them soon became invalid. She was very keen to see the children but they didn't show her the children. She was not paid extra for the babies or for shifting clinics, she was eventually paid an amount lesser than she was originally promised at the Bavishya clinic.

She repeated surrogacy because, she said, "I had gone through so much misery once (by participating in surrogacy) just for the sake of my children and I was willing to go through it again to save some extra money for my child's education".

She repeated the surrogacy process in another clinic as her requirement to buy a house had not been fulfilled. A few months later as a retrospect she added, "*I carried his babies for nine months and he (the commissioning father) didn't even drink a glass of water in my house*" (Saravanan and Ranadive 2010).

The second commissioning parents, she met them only once. After that they never contacted her again.

Contract

A copy of the contract is not given. It's a highly risky agreement. It's all left to fate, if anything happens it happens, there is no protection for the surrogate mothers.

Monetary Benefit

- She built a house in the village with the first surrogacy remuneration. She said, she cannot even imaging buying a house in Ahmedabad with the money she received in surrogacy.
- With her second surrogacy, they bought a scooter on a monthly payment:
- She and her husband are both involved in the body market, especially in clinical trials.
- She runs a catering group. Whenever there is any order she assembles all the workers and goes as a serving group to parties and functions.

14. Nargisa

In 2009 when I first met Nargisa, she was a homemaker.

It was through egg donation that she got to know about surrogacy. A nurse staying near their house saw their poverty and coerced her into surrogacy to get rid of poverty. Her husband was keen that she do it.

Her husband is a fruit vendor and could earn only Rs. 100 per day. "The cost of living has gone up", he said and his earnings seemed to be just enough to meet the daily expenses.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2010	Anand	Asha	1g 1b	4	Tamil – NRI

Her family consisted of her husband and their four-year-old son. Nargisa's husband was a fruit vendor and could earn only Rs. 100 per day, but the cost of living was increasing and this money was barely enough for daily expense. She was confident that they could continue to earn a living with this income but she wanted some sort of stability. Buying a house could save them from paying rent which was Rs. 500–1000 per month and their earning was Rs 3000 (€39) per month (Rs 36000 per year - €460 per year).

She has been an egg donor four times before surrogacy and four times after surrogacy. Now she has left everything because she feels this is a sinful act and the money earned through body market doesn't stay.

She told me her husband found this to be an easy way to make quick money and hence he pushed her into all this body market.

When she first came to the clinic, she was explained about the surrogacy procedure and both she and her husband were required to undergo a blood and urine test. It was only on the fourth IVF trial that Nargisa became pregnant.

Financial Impact

Nargisa earned Rs. 400,000 (\in 5000) for the surrogacy and bought the house she had been living in, situated in a squatter settlement. She wanted some sort of stability and buying a house could save them from paying rent which was Rs. 500–1000 per month.

The Children

Nargisa had delivered twins through caesarean, a girl and a boy for an NRI (Non-resident Indian) couple. "*With twins, there was no chance of a normal delivery,*"

For more than two months the commissioning parents were at a hotel waiting for their children's passport and she was providing breastmilk to them using a pump.

"They feared that the children may get infection, and so they preferred to keep them with themselves in a hotel nearby. The husband came two times a day to fetch my milk. When they are inside my body they don't get any infection, but the minute they come out I become a source of infection for them"

Relationship with the commissioning parents

"They had told me that they will keep relationship, so I have given them my address and phone number and told them don't send me anything but just send me the photos of the children every year, I want to see them as they grow."

In the surrogate home

She told me how selfish she felt the clinic and the commissioning parents were in the rules that were imposed on their movement within the surrogate home, the food they ate, and, in her case, not heeding to her pleas regarding breastfeeding and requests to go home.

Within the clinic, the top floor had a few dormitory rooms and some private rooms. The surrogate mothers were not allowed to use the stairs. They could move between floors only using the lift and with the assistance of the nurse who operated the lift with a code number, "because it is other people's children we are told to be extra careful".

Nargisa had to stay at the surrogate home for several months. She resided very close to the clinic, so she requested the doctor to allow her to go home on the pretext that her in-laws were creating problems due to her absence, and she was allowed to go home. She persuaded the doctor that her community was conservative and would stigmatize her if she was away from home for a long time; hence, she was allowed to go home between the second month and fourth month. When her pregnancy started showing she came back to the hospital to avoid social stigma against surrogacy. She says she was one of the rare persons who were allowed to go home, because of her quiet and submissive nature. Every Sunday her husband and son were allowed to meet her. She was restricted to the first floor during her entire pregnancy and came down only for check-ups.

After a few weeks after the delivery, she became fed up of supplying milk and not being able to see the children. "I felt I don't want any extra money, I just want to go back home, I was fed up of staying here especially when the surrogacy children were not here with me. At least I could go back to my son. I couldn't tell the doctor this, I was scared."

She was also apprehensive and uncomfortable in using the breast pump.

Payment

Nargisa was paid Rs. 400,000 finally, for breastfeeding and a extra payment made by the commissioning parents for twins.

The amount she was told for the surrogacy was 3 lakh, but she said "Madam asked for more after birth keeping in mind our poverty". At that time, she felt it is a blessed deed *'punya ka kaam'* because she got some money to buy a house and someone gets a baby they want.

But after the surrogacy she immediately started feeling she would never do it again, "usme bahut magajmaari hain (it's too complicated)".

Eventually neither could she put the money to any effective use, nor ddi she feel it was a noble cause. She stated feeling that this was a sinful act that she had done by renting her womb and selling her baby.

The doctor of this clinic had been speaking on TV interview about how she helps the surrogate mothers with school books using a surrogate mother's trust fund she had set up. When I asked Nargisa she said, "I never go there, she's (the doctor's) giving away cheap things that we can easily buy from the shops ourselves, why should we go there for taking those books. Women who

are extremely poor may go. Maybe if she pays for school uniforms or pays part of our children's school fees, it would be useful".

Nargisa says her commissioning parents only spoke Tamil and English so she couldn't speak to them. Even she was present with them when they were having a discussion with the doctor, she never came to know what they spoke to each other, or how much is the transaction that took place between the two parties.

Financial impact

Soon after the surrogacy, she had bought the house she had already been living in, situated in a squatter settlement.

After seeing big money she earned through surrogacy, her husband became even more greedy and kept asking money from people. They aspired to educate their child in a good school and hence their expenditure has surpassed their actual earnings. The house they bought had to be sold. They are now living with Nargisa's sister.

Regarding the commissioning parents

"It has been ten years but they have not called me once; Ehsaan Faramosh (ungrateful)". Since ten years, Nargisa had not changed changed her phone and sim card, but she has kept her old phone and the number hoping that they will call one day and let her know about the well-being of the children.

The commissioning parents cheated her by assuring to keep in contact with her but never called up after they left Anand.

Her emotional need has always been considered secondary to the desires of the commissioning parents; she was forced into using a pump to extract her breast milk, although she was finding this extremely uncomfortable and despite showing a lack of interest on the extra money given for this purpose. Her urgent need to return to her son was ignored.

"We are not allowed to speak to the doctor or the commissioning parents regarding anything. There are middle persons to whom we are supposed to speak."

Delivery & post-delivery

The injection she was given on her back bone during caesarean was painful and very scary. Nargisa said, she was shifted to the children's hospital the third day after the delivery. She was expected to walk to the lower floor where the child was kept in an incubator in order to pump out her milk and walk back to her room on the upper floor. Immediately after caesarean, it was painful for her to climb up and down several times during the day and night to pump out milk for the children.

Within an hour after pumping, she would be called to pump her milk saying the children are crying. After 8 days she was shifted back to the surrogate home above the clinic and continue pumping milk three times a day. She was given a worse bed to sleep. When she was pregnant she was given comfortable beds to sleep but when she returned from the children's hospital she was given a bad bed. The treatment changed from good to bad to worse. She was expected to continue providing milk to the child for one month from this hospital. Nargisa fell sick with blood pressure. This bad treatment along with the fact that her house was very close to the clinic but she was not allowed to go home even after delivery, made her further sick. Nargisa's sugar had reduced to such an extent that she was afraid something would happen to her.

She says she was used for the child and then for breastmilk and then thrown to take care of herself.

Nargisa went for egg donation four times before surrogacy and four times after surrogacy.

Financial impact

When I met Nargisa again after 10 years, she said "our condition has gone worse than what we were before surrogacy", "why is it so?" she asked me. She herself answered me saying "people are saying, this is a bad way of earning money, ye paisa kabhi tikta nahin hain", (this money never remains). This is a quick way of making money. It's a dishonest work."

She said "many surrogate mothers in Nadiad and Anand are saying the same thing. We were very good before surrogacy. Even if 15-20 people come to our house as guests we could manage. But now it's one of the worst times."

"We took some loan after the surrogacy, the house that we bought went off, the money too went off." They had to sell the house to repay the loans. She's now staying with her sister who is comparatively affluent.

She asked the doctor why she wasn't paid more for twins, to which the doctor answered "that's your fate". Nargisa questions "but her fate was good, because she gave two babies and she got more money for it, but she didn't pay me much for it".

The other question she asks is that "then why do they keep 5 embryos, why didn't they keep only one embryo."

Her husband is a greedy man asking money to anyone and everyone. He has taken several loans. He does not want to work hard to earn less money anymore and she refuses to go for any more egg donation or surrogacy.

She is fed up of her husband's behaviour but she is unable to manage him.

Physical Impact

"How I suffered for nine months, only I know. So many injections, so many IV bottles, two times I was given huge injections into my stomach, they took some water out from my stomach during the pregnancy. How much risk I have taken and for nothing. We sign a contract for 2.5 lakhs." She says it has had a very bad effect on her health and she is working as a housemaid and earning to whatever extent.

Body Market

I donated eggs so many times. Now I have stopped everything. 4 to 5 times I donated eggs, then I became a surrogate mother. Now I don't go there anymore. Because that money doesn't remain in anybody's hands. This is bad money. She kept repeating the sentence as though reminding herself again and again that this is dishonest money and she repents having ever done it.

Relationship with the clinic

Dr. Nisha, she says "has made a palace for herself, she paid us so less. She used to give bags and books for the surrogate mothers but that too has stopped now." She says she gives us these things

from her own money, but she takes donation from elsewhere to give us the bag and books. She has spent 15-20 crores (\notin 2000000 to 2500000) for the new hospital complex. Its a full-fledged loot (plunder) that is going on at the clinic. She (the clinic doctor) was taking Rs 11 lakhs (\notin 14000) for one child. Rs 18 lakhs (\notin 23000) for two children (twins).

"We feel terrible about the way we were treated but what's the point in talking about this to the clinic. Anyways she is a big Madam, she's very influential." "Madam invited all the surrogate mothers to her daughter's wedding but I didn't go."

Relationship with the commissioning parents

"The commissioning parents are not bothered about calling us up. When we asked their contact, they didn't even give their phone number. They didn't give any contact. They just took what they wanted (the children) and walked away."

Nafisa's husband said, "we asked her (Dr. Nisha) to give us the phone number, address of the commissioning parents, why didn't she give it to us? Now what work do we have with her?"

Consent

Nafisa said, "five embryos were transferred into my womb. Three embryos progressed to successful pregnancies, she killed one foetus in-utero. What do I know which embryo, was it a girl? I only know I finally gave birth to one girl and one boy. Who knows what was the sex of the foetus that was aborted. I wasn't told or informed anything about the sex of the child. I only know that one was killed within the womb."

"Moreover they take it in writing from us that even if you die, it's not anyone's responsibility but yours. There's no medical insurance. Why can't she take responsibility of the maternal health of ex-surrogate mothers. Isn't it humanity to do so."

Experience with the delivery

"As soon as the delivery is done with, the children are taken away. It's all marketing. As soon as the delivery is over, they even snatch the bed away from us. They toss you here and there and they don't give the surrogate mother any importance after the children are born."

Nargisa told me that Ujwala (SM9) also experienced the same problem. During her second surrogacy, did she tell you how they selectively aborted her one fetus and all the foetuses died in the process and she didn't even get money for it. She removed the remaining two babies pre-term because their heart beat had reduced. They gave her only 35 thousand rupees for it.

"Here it's all her (Dr. Nisha's) wishes, she can do whatever she wants. Otherwise she says killing foetuses is bad, she has put up big-big posters in her clinic that says `don`t kill girl foetuses` but here she kills, she kills anyways, who can question her."

"She took signatures from all of us (surrogate mothers) when she wanted to show support of surrogate mothers to halt the ban on commercial surrogacy. At that time I didn't know for what purpose she was taking signatures from us, but she (Dr. Nisha) called us all and took signatures from us through a lawyer."

Conclusion

• Nargisa is very poor, she didn't own a house, her household income was a subsistence earning but only by one member of the family. Hence one surrogacy could not help her out

of poverty and she has eventually slipped back into abject poverty. She sold the property she bought and is now working as a housemaid

- Her working capacity has diminished after surrogacy.
- Both health wise and psychologically she is facing major problems after surrogacy.

(Dr. Nisha has been asking in some of her interviews, "all those who criticise surrogacy, come and see these women. See, how poor they are and how much they need this money?" Had she regularly revisited all her ex-surrogate mother's houses to see what impact surrogacy has had on their physical and psychological health and monetary status, she would have known that this is not the entire truth. She claims to have evolved an ideal win-win situation contract wherein both surrogate mothers and the commissioning parents get what they want. But there is no record of the health and mortality of the children and surrogate mothers. This follow-up study also shows that many surrogate mothers have slipped back into abject poverty post-surrogacy.)

15. Dimpy

In 2009

Dimpy and Dhiraj were agricultural labourers from a neighbouring rural area (Photo 18: Dimpy and her husband).

She first heard about surrogacy from her husband's sister Sarala. (Refer case study 3) She was convinced into surrogacy by her husband and sister-in-law and she agreed because they wanted to buy a piece of agricultural land for themselves. Sarala persuaded her brother Dhiraj who then persuaded Dimpy to go with her for the surrogacy as Sarala's husband was unwilling to send her alone to the surrogate home. Although both of them began the surrogacy process together, Dimpy was unsuccessful in the first attempt, while Sarala became pregnant at the first attempt.

Dimpy had been an egg donor before surrogacy and she returned to this practice to earn some money. She has had severe health problems due to egg donation; bloating, pains and problems with menstruation.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	In Euros	IPs
1	2010	Anand	Asha	1g	4	5000	Turkey
2	2014	Anand	Asha	1b	4.5	5800	America

Relationship with the Child

Dimpy had been shifted to a children's hospital along with her two weeks old baby. The Turkish commissioning parents arrived three weeks later and meanwhile the doctor couldn't trust anyone else other than the surrogate mother to look after the baby. Dimpy, her husband, and another caretaker (a nanny), were looking after the baby. She was getting the same lunch box that was going to the surrogate home. Dimpy was fed up eating the same lunch box every day. She and her husband (Dhiraj) had looked after the baby girl for 2 weeks), breastfeeding, changing nappies, and providing all other required care for the child. She told me, she had started breastfeeding just naturally as the baby was with her all the while. The couple had even named the child as Amita (also their younger daughter's name). At that time they were very hopeful that the couple would want to keep further contact with them. She missed the baby intensely after they left. Seeing this her Dhiraj told, her to erase her (Baby Amita) memory and never to mention her name again in their lives. She had no other choice but to carry on with her life (Photo 19: Dimpy's Surrogacy baby Amita).

Relationship with the Child

She had spent nine months only experiencing this baby growing inside her, she was also given the responsibility of taking care of this baby for 21 days, and after that she felt lost when the baby was suddenly taken away from her. She was feeling detached from her two children back in the village with whom she had no contact for the last one year, and with baby Amita, with whom she had bonded and had spent nine months had abruptly been taken away from her. As the commissioning parents walked away without even meeting them for one last time, their hopes of keeping in touch with them and baby Amita was shattered.

Relationship with the commissioning Parents

Dimpy's first commissioning parents, she says, were very nice people, they were Afro-Americans. They paid her well and spoke to her kindly when they met her for the first time. They also gave gifts to her children. Dimpy didn't know the commissioning parents at all as she had only spoken to them over the phone with the assistance of an interpreter from the clinic. They had met the commissioning parents only once. This embryo transfer was unsuccessful.

The second attempt was successful with a Turkish couple. This clinic does not allow a second attempt on the surrogate mother using the same set of gametes. On a positive pregnancy, Dimpy joined Sarala (SM 3), who was already in the Nadiad surrogate home.

The couple arrived from Turkey when baby Amita was 21 days old, they brought her some gifts and after thanking her profusely they took the baby along with them. That was the last she saw of the baby girl and the couple.

Dimpy was then shifted from the children's hospital to the surrogate home above the clinic. She had to wait there until she received the money. A few days later, the couple came to the clinic, paid the money to the doctor and went away without meeting her to even say goodbye or show the baby to Dimpy one last time.

Dimpy's husband was very happy with the money that they got more than what was written in the contract. Dimpy disinterested in the money or the counting, but she was happy that her husband was happy. She was happy albeit at the same time worried about what her in-laws would say to her.

During the Pregnancy

Dimpy and Dhiraj slowly began sharing with me about their children. They faced problems leaving their children at home with relatives. They were not taken care of well. The boy started losing interest in studies and Dhiraj is upset about this, although Dimpy doesn't care, *"if he doesn't study he will work in the farm."*.

Social Stigma

They had kept the surrogacy a secret even from her mother-in-law and other relatives not only because of the probing questions but also because they did not want to alert them about the sudden cash influx and attract unnecessary scrutiny and evil eyes into their lives.

Dimpy had lied to the family that she was working in a factory that wouldn't allow her to return home. However, they grew suspicious when she never returned even for her mother's death.

Her children's school teacher blamed her for not being around for her children for the past one year as her children were not studying well since she went away. They asked her where she had been for one year, and that there were rumours that she had been to a nearby town, and was questioned why she couldn't come to see her children.

Copy of the Contract

The surrogate mothers are not given a photocopy of the signed contract lest they take any legal action against the clinic, "anyways even if we get a copy of the contract what difference does it make, we don't know anything about our rights by law. In the surrogacy contract, women have to sign off all rights on medical interventions."

Medical Procedure

She told me, that although she had only one girl child, she observed that the selective abortions inutero are regularly conducted in the clinic on behest of the commissioning parents resulting sometimes in abortions of all fetuses. She couldn't understand why they would implant five embryos into a surrogate mother if they want to limit the babies to only two. Although legally only three embryos are allowed to be implanted into the surrogate mother's womb in India, up to five embryos are known to be implanted in order to increase success rate resulting in a high likelihood of multiple pregnancies. In case of these multiple pregnancies (triplets), the doctor suggests "selective reduction" of one or more foetuses. This procedure may also result in miscarriage of the remaining foetuses, preterm labour or infection. The preference of the surrogate mother is not asked either for the number of embryos to be implanted or in the decision making about selective abortions.

Although the success rate of the gestational surrogacy is considerably low, the contract mothers are not given any compensation if they experience a miscarriage at any stage of the pregnancy. Studies reveal that the overall pregnancy rate per cycle after IVF surrogacy was only 24%, with a clinical pregnancy rate of 19%, and a live birth rate of 15.8%, while the clinics usually publish an exaggerated success rates on their websites (Goldfarb et al. 2000).

Experience with Delivery

It was a pre-planned caesarean for her although it was only one baby. She also told me, a normal birth is not allowed with surrogacy, even if the surrogate mothers get pain, they are rushed into the operation theatre for a caesarean.

Monetary Benefit

Dimpy's family was never on the margin of poverty. They owned some agricultural land, but they wanted to be safe and well into earning substantial amounts of money. Dimpy's husband has always been a dominant person and greedy for money. He pushed her into another surrogacy for repairing their house, but eventually they used that money to buy another piece of land and a few buffaloes.

Dimpy clarified to me that "we just have to build a house now. Only that work is remaining. We have buffaloes now, we have bought enough land. Now the present government gives loans to build houses, so we will take that loan. We have asked father (her father-in-law) to transfer the house on our name. Its only then that we will build the house. Then we will take loan and build that house."

She knew she had to do this to get respect from her husband. She tried not to bond with the commissioning parents or the child in her second surrogacy.

When I asked her if she would do surrogacy yet again she said "I have done surrogacy twice, now I don't go there at all. When I went there for the second time, we wanted to repair the house, but all the money got spent on buying another piece of land."

The remaining ancestral land that they have will be distributed between the two brothers. When Sarala's daughters get married we will give the mother's brother's contribution. Then her responsibility as the eldest daughter-in-law is over, she said.

The impact it has had on her family is that her children who were studying well at school started deteriorating. Both she and her husband feel it is because of the constant separation of the mother from the household into a surrogate home and the lack of time of the father as he was busy with agriculture, that the children couldn't concentrate on their studies. Dimpy's husband kept on taunting the son for not studying. The boy is interested in working on the agricultural farm but his father wants him to work in other educated urbanised kind of work.

The relationship between Sarala and Dimpy has become bitter over the years. Sarala is angry that Dimpy didn't take her as a surrogacy agent for her second surrogacy. Sarala feels it was she who introduced her into surrogacy and this is the least Dimpy could do for her. By taking someone else as surrogate agent to the clinic; she deprived Sarala of the Rs 10 thousand that she could have earned as an agent. This difference snowballed into several other family mis-understandings between them and they are not in talking terms.

Conclusion:

This case brings out the importance of the mother-child bonding during the gestational period and thereafter.

Dimpy and Sarala were already involved in egg donation and it was through this that they were informed about surrogacy, and her motivation for surrogacy was to earn extra money to buy some agricultural land. She had been repeatedly told by Dr. Nisha and others in the clinic throughout the pregnancy that she was just renting her womb by carrying someone else's baby to term only to return it at the end of the process in return for money. Yet, Dimpy bonded with the baby, name her, and will probably remember her fondly for the rest of her life. The commissioning parents in turn have been told by Dr. Nisha that the surrogate mothers don't want to do anything with the child so that they don't feel any morose when they take the baby back to their homes. This hence brings out the complexity of this relationship and that relinquishment is not as straightforward as reported by many liberal researchers.

She felt valued by her husband as she had contributed towards the betterment of their lives. She and her body were grossly devalued by the medical practitioners and the commissioning parents who used her body to fulfil their financial and social motives. She expressed feelings of being used when she was not given a copy of the contract, although both she and her husband could not understand what was written in it. She was not happy about living in the surrogate home for nine months away from her children. She expressed her dissatisfaction at the way her friends were treated in the surrogate home in being forced to undergo in utero selective abortions and compulsory cesareans but she couldn't express this to Dr. Nisha. Selective abortions in utero could lead to abortion of all babies. If she expressed her concern, she says, they would call her to the clinic and purposely do an abortion on her. She says they live in this fear as the clinic has complete control over their bodies and the surrogacy. It was her substandard socio-economic status as a woman that pulled her into this practice, persuaded by her husband and his sister, Sarala. It was her husband who persuaded her into this. The husband did play a strong role in determining the erasure of the little girl from their life which was in contradiction to what she would have desired or what she had experienced with the baby. This was not a primary concern for Dr. Nisha nor was it of any consideration to the commissioning parents.

16. Shruti

(Although I clarified the aim of the study to her, she was under the impression that I was somehow linked with the clinic or would go and tell Dr. Nisha what she spoke to me, as she repeatedly asked me if I had come from the clinic. Our entire interview was overwhelmed with her drunkard husband constantly interfering)

Shruti is 32 years old, living with her husband and two children in Ratanpura village (23 Kilometres from Anand). Her daughter is 11 years old and son is 9 years of age. She was in Rasalpur before marriage. She has studied up to 12th class. She never aimed for working with her education. She halted her studies and then got married. She did some tailoring work from home.

She first heard about surrogacy from her sister's husband's sister. She says because she is educated she understood immediately what might be the procedure. *"Many uneducated women don't understand"*, she added.

When I asked her the reason for doing surrogacy; she said there were problems at home and she looked towards her husband. I could smell the alcohol. He was sitting on the floor close to the chair I was sitting on. I noticed that he had already started blabbering. I asked her if she wanted to sit inside and talk and both of us went inside the house. It was a big spacious house but hardly any furniture. Typically most rural houses in India are like this. The first sentence she told me was "I have lot of problems at home. My husband drinks alcohol. He never earned any money."

When she married everything was OK and then her husband started drinking slowly and now he's an alcoholic. When she married him, he was working in a school. After their marriage he left that job and started sitting at home and began drinking. He interrupted our discussion several times, asking Shruti to make tea.

I heard and also observed several men in and around Nadiad and Anand who have started drinking after marriage. When I asked another surrogate mother the reason for this, she said, "once we have children, the men think where will she go now and they start doing whatever they want to do and drinking is one such desire."

Shruti had to pay the fees of the children. She has no parents-in-law, she depends on her parents and family. So she decided to go for surrogacy. First he refused to allow her; then later when he got to know that there is no physical relationship involved he agreed.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2015	Anand	Asha	1g	4.8	Guajrati NRI from London

Even if the payment was lesser, she would do it because of her household problems.

When I asked her about doing it without money, she was shocked, "my problems would have increased if I had done surrogacy without money. Additional health problems and risks and without any money involved."

Despite getting an autorickshaw on his demand, so that he drives it and gets money to the household, "*he is just sitting at home, he is addicted, he cannot change*", she laments. The same was the case with some other surrogate mothers. One surrogate mother, I met, her husband was an alcoholic and had just died.

Monetary benefit

She thinks the Payment is fair.

She bought an autorickshaw, it costed 2.28 lakhs. She bought it for him, so that he will earn some money driving it and can move out of the house as well. But he didn't want to drive, so another person drives the auto and brings some money after taking his commission. She also saved some money for the children's education. They repaired the house they are living in. Although the house is in the name of her parents-in-law. Her husband has 2 sisters and one brother. They all own properties elsewhere so she is rest assured that they will not come asking for share in this property. She says, *"it's good because those who don't have kids get a child and those who don't have money get money."*

Leaving home

She pleaded with Dr. Nisha to allow her to keep her children along with her at the surrogate home. She explained that her husband is a drunkard and she has nobody to look after her children at home. First she refused and then finally she agreed. She took them off school and kept them with her at the surrogate home. She was housed in the big new building.

(At this point her husband interrupted us, asking her to make tea, she asked him to wait and have a little patience)

In the new building, they had 2 surrogate mother in one room. It was in the basement, there was no balcony, no window, no fresh air inside there.

During the Pregnancy

She got attached to the babies growing in her womb. "Inside the surrogate home, it was like a hospital. 7am tea, 9am breakfast, 12 O Clock lunch, 4pm milk/tea with snacks and 8 pm dinner. We have to sleep after that."

The nurses at the clinic were insisting that she shouldn't carry her son when she is pregnant, but she didn't care and lifted her son throughout her pregnancy. She said, "nothing happens just by carrying a 5 year old child. Nothing happened to me, no miscarriages."

Delivery

She had a caesarean. "*They took away the baby immediately and I was left free to return home after 15 days*". She didn't take any photograph of the baby, she felt she had no right to do so. The commissioning parents were in the same building. The new building has a floor for the commissioning parents to stay. The surrogate mothers are not allowed to leave their floor and go to that floor. If the commissioning parents want to, they can bring the baby and show them.

She didn't have any problem during her delivery, she says.

Relationship with the Commissioning Parents

They didn't keep in touch much after the surrogacy. They do call up occasionally to enquire if she wants anything. Shruti also asks them what the baby is doing?

She thinks there should be a choice where both the surrogate mother and the commissioning parents can choose if they want to keep relationship.

She was happy that the commissioning mother spoke Gujarati. The commissioning mother told her to learn to speak English, but she found it difficult to pick up English.

Relationship with the Children

The feeling she had for the baby girl was exactly like her own child, there was absolutely no difference. She became attached to the child. "Of course, I obviously will be attached, they were 9 months with me in my body. I provided for the Baby when she was in my body. If the child is theirs I have to give it to them. We have no say in this." She feels sad whenever she thinks about her (the baby girl).

She had no understanding or knowledge about psychological counselling.

Impact on her children

Both her children were shown the baby girl on her birth saying, *"look, she's your younger sister."* Later until the baby was in the same building, whenever she saw the babies, her children too saw the baby girl. Both her children remember the baby girl

She will never allow her daughter to do surrogacy. It's a derogatory, demeaning work. I would never have done it if I had money and my husband was ok.

Repeating Surrogacy

She cannot go for another surrogacy as she already had 2 caesareans, one for her child and another for the surrogacy baby. If they allow for a third caesarean, she would have gone again.

(Her husband enters the room again asking her to make tea, She asks him to wait again)

She doesn't get a copy of the contract. It all works on complete trust, she says.

I asked her why would she do surrogacy again if her household is now on track. To which she answers, "so much money in nine months is a good option. I would still go just for the money."

Relationship with the Clinic

She was praising the clinic for giving the surrogate mothers a bag and a few notebooks to children. They have to show the passing marksheets and tell their commissioning parents' names at the clinic with some identification number to avail this material. There are about 800 to 1000 surrogate mothers linked with this clinic. Those who have had miscarriages and didn't give birth to any children through surrogacy cannot avail this service.

Regarding changes on her life

Financial

She says no particular changes has taken place in her life. The only change is; earlier there was guarantee for two meals, now she has food because of the autorickshaw, but the other problem remains, she points out to her husband who passed by the door.

Physical

Health wise she has no problems, She became fat after surrogacy. Before the surrogacy she was thin and fit, now after staying for 9 months inside the surrogate home she has put on weight and never reduced thereafter. After 2 caesareans she cannot do much work as before.

(She enquired about the purpose of my study again at the end of the interview. After reading the consent form and information sheet, she still doubts if I had come from the clinic. She asked if I had come from the clinic. She asked if she had given a good interview. If I meet the doctor, she wanted me to tell her that she had given a good interview. So she didn't speak anything that was not in favour of the clinic or the commissioning parents.

The husband started making the tea himself.

Conclusion

- She has a house, but there was no sustained income in the house. The surrogacy money has provided a source of income.
- Women in this situation in India should be supported by the government with low interest loans.
- Her daughter was 7 years old and her son was 5 years old when she did surrogacy. The baby girl was shown to them saying that, she was their little sister and then abruptly separated from them for ever. This can possibly effect the psychological well-being of the children.

17 Gomati

Gomati is a neighbour of Shruti. She is 40 years old, living with her husband and children in Ratanpura village (23 kilometres from Anand). She has three children, one 19 years old boy, second boy is 18 years old and the youngest boy is 14 years of age. She was an agricultural labourer and used to sell paper for a living. Her husband was also an agricultural labourer before. They were in financial trouble due to debts. They own the house they are living in.

She herself has four siblings, three sisters and one brother, their father has passed away. She was taken off school at a young age to help as an agricultural labourer. Her elder sister became a surrogate mother twice. The brother is the eldest, he married to a Punjabi lady living in Anand but he has cut all relationship with the sisters because his wife doesn't like them. Her brother is an auto driver and has two sons

House owner family; the income was also consistent because both husband and wife were agricultural labourers, but there were debts, so she went for surrogacy.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2014	Anand	Asha	1 boy	5.25	Surat NRI

They bought a tempo and 2 cows with the surrogacy money and now he doesn't work as a labourer anymore.

Her younger sister is a surrogate agent and she first came to know about surrogacy from her. Her sister cannot become a surrogate mother herself because of her infertility problem, so she takes other women as an agent to the clinic for money.

She would not do surrogacy again for more money because the children have grown up. Her husband refuses to let her go for surrogacy as their children may feel ashamed and embarrassed.

Experience leaving home

"I was very upset, any one would be, having to leave my children behind for one year". When she had to leave her children, her mother-in-law and father-in-law were here to look after them.

She will not go again; "how much will my mother-in-law do for my children? Who will wash the children's clothes? How much will she (her mother-in-law) cook and give my children?" That's why she didn't leave her children and go again.

Experience during Pregnancy

"The food was ok, not like how we cook at home, it was bland, the taste was very different, not at all spicy". Gomati was waiting eagerly to return home because she was always sick inside the surrogate home. This was because of the medicines. "One month after the positive pregnancy, I started facing lots of problems."

The signs that Gomati mentioned were all symptoms of depression. She;

- didn't like the food,
- felt like sleeping all the time,
- felt nausea,
- would not take bath for days together,
- didn't feel good about staying there,

She herself described her experience as depression. Dr. Nisha came to her and explained to her to stay strong and brave.

Gomati says it is probably the medicines. "This is an artificial unnaturally created pregnancy using medicines. The uterus lining is thickened using medicines. Then the injections, not only are they unnatural, they are also painful."

There was one surrogate mother who almost died (near death) when Gomati was in the surrogate home, which could have been a cause of her depression.

During the Delivery

- She was scared before the operation fearing that she would die,
- but she was given the injection, then she didn't know anything, even as to when the caesarean took place,
- Immediately, the babies were taken away,

Relationship with the Child

She gave birth to one boy child. She didn't breastfeed the baby.

Initially she tried to avoid any of my questions regarding the child. Then after a while she told me that she always thinks about the child. "*The child would be 5 years old now. But the commissioning mother doesn't remember me, it's so unfortunate. I remember her and the child all the time.*" But she has taken a decision not to think about the children anymore. She wants to concentrate on her children, that's it.

Relationship with the commissioning parents

They didn't stay in Anand for long. She was a working woman so they took the baby and left soon. After the delivery she came to meet Gomati and distributed sweets to all. She called for Gomati's children to the hospital so that she could meet them. She didn't visit Gomati's house though. She told Gomati that she would come but she never came. It's been five years since the surrogacy. *"She promised my elder son that she will call, but she didn't call. She has been heartless not only to me but also my children. The commissioning mother's name is Nipuh. If she is concerned and sensitive, she should remember that Gomati Ben gave me the child, but she has forgotten me."*

"Some commissioning parents who sincerely feel that they should keep a relationship, it is only those who manage to keep contact. As I said earlier; one surrogate mother in Sureli village, her commissioning parents call up regularly till date. Madam doesn't know this. They contact her directly. This is because Madam has directed everyone that they should not keep in touch with the surrogate mothers. It's only those who keep direct contact and give some money without informing Madam, manage to keep in touch and also manage to send some money to the surrogate mothers."

The commissioning parents don't care about who is their surrogate mother, anybody is OK; as long as they can carry their child.. They only want the child. There are very few, like the surrogate mother Kailas in Sureli, who's commissioning parents kept in touch. She gave birth to twins.

Social Stigma

When Gomati went first in 2014, nobody in their village knew about surrogacy. But after she returned, everybody came to know. People talk ill about her but her husband and mother-in-law wanted her to go, then who can say anything. Everyone keeps quiet.

She says, it is because of her kids that she is worried. Some people taunt them that your mother went to give a child to someone else. Moreover they're growing up, so she didn't go again.

Relationship with the Clinic

She gets several calls from the clinic asking her to come again for surrogacy or egg donation, but she didn't go.

They don't give a copy of the contract. They show it, take their signature and keep it in the clinic. Gomati says she didn't read the contract, she says, maybe her husband read it.

She didn't want to go again for surrogacy also because, she (the doctor) has become even more strict. Earlier she allowed some women to visit their home at least once on request. But now she doesn't allow the surrogate mothers to visit their home. When Gomati went for surrogacy, she went even without knowing anyone in the surrogate home. There was some open space for women to walk even though within the house. There was a balcony. There were windows. But now in the new building the surrogate mothers are kept in the basement, underground. The surrogate mothers are not allowed even to come out of the building. Earlier some women use to order food form outside when they wanted to. But now there are two guards standing at the entrance. Every person coming in and out of the building have to note down in the register.

Monetary benefit

"The payment is very unfair. But its Majboori (helpless situation), who will raise their voice or resist against the clinic?"

Whoever became a surrogate mother along with her have not returned for surrogacy. They all felt the payment is too less.

"We have to take so much risk and trouble. We leave our children behind for one year. They should pay the surrogate mothers much more."

Actually, she even went to the clinic once and even spoke to one couple but she was unhappy with the less amount given and she returned home. There's no point after so much trouble to do surrogacy once again for a very less amount.

Conclusion

- Since the clients from outside have reduced drastically after the Bill was introduced in Sept 2015, many surrogate mothers are not interested in going for surrogacy. They have calculated that people from abroad pay more than the local Indians.
- •
- She had a house, but there were debts and there was no sustained income. With one surrogacy, she has been able to buy a tempo, that her husband drives and they have two cows, also a source of income.

18 Padma

She is 45 years old. She has one boy 22 years old and another boy 17 years old.

She owned a house in Petlad and was working as a nurse. Her husband drinks alcohol and doesn't earn much money.

She had to manage the household expenses by herself, so she decided to go for surrogacy. It was Sarala who first told her about egg donation. She was already involved in egg donation when she heard about surrogacy first. Sarala was the surrogate agent who took her for surrogacy.

She now works caring for as an old age care taker in Ahmedabad and earns Rs 10000 per month.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2012	Anand	Asha	1b	4	USA

She wanted to do surrogacy to save money for her children's education. But when she got the money, she didn't spend the money on anything specific. She deposited 1 lakh in a fixed deposit and spent the remaining amount on buying several household items.

Selection Criteria

Initially, she was rejected by the commissioning parents because they found her very frail and dark complexion. (Photo 20, Padma, with Sarala and Ujwala) It was Dr. Nisha who assured them that it will not affect the surrogacy and they agreed. The commissioning parents were from USA.

About leaving home

Her time at the surrogate home was spent in tension about her children and what would they be doing at home without her.

At the time of signing the contract she was told the amount she would receive for surrogacy was Rs 3 lakhs. She will be paid Rs.2000 per month for nine months, that is 18000 for nine months. She would be given the first instalment of Rs. 25,000 after the fourth month and another Rs. 25,000 after the eighth month. This total of Rs 68000 would be deducted from the final payment, so she would receive Rs 232000 on handing over the children. The commissioning parents finally paid her an extra 50 thousand rupees.

She was unhappy about staying at the surrogate home, but she signed the contract anyway. She would cry thinking about her children inside the surrogate home.

Pregnancy

Before the embryo transfer, "the injections were so painful that I wanted to quit and go back home."

The pregnancy time was spent on feeling the baby grow in my belly, I had become attached to it. Apart from the medicines and the painful injections that began after the fifth month. It was so much of medicines and injections that at some point I felt, she just wanted everything to be over with and she go back home.

Relationship with the commissioning parents

Her commissioning parents were not very happy with her in the first place so they didn't ask her to provide breastmilk for the child. They didn't come to enquire about her before or after the caesarean. The baby boy was taken away soon after delivery. She was shown the baby after 10 days. They arrived at the clinic and she was allowed to come down and see the baby. Another five days later, the commissioning parents came to clinic and paid the doctor and left.

She didn't get a chance to share her phone number or address with the commissioning parents, not did they ask. That's was the end of that relationship. She feels hurt and used by everyone. She feels she was paid less, was not treated respectfully. And for all the risk and pain, it was not worth it, she feels. She never returned for this reason. She is now working hard and earning money.

19 Vedha

She is Kaavya's (SM 12) sister-in-law. She is 32 years old. She has two children; one boy is 11 years old and the younger boy 6 years of age (Photo 14 Vedha (SM19), Dr Sheela, Kaavya (SM12) and Sarala (SM3) at Kaavya's House).

She used to work in the Parle biscuit factory before her surrogacy. She used to earn Rs 80/- per day. Her husband used to work on their own agricultural field.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2011	Anand	Asha	1g	3.5	NRI, not known
2	2015	Anand	Asha	1b	6	Bahrain

She has no knowledge which country they came from. She was told that they are NRIs, that's it.

In their village there is an aunty who goes to cook food at the Nadiad house, she told her about surrogacy. She first told her it's a good thing, and asked her to go and see the clinic. Then she visited the surrogate home and saw there were many women there. She then told her husband, then her mother-in-law, then her father-in-law, everyone agreed.. They didn't ask any question because she had already gone to the clinic and got to know about surrogacy herself.

(Later on during the interview, she said, actually her mother-in-law was against the surrogacy. Her mother-in-law was not happy that both the daughters-in-law were talking about their surrogacy experience with me.)

Selection

It is the commissioning parents who chose me. She doesn't know what they look for but she thinks if they feel that this woman is good for their surrogacy then they choose that particular woman. The clinic first asked her; if her husband has agreed for this. why she wants to do surrogacy.

On leaving home

She had no tension about leaving home because her mother-in-law was at home to look after her elder son who was three years old at the time she went for her first surrogacy. When she went for her second surrogacy, her elder son was seven years old and her younger son was two years old.

Medical procedure

She didn't feel any discomfort at any stage of the surrogacy in any of the medical interventions.

Experience with Delivery

Both her surrogacy deliveries were caesarean. In between the two surrogacies, she had her younger son and it was a normal delivery.

The second delivery was better because she had bonded with the second commissioning mother and she was there during the delivery and is still in contact with her. She was crying when Varsha was unconscious. Narmada, the surrogate agent told Vedha that the commissioning mother was crying inside the delivery room. "She was very affectionate, so it feels good", she says.

At the surrogate House

She was at the new surrogate home in the big complex for her delivery. Her caesarean was the first to be conducted in the new clinic, she proudly says and goes looking for the inauguration photos.

She put on weight inside the surrogate home

- Milk and breakfast, the milk comes every morning
- Then comes the fruit distributor.
- Afternoon they serve lunch
- Then 3-4pm milk is served again with some snack.
- Then 8pm dinner

They just constantly ate and slept and ate and slept for nine months along with the medications. There's no activity inside the surrogate home.

Social Stigma

Surrogacy was not so much known in 2011 as it is known today.

They have an agricultural land which was given on lease. That land had to be released from the lease. "I received 3.5 lakhs then I released that land, then we kept some money on fixed deposit for the children. Then I went again to build the house."

Relationship with Commissioning parents

The commissioning parents still are in touch with her. She sends video to her through WhatsApp. Vedha asks for her phone from her son. One video is about the commissioning parents celebrating the child's birthday. He has become 3 years old and they are very happy and threw a grand birthday party in Bahrain. He has started going to school.

They have returned to India only once after they left with the child. When she visited India she gave Vedha 10 thousand rupees. They never visited her house though. They keep in contact through WhatsApp. Vedha says she is very nice but time will only say whether she will actually tell the boy about Vedha and her role as a surrogate mother in his life.

"Many surrogate mothers don't even get a chance to see the child after they are taken away, at least I get a chance to see them, which is good, isn't it." (she giggles in joy) The commissioning mother in her first surrogacy never even came to meet her during the surrogacy. She never kept any contact with her before or after the surrogacy.

In comparison she says, the first girl I gave through surrogacy, I have not been able to see her even once. They just took the baby and left. They never contacted her after that. They gave powder milk to their child. They stayed at Rama hotel.

However Rehmat, her second commissioning mother calls her to meet somewhere, whenever she comes to India. She tried yet another surrogacy at the clinic but the trial failed. She was requesting Vedha to become her surrogate mother again, but she already has had two caesareans and hence cannot go for surrogacy again. Rehmat would come regularly to meet her during the surrogacy. Even when she had any regular check-up once in a month, she would come from Bahrain to be with Vedha. But the first commissioning mother never came. She sent Vedha cashews and almonds to eat but she never came personally, except for the delivery, when Vedha saw her very briefly.

The first commissioning mother came only at the last during the delivery. She never even met her for an interview, which is the time most of the surrogate mothers meet the commissioning parents before signing the contract and the embryo transfer. But her first commissioning parents didn't meet her even for that purpose. They just left their genetic material and left without meeting her.

On repeating surrogacy

She would go again if there was no rule limiting two caesareans for surrogacy; just for the money. Sarala mentions that; Madhuri(1) had three caesareans and is willing to go for the fourth time. She is persuading her to go again, not to Asha clinic but to another clinic, where they allow more than two surrogacies.

They begin discussing about other surrogate mothers who would be willing to participate in my study but Varsha says her mother-in-law is shouting that the daughters-in-law (Kaavya and Varsha) are giving interviews to me. She even told me to talk softly during the interview so that her neighbours or mother-in-law doesn't hear anything.

Relationship with Children

Regarding relationship, as Madam told us we went there for money and gave away the child, so we have to forget it. There is certainly a difference; when she is able to see the boy living in Bahrain she feels a sense of satisfaction and belongingness, but when she didn't get to see the girl child she gave in the first surrogacy, that brings sorrow. That's my fate that I could not see that child. When they were inside her body, she felt attached to both the children. But she feel satisfied that at least they are happy, they didn't have a child and she was able to give that happiness to them.

For the second surrogacy child, she provided him with breastmilk using a pump for one and half months. Even after she returned home, the commissioning mother used to come from Anand three times a day to collect her milk.

The feeling is exactly like one's own child, there's absolutely no difference.

When she thinks about the child that she didn't see, she feels bad that she couldn't see the child. But she pacifies herself thinking that she's probably in good hands with the commissioning parents somewhere in this world.

The second commissioning mother has promised that she will bring the child to her house, so she is hopeful.

Open and closed system

She feels it should be an open system, where surrogate mothers and commissioning parents both get to choose each other and choose whether they want to keep a relationship or not.

She gives us two other surrogate ,mother's names who would be willing to speak to me.

As an agent

She has never taken anybody, she has no interest.

Contract copy

No, she didn't get a copy of the contract. They don't give it, she said. She has seen the contract. She couldn't read it though because it was all in English language. *"They make us sign but the entire document is in English. How will I understand what is written."* (she laughs) They didn't read and Inform her what was written in the contract. They just showed her the place

They didn't read and Inform her what was written in the contract. They just showed her the place to sign and she signed. *"I had to sign in 10 to 15 places"*.

Remuneration

The payment is very unfair. Even in the first surrogacy she says she faced exactly the same problems, caesarean. She faced the exact same difficulties, she says then how there is so much difference in the payment. That's the reason women keep going back, it's like a lottery. Sarala adds, that one lady (Kailas from Sureli) received 12 lakhs in cash for her surrogacy. The commissioning parents paid for the surrogate mother's son's eye operation, fridge, gold chain, bangle. Her husband was given a watch. Her commissioning parents were from London. She is now working in Dubai as a worker in a company.

For the first surrogacy Vedha felt "what am I doing here?" because the commissioning parents treated her as though she did not exist.

Impact

Financial changes has been to her advantage. The agricultural land was released from lease. She bought a tempo that her husband drives. So the income is sustainable and they have built a house and bought a TV; some utensils and other household items with the money.

Body

She was very thin earlier, but now she has become fat. (she laughs) Over-eating and eating medicines, all has had an impact on her body, she says. She shows her photos before surrogacies, she was indeed very thin.

Sarala explains; the surrogate mother's body swells up with medicines and injections.

Emotional

Her children don't know about her surrogacy. She doesn't want her children to ever know. But all her neighbours know.

(Kaavya (her sister-in-law`s) children know about the surrogacy, so it would be almost impossible for her to keep this secret from her children. Only time will say what impact it has on her children.)

She gave birth to her second surrogacy child in December 2015, this was just after the law was passed by the Indian Government. I asked her if she heard anything about this inside the surrogate home. She said there was a talk inside the clinic that surrogacy will be closed soon.

20 Sriya

Sriya has two children; the girl is studying in 8th class and the boy is in 10th class.

Sriya has not gone to school. When she was very young her mother fell sick so she was kept at home to do housework. She has an elder brother and another younger brother and both were sent to school.

She first heard about surrogacy from her friend. She was apprehensive for two months thinking what is surrogacy? how is it done? Who will be responsible if something happens to her?

She and her husband went to the clinic. They were told that "anything happens to you, it is not our responsibility. You have to stay here until the baby is handed over. You can't go back home. Food and lodging expenses is on the clinic and you will be given a monthly salary of Rs 4000." Her husband was worried what if something happens to her. Both work in the informal sector and the house runs on both their income. But nevertheless she went.

She went for surrogacy with the consent and persuasion of her husband.

Sriya's husband has passed away just 13 days ago. He used to drink a lot, he was an alcoholic and was sick and at home for the last two years. She came to meet me at my place of stay. Usually she is not allowed out of the house for 45 days after his death, as people would gossip ill about her but she came out just for this interview.

He was not drinking before but he started some years after marriage. According to Sriya, men start drinking after a child is born, especially a boy child. *"The men think; where will the wife go, then they start drinking."*

Now there is a tension of how she will run the household. She works as a housemaid in a bungalow, but he was at home sick and not earning for the last two years, so she is already in a bad financial situation. Her salary is merely Rs 2000 per month. They don't have to pay any rent because she is staying in a room owned by her mother.

She became a surrogate mother mainly for owning a house. But she couldn't do anything with the 3 lakhs that she received after surrogacy. That money is insufficient either for buying a house or a land, she said. Moreover she had to sit at home because she had a caesarean. She was unable to work as a housemaid for 2 years after the delivery. She has saved the money, but in recent times, at least 8 to 10 lakhs is required to buy a house. Without that much money, it is of no use. She has put the entire Rs 3 lakhs in a bank.

She would not have done it for a lesser amount, as less than Rs 3 lakhs is too less.

She was very worried that her name and photo should not come in any newspaper or TV. So I have not included Sriya's photo in this report. She said her mother doesn't know about her surrogacy.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2013	Anand	Asha	1g	3	Baruch

Social Stigma

Sriya told her mother that that she is going with her friend to work for one year. Her husband and her mother-in-law knew but her maternal family didn't know because her mother doesn't like surrogacy.

Selection

"Madam selects the commissioning parents for the surrogate mothers, we don't have any say in it."

The commissioning parents saw two surrogate mothers who's uterus were ready for transfer. They transferred embryos into both the mothers simultaneously. Sriya became pregnant while the transfer was unsuccessful negative for the other surrogate mother.

She didn't feel the transfer was equivalent to sexual abuse.

Experience leaving home

She left her children with her husband and mother-in-law. "I cried, I had never left my children alone ever, in any circumstances. It was the first time that she left them for such a long time."

At the surrogate home they were supposed to eat on time. They were supposed to remain sleeping with legs crossed for 15 days after the transfer. It was only after the positive result that they were allowed to roam around even within the house.

Experience during the delivery

It was a caesarean, the baby girl was 3.5 kgs. They showed her the child, immediately after the delivery, that's it. After that they came again only once when the baby girl was 1.5 months old. After that. they went away, she doesn't know where they went. She didn't give breastmilk even with a pump for the baby girl.

Relationship with the child

They did come once again to the clinic when the baby was 1.5 months old and she was called to the clinic to see the child. She feels she should not think about the child, as it will affect the wellbeing of the child adversely. She gave the child and got money in return. She felt sad when she had to be away from the child. But she had signed such an agreement. If the child ever comes to meet her in her life, she will be very happy. Because "*I am the birth mother of the child. The baby was in my womb for 9 months.*" But she feels the child will never come to know because the parents will never tell her the truth of her birth. She didn't take any photo of the baby as she didn't have a phone at that time.

Relationship with the commissioning parents

They were nice people but they didn't keep any contact. They brought her gifts; some vessels, bedsheets and some sarees. They were nice to speak to but they were not very nice in keeping in touch or in paying her some extra money.

As an agent

She never took anybody to the clinic as an agent. She doesn't want any trouble in her life. Sarala who had been listening to our conversation says, "she is innocent". Sriya adds, "it is a big responsibility. If something happens, all the relatives of the surrogate mother will come and attack me. Who will take this responsibility? Whether they pay her or not, firstly she may have to chase the surrogate mothers who don't pay. If something untoward happens, all the family members of the surrogate mother will come behind her. She didn't receive a copy of the contract. It was with the clinic. They don't give it to anybody. She didn't even read what was written in the contract. She can't read, she's an non-literate. They didn't even explain to her or her husband what exactly was written on the contract.

Payment

She says the payment is not fair. The commissioning parents were Patels and people from that caste are very stingy and they didn't pay her well. There were two surrogate mothers involved in their surrogacy from the clinic and they didn't pay much saying that they had spent a lot of money on two embryo trials.

"I kept the babies in my womb, left my children at home alone. I couldn't build my house, nothing is left now, my husband started drinking uncontrollably and now he has died. What's the point?"

She would do it again, without any earnings she can't think of anything else now.

Impact

With the money, she has bought TV, gas, jewellery and some other things. She has had no impact on her physical body or any psychological impact.

21 Neelima

Neelima also came to meet me at my place of stay in Nadiad. Our talk began with social stigma; she was very apprehensive about the interview and where it is going to be published. She shared her concern with me that; her daughter is married. She did her surrogacy in hiding. Her in-laws didn't know about her surrogacy. "Nobody should come to know about it. If my daughter's marriage breaks because of this. Then it will not be good." Hence she was very worried about talking to me, but I reassured her that her name or photo will not come in any publication.

She is 40 years old, a Hindu, originally from Ahmedabad and has studied up to 8th class. She didn't study any further and got married at the age of 19. She has one daughter, 24 years of age and one boy 18 years old. Her husband is a driver. He drives someone else's car.

She first heard about surrogacy from an acquaintance. She also heard many women going for surrogacy at that time. She was initially very apprehensive about surrogacy. She felt it was not good to do this. At that time her children were small and their household financial condition was not so good, that's why she had to go. She went for surrogacy for building a house. But she didn't build a house, instead all the money she received from surrogacy was spent on her daughter's marriage. (The amount she seems to have received from surrogacy was lesser compared to many women.)

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2009	Anand	Asha	1g	2.5	Bangladesh
2	2011	Anand	Asha	1g	3	Delhi

After she got to know about surrogacy, she told her husband. His first response was *"what will people say?"*

Experience leaving home

She had to inform her mother-in-law as she had to leave her children at home with her. But her mother-in-law troubles Neelima a lot. So the children were not happy, it was not like having their mother at home. Even now her mother-in-law is troublesome, although she lives in a different house, she lives in the same housing complex and keeps coming to their house.

"I cried a lot and felt very sad. Two times I had to leave home for a year each."

When I asked her if she would do it again, "now I'm not a young lady. My son-in-law visits our house regularly, now what surrogacy will I do." If anybody asks her daughter "where is your mother?, it will be terrible", so she feels she shouldn't go now.

Regarding selection she said, "Madam chooses". Her answers were very brief, it was very difficult to get any details from her. It is only after a while of talking that she started sharing a little more.

Regarding the rules in the surrogate home, she doesn't remember but the main reason for keeping women in the home she mentioned was; for not keeping any sexual relationship with her husband.

Experience with the delivery

It was a caesarean, and there was a lot of pain and tension after the caesarean

Experience with the commissioning parents

Until they were in Anand, they kept some contact with her but after leaving this place, they have not kept in touch at all. She wouldn't be comfortable if they came to meet her at her house on account of the social stigma. She didn't tell anybody in her neighbourhood. That's the reason she came to meet me, rather than calling me to her house. But she says, if she had their phone number she could contact them and go to meet them whenever they come to Anand, but they didn't give her their phone number.

She felt happy that her body could be of some use to give a child for somebody.

Experience with the Child

She saw both the girls only once, she also took them in her hands. She is thinks about them all the time. "*How big the child would be? Every year at their birthday she remembers them*." When they went away both times, she cried a lot. She would have been certainly happy if she at least had received their photo yearly, just to know how they look and what they are doing.

As an Agent

She says her husband refuses to let her be an agent. For no specific reason, he just says "no".

Contract

She didn't get a copy of the contract. She just wrote her name on it in Gujarati. She cannot read English, but the contract was in English. She was told the contract talks about the money and conditions of the contract. A few conditions that were mentioned to her were; *"if there is a miscarriage there will be no money, if something untoward happens it is not the responsibility of the clinic and so on..."*

Payment

The payment she says was not fair, "but what can we do?", she questions. "Earlier it was less, we were very poor people, we have no say in this. I couldn't build a house with this much money, but one tension of my daughter's marriage is done with."

On one hand she says it is good, on one hand it is bad. Actually the clinic should build/ buy a house for us. Where can we build a house for 2.5 lakhs."

Her daughter knows about her surrogacy because she was the older child, but her son was small so he doesn't know.

While leaving she again pleads "please don't put my name or photo in the newspaper." I again reassured her.

Then she started explaining that her son has a problem with his brain. There is a nerve problem, so he's at home. He cannot go to work. Because he falls anywhere. His medication is ongoing. They don't send him anywhere to work.

They have to manage home rent and his medicines all in her husband's salary. Her husband's work is ad-hoc, sometimes he finds work and sometimes he doesn't.

22 Kamala

Kamala has studied upto 10th class. There was no time after housework so her interest in studies reduced. She married at the age of 26, in between she was doing housework. She also worked with nuns, at that time she didn't know how to cook. After marriage she worked mainly as a housemaid and some tailoring work. She brought up the kids with that money (Photo 21, Kamala with her Mother).

She has two children; her elder daughter is studying 3^{rd} year electric engineering and her son is in 9^{th} class.

She first heard about surrogacy from her friend who was working in the clinic at Anand. She met the doctor and decided to do it because she didn't have a house.

She didn't want to stay in her mother's house any longer. Her husband had deserted her. She has three brothers and one elder sister. After one surrogacy, the money she received was not enough to buy a house, then after her second surrogacy she bought this house. Just for the signature she brought her husband to the clinic and asked him to sign the papers giving permission for the surrogacy. Without his signature, she was not allowed to enrol in the clinic as a surrogate mother. He came back into her life with this incident. Now he lives with her and the children.

First her mother said "no" and wouldn't let her go, then she had to take her to the clinic and show her the surrogate home and then she allowed her. Her brother was not supportive. He asked her "*why do you want to do this?*". She said she wanted to buy a house. If I give the commissioning parents children, at least I will be blessed by them, is what she thinks.

The remuneration was less. But if there was no money she would never do surrogacy.

She did her first surrogacy in 2007 and gave 1 boy and then repeated in 2010. She gave 1 boy and 1 girl in her second surrogacy. Her first commissioning parents were from Delhi. Her second commissioning parents were Indians living in America.

After her first surrogacy, Dr. Nisha told her that her womb is of good quality and requested her to come again, so she repeated surrogacy.

She did surrogacy mainly for buying/building the house. She and her children were staying with her mother at her house before surrogacy.

Until her daughter completed 10th class they stayed at her mother's house. Her husband used to stay with his mother at that time. Now he stays here with her and the children. Her mother has moved with them too. *"He has no other place to go now, so he is living with us"*, the daughter adds chuckling.

Experience Leaving home

Her two children keep telling her "you left us and went, you left us and went away". They keep on expressing their distress by repeating this over and over again to her.

Her daughter says in my presence yet again, "you left us and went".

She left her children with her mother. She laments to her children "why do you taunt me? I have to keep listening to this".

They counter argued saying, "while you were away, we were listening to all the taunts from your family". Kamala`s family members taunted the children saying "your father went off leaving you and mother too left you with us." Kokila has three brothers and one elder sister.

Now she is working as an informal tailor. Her husband works in the mill and earns Rs 15 to 20 thousand rupees per month.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2007	Anand	Asha	1b		Delhi
2	2010	Anand	Asha	1b, 1g		Indian NRIs

Relationship with the Commissioning parents

What can I say about the commissioning parents, they wanted a child, that's it. Now she doesn't know where they are. The lady from Delhi pleaded with Kamala, "we don't have children, I am having repeated miscarriages."

The second commissioning mother came to meet her first time during the embryo transfer. Then she never came again, she came only at the end (during the delivery). When she came the first time she told Kamala "keep the child properly (in your womb), I don't have children." Kamala assured her not to worry. Her aunt, who lives in India, came to meet her once. The commissioning mother came again at the caesarean. They didn't show her the children. She felt hurt and tensed when this happened. She felt "I did so much for them and they didn't even show me the children. Would I have snatched the children from them? Do I have the capacity to do that? I also felt, they could have gifted something to my children? But they didn't."

"They (the commissioning parents) don't understand that the women who become surrogate mothers have some `majboori` (helplessness, constraint) and that's why they do this. They don't do it out of liking or hobby. They (the commissioning parents) just give the money and break away. That's what hits my heart the most."

She gave her number to the second commissioning mother, but she never contacted her after that. She asked her to give a cycle to her daughter to go to study. She said she would give it later but the `later` never came.

Her daughter wanted a cycle and she requested the commissioning parents to gift her a cycle, they said they will give it later, but that later never came. Her daughter was 11 years old at that time. She says, "they have so much money, why can't they give us some? Why do I have to suffer in poverty when my child is living in luxuries?"

They could have given some money for her children's education. She has been struggling working in Saudi Arabia in spite of giving away babies to the commissioning parents and destroying her health.

She feels the commissioning parents could have done something more for her. She is upset that the commissioning parents are selfish only for the child and not about the wellbeing of the surrogate mother.

Kamala`s experience as a maidservant in Saudi Arabia.

She experienced extreme forms of exploitation working there and was paid only Rs 15 thousand per month. She just returned two months ago.

Experience with pregnancy

"There was too much medication. Too much", she re-emphasises. "Earlier vomiting, then too much medicine. My body was giving up and sending me warning signs, but I kept on going for the sake of my children". After all this they just take the children and walk off. First time itself, her health was effected and yet she did it again for building the house. Her daughter adds, "even now, she experiences a lot of pain."

At the surrogate home

She used to sneak some food from outside into the surrogate home. Her children used to go and meet her at the surrogate home.

Relationship with the Children

The first surrogacy, they showed her the children only once. They didn't allow to breastfeed. They think the baby and the surrogate mother will get attached to each other. They didn't even ask her to breastfeed using the pump.

The second surrogacy, they never even showed her the children. She became attached with the children during both the surrogacy pregnancies, equivalent to her children.

Her daughter tells me that "she was always crying thinking about the children. Even now sometimes she cries."

She would not want to keep the children with her, she cannot, she says, because she doesn't have the money to bring up five children. But it would have been good to know about their wellbeing.

Kamala is happy that the children have gone into a good family and will have a good future.

Her daughter says, she was crying all the time not only thinking about the children she gave away but also because people talk about her. Especially when her brother talks bad about her, she cries.

Social Stigma

Kamala's daughter points out that her mother was among the first in the area to go for surrogacy. *"Everyone around the place were taunting her and us and would look at her with disgust and disapproval. She felt very bad with their behaviour."*

Kamala says, all these people (in the society) say that she should not have done surrogacy, "*it's not good*." Her daughter defends, "*it was never bad, our situation was bad. But what is worse is that; everybody (the doctor, the commissioning parents) took undue advantage of our situation.*"

Remuneration

Her daughter is studying in science, if one sends them to a good school that much money is needed. She says, lakhs of rupees is going in that, 11th and 12th yearly fees is 1.2 lakhs. Her son is studying in Vision school. They also give tuitions within the school and there is a fees for that too. Hence, the money they give for surrogacy is not enough for building a house, nor for education. This fees is only upto 12th class, after Engineering if one gets through by merit. On getting through in merit,

the fees in graduate college is only Rs 1500 per month. But the school and high school fees is high in good schools. Books are very expensive. In Gujarat it's all about money.

She spent the surrogacy money in building the house. She bought this house and repaired it. When she bought it, the house was in a bad condition. There was no roof in this house. The house has just one small room and one kitchen.

The remuneration is absolutely unfair. She is unable to do much hard work, they should be given some monthly salary for having done the surrogacy and they should have been given a lot more money for this risks and health impacts they have experienced, she says.

As an Agent

She doesn't like to become an agent. After eating all these medicine, I know that women experience health problems. Too much of medicine causes health problems. I have seen and experienced it. After knowing and experiencing the bad detrimental effects of this medication, I cannot take another woman for surrogacy.

(This is exactly my argument for reproductive justice. Putting another person's health, wellbeing and life at risk just to have a child of one's own cannot be defined as reproductive justice.)

She would never allow her children to do surrogacy as well.

Contract

The clinic doesn't give a copy of the contract. She didn't even see it and just signed it. The daughter adds, *"she doesn't have the understanding"*.

Talking about possible problems, she said, "with one surrogate mother there was a problem. She refused to give away the child. Eventually she had to give the child, she was threatened and forced to."

Physical impact

The daughter says that the physical impact om her mother has been huge. She has been experiencing a lot of pain. She can't sleep at night. Sometimes she wakes up and moans with pain." Kamala says, my legs are paining, the injections they give on the backbone during the caesarean.

Sarala adds "gestone is a very painful injection", many surrogate mothers said the same.

Her hands and hips are full of injections marks, she laments. If you have twins, injections is given every day, alternating sides every day. This injection is given for seven months. My backside has become hard with the injections.

Impact on her Children

Listening to kamala talk about the physical and emotional pain during surrogacy, her daughter says "why can't these commissioning parents be told "there are so many orphaned children in the orphanage, please go and adopt them."

Sarala justifies "*but they want their own child*". (Sarala is a surrogacy agent, so she tries her best to justify the activity as much as possible, but she herself never repeated surrogacy after the first time.)

To which Kamala's daughter vehemently argues, "actually my mother has given the blood to these children. They only gave the genetic material, everything else was given by my mother. So they are my mother's children too as much they are of the commissioning parents."

Kamala's daughter continues, "How many children are there in orphanages in India? Why don't they adopt? A child is a child, no matter what the DNA is. The children that my mother gave away are her own blood children."

Kamala says "are we dirty. What is there in genetics?"

The daughter continues

"it's all in their mind that their genetics is great. They believe that blood and genetics is linked with good and bad culture. But that's not the case. It's all human culture. All are human children." She explains further, "when someone is in need of blood, they take blood from another human being, does anyone become impure?" Pointing out to her mother she says, "sometimes I ask so many questions to her (Kamala) and she has no answer."

Kamala's only wish is that her children study well and achieve something in their lives.

Conclusion

The extreme inequalities between the commissioning parents and surrogate mothers leaves expectation among the surrogate mothers that the couple should help them more than what is written in the contract. The surrogate mothers feel that there needs to be a continued support from the commissioning parents to help them out of poverty or for them to build a house and have a sustainability in their lives. The surrogate mother considers the commissioning parents to be their continued extended family members. Hence this contract is not as simple as it seems, there are several complexities of human relationships that are knowing or unknowingly ignored by the commissioning parents. The clinic knows these expectations in minds of the surrogate mothers but they choose to ignore it.

23 Manjula

Manjula's was a brief interview as the entire discussion turned towards the maternal complication she had experienced in her delivery post surrogacy. She was weeping thinking of the pain she had gone through (Photo 22).

After she returned from her surrogacy, she became pregnant with her child. She went back to the Asha clinic as she had already done surrogacy in the clinic and she wanted to experience the same kind of services for her own pregnancy too. But when they only agreed for half charge treatment. Being a very expensive clinic that caters to the affluent, especially providing IVF treatment and surrogacy services for people from abroad, Manjula couldn't even afford the half charged medical bills. After a few initial visits, she went to a civil hospital in Anand for antenatal care. Eventually her delivery took place around a festive period (Diwali) when there was a shortage of doctors or nurses in the government hospital. After having experienced an extended obstructed labour for several hours she suffered one of the devastating and serious childbirth injuries; obstetric urinary fistula.

An obstetric fistula is a tear between the vagina and the bladder that is caused by prolonged obstructed labor, leaving a gap between the vagina and urinary tract. This is a condition in which there is a constant uncontrolled urine dripping through the woman's vagina. Apart from the pain, women experience rejection by family, friends and community due to foul smell. Unable to bear the pain and discomfort she looked for treatment at the Karamsad hospital. They examined her and said her urinary tract is badly ruptured and the grafting treatment would cost her 3 lakh rupees. She then approached Asha clinic again. At Asha clinic she was told that they could treat her but she would have to pay 30 thousand rupees. The doctor at Asha clinic has several friends and relatives as doctors, in and around Anand.

Her operation took place for 7 hours. Again after 25 days they removed the tubes and that procedure itself took 2 hours. Her Baby boy, sleeping in a hammock, was two years old. She says her daughter was looking after the baby since the birth of the baby until she was fully cured. She has no parents. She was not even able to stand properly for several months.

"Only I know how I spent those days. It took me nine months to heal, she said with tears rolling down her cheek."

She now works as a cook in others households. She says she is not in a position to repay the Rupees 30 thousand that she owes the clinic.

I had to shorten the interview regarding the surrogacy because she was disturbed and crying almost throughout the interview thinking about her pain with this complication. but I asked some of the basic questions. She is 34 years old, her husband is an electrician. Sometimes he finds work at other he doesn't. When he finds work, he gets Rs 200 to 300 per day. Before surrogacy she was not working, She's studied up to 9th class. She failed in English. Her parents didn't allow her to study further and got her married off. After marriage she used to do some tailoring work at home. She has two children; her elder daughter is 12 years old, studying in 6th class and her son is two years old.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2010	Anand	Asha	1b	3.5	NRIs London

She first heard about surrogacy from Narmada, a popular surrogate agent in this clinic. She is same the agent who also took Banu, Nitya and Kinjal to the clinic. She didn't have any apprehension about surrogacy because Narmada had explained the surrogacy process to her quite well. She also explained the process to her husband. She took both of them together to the clinic.

Her husband didn't find enough work and although they own the house they are living in; they needed some extra money to run the house, hence she went for surrogacy.

Experience with her pregnancy

It was only after three trials that she became pregnant.

Relationship with the child

She gave birth to one boy child. She was asked to breastfeed the child using breast pump. The baby was kept in the children's hospital. She shows us the photos of the child and the commissioning parents. She was happy that they allowed her to hold the baby. When the child was five years old, they visited the clinic. The clinic called and informed her that if she wanted to see the child she could come to the clinic. She had gone to see them. She invited them to visit her house and again gave all her contact details but they never came.

They already had one daughter through surrogacy

Relationship with the Commissioning Parents

They seemed to be Indians living in London. They were in Anand for one month, probably waiting for their visa and passport. They didn't keep in touch after the surrogacy. She gave them the phone number, but they never called up after they left.

Conclusion

Due to extreme inequalities, the surrogate mothers receive very different maternal health care services for their own births as compared to the surrogacy births. In Manjula's case, she experienced the advanced maternal health care service during her surrogacy and she returned to the same clinic for her own pregnancy in the desire for better access to enhanced maternal health care services. Dr. Nisha charged her a high fees for the maternal health care which she was unable to pay. She then went to a local government hospital and faced obstetric urinary fistula. If Dr. Nisha was providing subsidised maternal health care services for her ex-surrogate mothers even under an insurance scheme, they would have an enhanced health status than what most ex-surrogate mothers have experienced.

She has become very frail and is suffering severe financial problems too. Her monetary status is much worse now than she was before surrogacy.

24 Sunita

Sunita is Sarala's cousin sister. She was also in my documentary film 'Anonymous Mother'. I didn't take any photo as she was worried about social stigma and didn't want her photo to be published. She is 44 years of age and has studied up to 7th class. She was married off at the age of 17 years. In her village girls are not educated, she justified. Her husband has studied up to 9th class. He has been working at a shop since several years and continues to work there. Her elder daughter is 26 years of age; she has completed her Bachelor of Arts and teacher's training. Her son is 24 years old and is working in a Mill. Her youngest daughter is 22 years of age and is studying computers.

It was Sarala who told her and her husband about surrogacy. Initially she visited the clinic and was scared. It was only after Sarala returned safely from her surrogacy that she became willing to go. She was very apprehensive thinking what would happen to her children, if she dies. Initially when she went to the clinic, the first point the doctor told her was to be prepared as she may die during surrogacy accentuating her fear. She went for surrogacy basically for building/buying a house.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2010	Anand	Asha	1g	3	Hyderabad

She built the house and educated her daughter for teacher's training. Her daughter was working as a teacher until she married and left her job thereafter. Soon after her marriage, she became pregnant with a child. Her daughter is now at their home, as she has given birth to a child. But from 1st January 2019, she had planned to return to work.

Selection

"Madam introduces the surrogate mother saying " she is very poor, you can take her" and accordingly the commissioning parents choose their surrogate mothers". In Sunita's case, the commissioning parents had already tried out embryo transfers into other surrogate mothers within the clinic and hence they had already spent money on these trials. At the end of the surrogacy, they lamented that they didn't have much money left because of all these expenditures, so they didn't pay her much money above the decided amount.

The contract

She may have signed the contract, she doesn't remember. The only thing she remembers is that she was told, "*you cannot keep the baby with you after birth*".

On leaving home

Sunita cried a lot, so Sarala requested the doctor and took her out to eat from the surrogate home. It was her elder daughter was 17 years old when she went of surrogacy and she took care of the rest of the family.

Experience with pregnancy

Only one fetus survived so selective abortions was not performed on her. Sunita developed diabetes during her pregnancy. She knew that the commissioning parents had diabetes and believes that she got it from them through the child growing in her womb. Sarala says another surrogate mother developed cancer from the Commissioning parents. Ujwala got blood pressure from her commissioning parents. They were discussing of some such cases of surrogate mothers getting diseases from the commissioning parents through the child.

Because of the diabetes, throughout her pregnancy she was kept in a hospital and not at the surrogate home. She was monitored throughout for her food intake, taking injections until the caesarean. She was disturbed by this excessive confinement in a hospital and upset that she didn't have anyone to speak to throughout her pregnancy.

Relationship with the Commissioning parents

The commissioning parents were nice, but they didn't give her any additional money that most commissioning parents are expected to pay their surrogate mothers. According to Sunita, the clinic slammed a huge bill on the commissioning parents and because they spent most of their money on paying off the pregnancy hospitalisation and caesarean bill, they didn't have much money to give Sunita any extra money. Madam tries to draw as much money or possible from commissioning parents on some pretext or the other.

Sunita gave her address and phone number to the commissioning parents but they never called her. They also did not share their phone number with her. "*The day they left the hospital, they never turned back even to look at us*". The commissioning parents are trained by the doctor to keep a distance with the surrogate mothers and they behave according to whet they have been told to do, she said.

Sarala added that "those days all the payment was made in cash. The payment was handed over to the surrogate mothers in a huge bag. Earlier Madam didn't prefer direct bank transfers because this would be a proof of surrogacy and hence they gave cash payment to the surrogate mothers. In the process if the nurse or intermediate doctor pocketed a few thousand of Rupees with them during the handing over process, nobody would know."

But nowadays payment is made directly into the surrogate mother's bank account. All surrogate mothers are required to have a bank account. The Digital India programme of the Government of India envisions transforming India into a digitally empowered society and knowledge economy, which is 'Faceless, Paperless, Cashless'. This programme is implemented by controlling huge cash transfers and deposits into bank accounts. This has had an impact on the surrogacy payment methods too.

The delivery

It was a caesarean and everything was fine. She had some pain but she returned home within one week.

Relationship with the Child

The child was with her for two to three days and she breastfed the child directly without using the pump because the commissioning parents didn't arrive during the cesarean. The commissioning parents took the child and never had any relationship with her.

She felt attached to the baby but "what to do", she says.

The affection she felt for the surrogacy baby was exactly like she felt for her own children. She doesn't have any photos, "I was a dabba (fool)", she feels. We have been told and trained not to keep any attachment with the child during delivery and any affection to the child born", so she tried to do as she was told and yet felt the attachment.

At that time, the only thing in her mind was to be able to buy a house with the money she would earn.

Relationship with the Clinic

Sunita also mentioned that whoever raised their voice or demanded their rights were more likely to be heeded. They discussed that Ujwala's husband demanded a higher monthly payment because his wife was carrying twins. So while Ujwala was in the surrogate home, he was receiving Rs 6000/- per month while all other surrogate mothers were paid only Rs 4000/- regardless of whether they were carrying twins or a single baby. So they concluded that those who speak get what they desire. Those who are knowledgeable are more likely to speak out. Those who are quiet don't get any extra benefits. Savita says, she was very quiet and so was her husband and they didn't make any specific demands. Madam succumbs to people who stress on their rights. This she does to certain people just to shut their mouth.

They also discuss that she has such a powerful personality and impressive appearance and dressing style that women would dare not speak against her. Sarala mentioned, when she was in the surrogate home, "many women would touch her feet, as if she is God".

Sarala says, earlier they (the surrogate mothers) were naïve, "we just went there, followed al the rules, stayed, delivered and returned with whatever they gave us". But with age, she now knows that she had been cheated and she could have bargained for more money.

(This is probably another reason that the clinic prefers for younger women, because they are naive)

As an agent

Sunita says, she was herself so scared of going there and was happy that she returned home safely, how would she ever take anybody else to the clinic for surrogacy. (both Sarala and Sunita laugh) *"If something happens, it will come on our head; who will take this responsibility"*, Sarala explained.

Financial Impact

She bought the house, but apart from that, there has been not much impact on her life.

On repeating surrogacy

The surrogate agent reduced her age to 36 years on the recruitment form when she wanted to repeat surrogacy, but when Sunita was inside the doctor's cabin she blurted out her real age, which was 38 and the doctor told her she's too old for surrogacy. Hence she returned.

Social Stigma

One of her emotional impact is due to the social stigma. She doesn't care when the neighbours gossip about her. But she feels sad when the Pastor and Nun at the Catholic Church talk about surrogacy in their messages. They don't take anybody's name, they don't tell anything directly to anybody. But when there is any important festive day the father mentions that many Christian women are going for surrogacy and this is not good. They don't know that she had gone for surrogacy, she had lied to everybody that she had gone to Israel. But whenever they give a general message about surrogacy she feels hurt.

One lady informed the father after she returned after a long time that she had gone for surrogacy. After that, he started including surrogacy as a topic in his speech. Some women hence have started lying that they are going to Dubai for one year when they go for surrogacy.

She clarifies regarding confidentiality with me again. She mentions that many news agencies came for interviews when she was in the surrogate home but she usually didn't participate. They come with video cameras and request them (the surrogate mothers) to hold their hands below the belly

so that the baby bump is clearly visible and she didn't like that. Moreover, there is a social stigma, so she is worried. Sarala laughs and adds that, "I would run into the toilet when people came with cameras into the surrogate home".

Sunita was worried that her name or information should not be published anywhere and I assured her that it will not be published.

Impact on her children

Her elder daughter was burdened with looking after the entire family at the tender age of 16. She had to cook clean, wash clothes and do all the family, household works. While her younger daughter who was only 12 years old when she left for one year, became detached and distanced from her after she returned. Before she left, her younger daughter would not even eat food without Sunita but since she went away for surrogacy she has become aloof. Although it has been nine years since she returned from surrogacy, Sunita mentioned that her daughter still remains detached from her.

25 Shraddha

This case brings out an interesting expectation from the surrogate mother not only for meeting and being able to see the child again. Although many mention but do not openly spoke about the continued financial support they expect from the commissioning parents. Kamala (SM 22) also said something similar. "They have so much, why can't they give me something, why should I suffer in poverty, even after doing surrogacy and giving a gift of life to someone."

Similarly, Shraddha emphasises on the responsibility of the commissioning parents to take care of them even after the surrogacy. She feels that she has given the noblest of the gifts to the commissioning parents and it their responsibility to remove her out of poverty when they are living in luxuries. (At this point, the money stated in the contract and the conditions become irrelevant and immaterial. This questions the very practicality of such a contract between extremely unequal participants especially for a delicate output (a baby) that both parties feel they have ownership over and attachment with. Although the contract is over and done with, the surrogate mother holds grudges against the commissioning parents for ignoring their poverty and also their resultant health condition post-surrogacy that has reduced their capacity of rigorous work .

Shraddha originally from Anand, she has two boys one is 16 years old studying 11th and the other one 15 years of age studying in 9th. Both are studying in a convent school so there is no fees. She failed 10th class and reappeared but failed again and stopped studying: she soon was married off.

It was Meena, her neighbour who told Shraddha about surrogacy. Then Shraddha told her husband about it.

In 2005, there was a flood in Anand and their house during that time. They were houseless, but they had a land. Now they have rebuilt a house on that land with the surrogacy money. She went mainly for building a house. She received 2.4 lakhs for her first surrogacy and she couldn't build a house with that much money, so she repeated surrogacy.

She became a surrogate mother twice; once in 2009 and again in 2010. She lived in the surrogate home in Anand during her pregnancy.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2009	Anand	Asha	1b	2.4	Hyderabad
2	2010	Anand	Asha	1g 1b	3	Mumbai

Selection

Her husband said, they don't know what discussions takes place between the doctor and the commissioning parents, so they are not aware what is the selection criteria. It's the doctor who fixes the commissioning parents for the surrogate mothers, they have no choice in the matter. *"Whatever they say, we agree"*, Shraddha said.

On leaving home

She was sad about leaving home because her children were small; her elder son was only 6 years old and her younger boy was 5 years old.

Contract

No paper related to the surrogacy was ever given to her. "We cannot file a case against the clinic even if we want to, because we don't have any paper".

The transfer

She felt extremely weird about the procedure, especially because she has never had so much medical intervention during her natural pregnancy but she continued with it for the sake of building the house.

Experience during Pregnancy

She had no complications throughout her pregnancy or during delivery and yet they did a caesarean on her. As an after effect of the two caesareans, she was not able do much work and was sitting at home for some time,.

She was apprehensive about surrogacy, but the money was important for them to /build a house.

Financial condition

They rebuilt the house with the money. That's all they could with the money, they have nothing left. In her case Dr. Nisha doubted her purpose of surrogacy and even sent someone from the clinic to inspect if they have actually built a house with the money. (I didn't hear any other surrogate mother saying this.)

"One house and one operation, all the money is gone". That's when she told me that she had a complication after her two surrogacies and her uterus had to be removed."

Relationship with the children

Both the pregnancies felt like her own children. She breastfed the children directly, but she doesn't have the photo of the children. She always remembers them, she says. When she sits idle for some time, she remembers about them, *"how old they will be? How will they be?"*

Delivery

They showed the children to her both the times. The commissioning parents were in Anand for 15 days. She gave milk to the children for 15 days; because there was not much milk coming out through the pump, she was asked to breastfeed the children directly.

Remuneration

She says the remuneration as too less.

Relationship with the Commissioning Parents

They stayed in Anand for 15 days, after which they did not maintain any contact with the surrogate mother. She doesn't have the photo of the commissioning parents. She gave her phone number to them and they called her up only until they were in Anand. She gave her address to the commissioning parents, but they never visited her house.

They did not help her family financially, she mentioned. Because she continued to be in a bad condition after her first surrogacy. The could not buy the house with the first surrogacy money. *"If they had kept in touch, they could have helped me"*, she says.

The second commissioning parents spoke Gujarati and hence they had a medium of communication. "We gave the children, after that they didn't bother about us", said her husband.

"If they want to help they can help us, otherwise they can at least keep in touch with us" is what Shraddha said. "But they kept in contact with us only for the child and until the child was given to them When they got their child, why would they want to keep any further contact with me. They were in contact only for their selfish motive of having a child, that's all."

She was upset that they didn't come to see her condition after her caesarean.

Relationship with the Clinic

She goes every year to collect the school bag given by the clinic.

Her husband says, "we are obliged to Madam. It is because of her that we have this house today. Surrogacy is a blessing, with our earnings, we could not have this house. It was good that she opened something like this for women to become surrogate mothers. We will always bless her. We will not talk anything bad about her. Without this money, there would be nothing. That's our fate that my wife had to do surrogacy."

Shraddha who was quietly listening to what her husband was saying with a doubtful expression said, "Yet, I am sad because they gave less money. I became a surrogate mother, the clinic takes the money for the food, lodging and the medicine. The money was hopelessly low for all the risks and difficulties faced by her. I was treated badly not only by the clinic but by the commissioning parents. The children are taken away abruptly from us. It is overall very demeaning."

They give free school bags to the ex-surrogate mother's children on producing their mark sheet, once in a year.

As an agent

She didn't take any woman as a surrogate mother to the clinic. Nobody is willing to become a surrogate mother anymore, she notes.

Physical, impact

After the surrogacy, she has not been able to do much hard work. She is unable to carry weight.

26. Kamini

Kamini is 35 years old, studied upto 12th class and was very interested in studies. She wanted to join police force. She submitted the application form and fees for the entrance exam but her parents got her married off during the holidays and her goal remained unfulfilled. She is originally from Tiruchirappalli. Her husband has failed 10th class.

Her father was a drunkard so her mother was worried about their marriage and she was married off to a far of relation in Gujarat. She is originally from Southern part of India. She has two children; her elder daughter is 19 years old and her younger son is 16.

She wanted to earn some money for herself. her husband`s salary was only Rs 7000 per month and they had to educate both the children. They owned the land on which they were living in a Kutcha house made of wood earlier.

She already had heard about surrogacy. Her first question was; how is this done? Then she was told that the embryos are transferred directly into her womb, then she understood.

She told her husband and his first reaction was "no", but she persuaded him that she will go for the IVF trial and return with the money if the trial is unsuccessful. The first trial was unsuccessful but the she became pregnant in the second trial.

She built a house with the money. Now this is a cemented house. It's been 9 months since she built the house.

She became a surrogate mother once in 2015 and gave birth to two boys.

Her commissioning parents were from Baroda but recently since a year they told her that they are moving to America and have not contacted her ever since. The commissioning parents had transferred embryos into two surrogate mothers at the same time. The other surrogate mother also gave birth to a boy child and two boys from Kamini making it three boys for them through surrogacy.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2015	Anand	Asha	2boys	5	Baroda (moved to USA
						later)

Social Stigma

Her mother and sister knows about her surrogacy but her father doesn't know. Nobody else knows. In her neighbourhood eventually everyone came to know. Her husband's sister got to know about her surrogacy and they scolded her; they also stopped speaking to her for a while. She told her *"you should not do this, it is bad"* and so on. She justifies to me that she did it for her children, her husband is worthless, the children should not suffer and hence she did this. But this was at the cost of her herself, her health is destroyed.

"*My daughter cannot get married if everybody comes to know that I did surrogacy*", she says so she worried about this. It is a win-win situation. But the health impact is massive and the main sorrow is; separating the child from oneself in return for money.

The transfer

She was apprehensive and felt very uncomfortable. She was very scared and her feeling was similar to abuse. She was not very comfortable even talking about it. It was reminding her of the discomfort.

Experience during the Pregnancy

She faced a lot of trouble. She developed diabetes, blood pressure and thyroid problem. She assumes that she had contracted these diseases from the commissioning parents during the pregnancy (because of the mix of DNA into her body).

The medication during the pregnancy was painful. Somehow she suffered and completed her surrogacy. She also became very heavy, 85 kilograms when she was pregnant with the twins. Her legs had swollen up, she had blood pressure. Her sugar level was high; never falling below 160-180 throughout the pregnancy. Moreover, she was very frustrated because they kept her throughout the pregnancy at the hospital and she was not allowed to go anywhere.

Delivery

It was a caesarean and soon after the delivery her BP and sugar problem vanished. It was painful. Both the children were 2.5 kilograms each. After they removed the children, they showed her their faces just once. After that they took the children away and never showed her their face ever again. They didn't want her to feed the children her breastmilk. The commissioning mother herself was taking several months of medication for breastmilk and she herself breastfed the children.

Health impact

She still has thyroid and takes medicines for the same. "Sharir bhangar thayi gayo che", she said in Gajarati. Meaning "what remains of her body after surrogacy is nothing but junk, a scrap. Just wasted, what to do", she says. "If we go against nature and do something, it is difficult for the body, the body suffers", she explains.

She used to go for clinical trials earlier but now she has stopped all that. "What's the point in destroying one's body beyond a level?"

With twins and high blood pressure she was eating 16 medicines per day minimum, 4 medicines four times in a day,

Earlier she was OK but now her body has swollen, her stomach has swollen. The injections were painful, the caesarean was painful too. "I suffered a lot. In the seventh month, they start giving another set of painful injections."

Earlier she would easily pick up 25 kilograms, but now she is unable to pick up anything. She feels all the medicines have had a bad effect on her body. Her body has become 10 years older with all the medication and injections.

She looks at Sarala and comments that "she was so good, now look, after doing all this drug trial has spoilt her health." Sarala announced proudly that she has participated in 75 clinical trials so far (Sarala laughs).

Relationship with the Commissioning Parents

They left for the USA in 2018. Until they were in Anand, they spoke to her and sent the photos of the children every year. But after that they have stopped contacting her.

They sent her the photos of the children every year for two years. After that they informed her that they are leaving for America and never contacted her again.

"They behave as though we are going to snatch their children from them", so she also didn't keep much contact with them.

Relationship with the children

She always remembers their birthday. It's very painful remembering them, but she says she did this for her children. They are born from me, so they are my children. But one has to strengthen one's heart and move forward. She repeated this sentence several times during our discussion.

On leaving home

She was not happy going to the surrogate home, but then she saw everybody in a similar situation and felt somewhat better.

Relationship with the clinic

The clinic takes 11 lakhs for each child from the commissioning parents. They cheat us. They use our body to make children and money. After that they don't care about us. She goes to collect the school bag from the clinic, once in a year. Otherwise she doesn't go to the clinic

As an agent

She would never become an agent, she said. "What I did was a sin. Why should I take another person to commit the same sin. That other lady will suffer like me.", were her words. "If someone dies what will happens who's responsibility will it be? Hence I don't take anybody. Some women can take it, whole some women cannot tolerate the treatment. Even for a strong woman like me, I got thyroid and it is now stuck to me."

Contract

They didn't give her a copy of the contract. The main points written in the contract were; to give away the child after birth, there can be no relationship between the commissioning parents and the surrogate mothers and the remuneration of the surrogate mothers.

Present work

She is now working as a caretaker for an elderly woman in Ahmedabad. She wakes up at 5am takes the train to Ahmedabad and returns home at 8pm.

She's unhappy marrying this man. He's mentally disturbed she says. He has a psychological problem as he is an orphan, he was brought up in an orphanage in South India. He gets angry very soon, he fights. Even just before I arrived they were quarrelling. He wouldn't drink or beat her. But he's a suspicious man. They didn't know about this before marriage. *"Where can I go now?"* She ask me, frustrated. When she came to this place after marriage, she didn't know the local language. Now she speaks fluent Gujarati and works here. She's more confident now, but unhappy with him.

Her financial condition has improved and stabilised. But physically she has faced and continues to face a lot of problems. Emotionally too she has been impacted but she tries not to think about it. She thinks about it as though it was a dream and didn't happen.

27. Seechal

• I visited her house at Sureli.

Sonal is 33 years of age, she said, she said, she has four children; eldest son if 17 years old studying in 12th class, her second boy is 14 years of age studying in 9th class, her third boy is 10 years old studying in 7th and she counts her youngest child as the surrogacy child as her youngest boy. Her husband has studied up to 10th class.

She studied up to 5th class. Her parents didn't want her to study and the school was far away. Now both her parents have passed away. She has only one sister who is younger to her. Her mother passed away when she was young, 12 years old. Her father was alive but he was a drunkard and only drank himself to death. It was her mother's brother who looked after her and her sister and got them married off.

She and her husband own a brick factory, so they have enough money.

Initially it was Dimpy who told her about the clinic and she was supposed to go again 21 days after her menstruation date, but she didn't go at that time

Later Chhaya from her village Sureli who first told her about surrogacy. Chhaya had informed her everything about surrogacy. After hearing that everything takes place with the help of medicines, she planned to go. The purpose of her surrogacy was to build a house. Their income is sufficient only for food expenses, she says. But they own a land on which they had a small house but don't have any rental.

Selection

The commissioning parents choose basically on the appearance of the surrogate mother. They select only those women who look good, those who don't look good are not selected by them.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2014	Anand	Asha	1b	6	UK NRIs, (Raksha
						Kiran Mistry)

Contract

They don't give a copy of the contract to the surrogate mothers. I asked if there is any breach or problem during the surrogacy what would happen. To which she justified that "*if we follow all the rules set by Madam, nothing can ever go wrong. If women don't take the medicine then anything can happen.*"

On leaving home

She did not keep any apprehension; she left everything in God's hand and went for surrogacy.

Her mother-in-law cooked for the nine months she was in the surrogate home. Because the child was from Anand, the named the child also Anand.

At the surrogate home

The food was good. Only ladies lived there, men are not allowed to stay there.

Transfer

She badly wanted the report to come as positive. She left everything to God and it was a positive pregnancy.

Experience with the Pregnancy

Extreme medicalisation. She was instructed by the substitute doctor to take all the medicines on time.

Experience with the Delivery

She was very scared. First they tried for normal, she was given IV too but the delivery was not normal. It was a planned caesarean. The child was 3 kilograms at birth.

It's not a normal pregnancy, it's an artificial pregnancy environment created by medicines and hence despite trying, the delivery an never could never be normal.

Relationship with the Commissioning Parents

They were nice. They told her that if they come again for surrogacy, they will call her again as their surrogate mother. She had a number earlier, but she has lost it. She received calls from them until 2015-16. After that there is no contact. They were happy that the child was healthy. They didn't visit her house. They gave her the child's photo soon after he was born, but they didn't send any photo of the child again to her. They have access to her address from the clinic, she says. But according to the rules imposed by this clinic the commissioning parents and surrogate mothers are not supposed to be in contact with each other. Hence if they lose each other's contact numbers or address they get no assistance from the clinic. Even if they come to her clinic, anyone would direct them to their house. But they didn't come. They have never returned after the surrogacy. She hopes that they may come again when the child grows up.

Relationship with the Child

They showed her the baby boy, gave him in her hands, took photographs and gave three photos to her too. She is very happy that they allowed her to hold the baby. They were in the hotel and she was in the clinic surrogate home. She was providing her breastmilk using pump. The commissioning parents would come to pick up the milk from the clinic.

She got attached to the children during pregnancy. The baby seemed to be naughty, moving all the time inside. She too had three boys. She felt as though it was her own child. He (the baby boy) even looked like her other children, she mentioned.

She sighs thinking of the time she gave the boy away. "What can I do, I have to give the baby away. I went there for giving the baby, so I have no choice but to give it away." But She pacified herself thinking that she has three boys and they don't have any. "They (the commissioning parents) were happy having the child, especially since it was a boy child, they were very happy." She was also happy. It's a worthy work.

She thinks about the child occasionally that; the boy would be 5 years old now, how the boy may be looking like? He has gone to a rich family. (she laughs)

Financial

With the surrogacy amount, she built a house in Sureli.

To repeat.

Dr. Usha from the clinic, told her to come for another surrogacy but her children are not letting her go. They say, *"who will cook for us"*. (all laugh)

She wants to go again to earn money to marry off all the boys one by one, but they say they will start earning in a few years too, hence there is no need for her to go. Her husband also agrees with the boys.

Remuneration

She is satisfied with the payment. Rs 25 thousand payment every 3 months, 3 thousand rupees per month which was sent directly to her house.

Health impact

Healthwise she says, she has no problem. She ends the interview saying "*Madam is a nice person*". She prefers the surrogate home where women are looked after, all facilities are available. Now there is the new hospital.

She doesn't go for clinic trials or egg donation anymore.

28. Radha

She was cooking when I reached her house. Her husband had gone to work and her son was getting ready to go to school. She spoke to me while she was cooking for the day (Photo 23). According to Sarala, they have agricultural land and a house in the village but they chose to live here in the city for better educational facilities and better lifestyle.

She lives after marriage in Nadiad. She has two children; her elder boy is 10 years old studying in 4^{th} , and younger girl was 8 years old studying 2^{nd} class. She is 27 years old.

Earlier she lived in Kosadia; she has never attended school. As she was living in a village, she worked as agricultural labour along with other family members. There as a school in the village but she didn't go, instead she was sent to work, All her siblings were sent to work in the farms as agricultural labourers. All her siblings have studied up to 3rd to 4th class. Two sisters are yet to be married off.

She has a huge family of seven sisters and two brothers; one eldest brother and one youngest brother. She is the fourth sister in line. Her eldest brother is the only one who has studied upto 6^{th} class.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2012	Anand	Asha	1b 1g	6	London, NRI.
2	2016	Anand	Asha	1g	4.75	Japan, NRI, from Gandhinagar

Before Surrogacy

She first heard about surrogacy from Sarala (SM 3). She had some apprehension about it, then she went and saw so many women were in the clinic and said yes. She was scared if anything wrong happens; if she would die or have a serious complication. The she saw everybody there at the clinic and was satisfied. Everybody reassured her that nothing will go wrong. Sarala told her everything.

They were staying at Dakor, her sister-in-law came to their house and informed her and husband and other family members together, about surrogacy. They left their home at Dakor and came here to Nadiad just for doing surrogacy. She says the village is not good for educating children. Her husband works in a farsaan (snack) shop for a salary of Rs 6000 per month. The shop is nearby so he sends the children to school and goes to work. She works as a house maid in one house. She cleans the house and washes vessels. She doesn't like to wash people's dirty clothes. *"It's almost like my house there. I work as though I am working at my own house. If they want to go out when she's working, they go leaving her there."* If she needs some money they give her. Every month they give her 10 kilograms of rice.

The children will leave for school at 12 and she will complete my work and return, children will return at 5pm. Life goes on like this. Instead of sitting at home, I took up this work, at least the children's fees can be paid off. Their fees is Rs 210 each per month.

She became a surrogate for building her house. But she still lives in a rental house.

Purpose of Surrogacy

With the money she earned from surrogacy, she released her in-law's agricultural land that was kept on lease against a loan. "That land was kept on lease because of the marriage expenses of my husband's elder brother and my husband's marriage."

The loan that her in-laws had taken to spend on their son - her husband`s marriage (her marriage), she had to do surrogacy to repay.

With the surrogacy money she also built a house in the village, only some plastering work remains. Her parents-in-law, her brother-in-law's family all live in that house. They send wheat to Radha and her husband. Although the house was built through her surrogacy money, that house has not been registered on her name, it is in the name of her parents-in.-law.

She now lives with her family in a rented house paying Rs 2500 per month.

"Everyone has money and land, nobody comes to help me with money for free". They were not so rich and they didn't have land at the time she did surrogacy. Her in-laws had given it out on lease against a loan.

If the money was lesser, she would have still done it. She did a lot of things with this money, released the land, built a house, saved for her children and so on.

She would never do it for free. She asks me, "will anyone do it for free in today's world? no one will do it." She did it for her children. "Only if there was money, I would have done it. They (commissioning parents) had a need, we also had a need, so I did it."

Selection

The commissioning parents choose the surrogate mothers, not the other way round. "*They have to keep their child in our body, so they will look and choose a good woman for that purpose. They see our face, our behaviour; she (the surrogate mother) should not be very adamant. They also look at the caste In case they want a Patel or a Christy (Christian), they choose accordingly.*"

Her commissioning parents looked at the file and saw her photo and selected her, The file had all her details and according to their choice they selected her as their surrogate mother. Her first commissioning parents were very nice, she says.

In her first surrogacy, she went to Ganesh Chowkadi, the second surrogacy she was put up at the all-inclusive new hospital complex. The new complex was made in 2014-15.

Surrogate home

Surrogacy Contract

When she went for the second surrogacy, her first contract was stored in her files. She says the lawyer is witness to her signature on the surrogacy contract so it's not absolutely necessary for her to be given a copy. The hospital can deny, but the lawyer cannot deny that she was involved in surrogacy. She says if any breach takes place, she can approach the lawyer.

(She is unable to understand or doesn't want to say that even if there is a breach of contract she will not know because she doesn't have a copy of the contract.)

I asked her if the clinic would give her a copy if she asked for a copy, "I cannot speak to Madam directly, but when I go to the clinic, I can talk to the nurse and ask if she can get a copy of her contract." When she goes to take school bags, she may ask. After she returned from her second surrogacy, she has not back to the clinic.

Transfer

She became pregnant in the first trial in both her surrogacy pregnancies and she didn't have any problems during the surrogacy.

Relationship with the Commissioning Parents

The first commissioning parents

Radha says, the first commissioning mother was very nice. She never alienated her when she was here. She would give the children straightaway to her whenever Radha felt like holding them. She would say, "you kept the babies for nine months so the babies are yours." She would to carry my children, my daughter was small at that time." She never made her feel the class difference. It's not like they are affluent people so they will keep a distance from me". They were here for 7 months after the birth of the children. They invited her several times during that time to meet the children, to treat them with dinner outside in some good restaurant. The commissioning mother was very fat and unable to pick up the babies comfortably, so she had appointed two nannies for looking after the children. "They brought them to the hospital, showed the babies to all, they also gave the babies to others to hold, they never felt that the children will get infection."

They never visited her house.

They were nice, she concludes. But since they took her address and phone number and left, they have never called her again. *"I don't know what happened"*, she says.

The second commissioning parents

They didn't stay back even for 14 days. They used to come and meet her in those days. She provided breastmilk to the girl too for 15 days using a breast pump. They also never called after they left. She had given her number to them. When she left she gave another Rs 10 thousand to Radha for the children. She was sending Rs 2000 per month. The commissioning father's mother was living in Gandhinagar, so they would come and meet her once in a month during pregnancy at the surrogate home. The commissioning mother is a Japanese but the commissioning father is a Gujarati man. She looked different and couldn't speak Gujarati. The Japanese lady didn't allow her to take photographs of the baby girl.

"If they had kept relationship with her and sent her the photo of the children, it would have been nice". Now she doesn't need any money, she needs human relationship with them. If they had informed her about the wellbeing of the children occasionally, she would have felt good. "Maybe they don't want the children to know about this, that's why they cut off all the contact", she muses. She thinks about the twins who would be five years old now. If they (the children) come in front of her, she says she will easily recognise them. "I was with them for seven months. I can never forget their face. They were looking very similar to my children except that they were fairer and healthier than my children."

Social Stigma

Nobody knew about her surrogacy when she first went. When she actually went for surrogacy for the first time, the neighbours didn't know her exact activity or whereabouts. Eventually when she returned after one year, it was only then that people got to know that she had gone for surrogacy.

She says, "I have no problem that people got to know, I did it for my children." Nobody in her neighbourhood has done this.

Relationship with the Children

She provided her breastmilk to the children using breast pump. She has a very different opinion about the relationship that the children should have with the surrogate mother. She feels, the children should never be told about the surrogacy as the children may start hating the commissioning parents. They will think that their parents have bought them from a surrogate mother by paying her money. They may still keep in touch with the surrogate mother but they should not be told that she is their surrogate mother. I had attachment but the children was theirs not mine. *"They (the children) have gone to very good hands, I don't have to worry about them.* They were so happy that they distributed sweets to everybody in the clinic."

She was very sad when they took the children and went away. The day before they left, they had called her to see the children. They were also crying along with Radha. They were saying, "we are taking your children and going, you will feel bad". (This is about the first commissioning parents).

Health outcome

She is very often falling sick after her surrogacy. Earlier she had Malaria and now she has Typhoid. She had not gone to work for 5-6 days but she was planning to begin again that day.

Finance

After building the house, she has saved Rs 3 lakhs in fixed deposit in a bank. She has not studied but she wants her children to study. If they go for some good job, their life will be good. They opened a life insurance for her after the surrogacy; first three years the first commissioning parents will deposit Rs 8000 per year and the next three years the second commissioning parents will deposit Rs 8000 per year. It is a life insurance for six years.

Remuneration

She got more than the agreement, so she's happy. She says the commissioning parents also have to spend a lot of money. The clinic gives the same amount to everybody. If the commissioning parents pay the surrogate mother more, it is her good luck.

(She justifies why the commissioning parents are unable to pay a bonus, although this was not my question.)

"The 15 days injections costs them 15 thousand rupees and they have to pay all the hospital expenses and after all that they pay the surrogate mother. They give the best medical facilities: The money they have to give us for the surrogacy is unfair."

To repeat

She will not go again as she has already had two caesareans. Even if it was allowed for a third caesarean she would not go again because all her purpose has been fulfilled, the house has been built, she has saved money for her children. Henceforth she will only work hard and earn money for her children's life will improve. If they want to study further, there is some savings for that purpose.

Her children and surrogacy

She will never send her children into surrogacy. She has done this only for the sake of her children, so that they have a better life. She has not told her children about the surrogacy. She doesn't intend to tell them ever. "My children will feel ashamed if they come to know that I did surrogacy. That their mummy did surrogacy". I asked her will they not know eventually, because the entire family knows. To which she answered yes, "when they become big, they will come to know. But who knows if I will be alive or dead when they grow and come to know."

As an agent

She went for surrogacy for herself, but she wouldn't take other women for this. Surrogacy is a very difficult process. Moreover, as an agent, she would be required to travel to Anand, to the clinic, to support the surrogate mother she referred to the clinic. She would have to leave the children alone for this purpose, so she doesn't go.

She donated her egg once and she had no problems with that either. She went for clinical trial just once for egg donation, before she participated in surrogacy. Since then, they call her every month to come for egg donation but she doesn't go. Now she doesn't need money.

Because she says, "this (surrogacy) itself was a mammoth job." Her entire family praises her that she has done a great job. "No daughter-in-law does this kind of work for the in-laws, you have done it", they tell her. Now, they have warned her against going again, because she keeps falling ill since her surrogacy. Sometimes she gets typhoid, sometimes she gets malaria, her body has become very weak and susceptible to illness. She contracts some or other illness, all the time. So now her in-laws and family members dissuade her from going. The second time too, some of her extended household members stopped her from going., but she thought most of the money went for building the house and there was nothing much left for her children, so she repeated.

She has lost her appetite since she contracted typhoid. Earlier, until her surrogacy she did lots of work in the agricultural farm as well as house work, nothing happened to her, but now she falls sick very often. She has also put on weight after surrogacy. She put on a lot more weight when she was carrying the twins.

29 Yasifa

She is 26 years old, has studied up to 11th class in Arts. She was married off at a very young age, when she was16 years old. Within a year after marriage she gave birth to a boy child. She has four sisters and one brother. Here in Anand is her in-law's house. Herb maternal house is far away.

She is now working as a maidservant in two houses earning about Rs 2000 per month. Her husband works as a labourer in the vegetable market and earns **Rs 4500 per month.** Her present home rent is Rs 2700 per month and it will increase to Rs 3000 per month after two months.

Her daughter was born after she completed one surrogacy.

She started her conversation with me saying "we have given the sacrifice of our life by handing over a baby, a part of our life, to someone else and what do we have now? The purpose of doing surrogacy (to buy a house) has not been served. We couldn't buy the house, that is why we did surrogacy, we're living in a rented house. Moreover with a deteriorated health, financial and emotional status."

It is the responsibility of the clinic and the commissioning parents and also the government to protect us from poverty and provide us with health and medical insurance.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2013	Anand	Asha	1g	4	Bangladesh

She went to the clinic for egg donation but her eggs were of poor quality and less in numbers. Hence Dr. Nisha asked her to go for surrogacy. She was 20 years old when she went for surrogacy. She went with the purpose of buying a house, but she couldn't buy a house with the money she received.

She was very apprehensive about surrogacy initially. It was after Nargisa returned that she went for surrogacy, but it was only after she began the process that she got to know about the extent of trouble.

Because of the lesser quality eggs she donated, Dr. Nisha told her that she was not confident whether she would become pregnant and hence she asked the commissioning parents to try out embryo transfer on two surrogate mothers simultaneously. But Yasifa became pregnant while the other surrogate mother didn't.

Selection

They were a Muslim couple from Bangladesh and they wanted a Muslim surrogate mother. It was the commissioning parents who selected her because she was a Muslim. She says, surrogate mothers would never be given the right to choose the commissioning parents.

Although both are in some form of need; they want a child and she wanted money, but the rights are all in the hands of the commissioning parents.

Contract

She was not told how much payment she would receive. They never told her when she signed the contract. She says this decision is made inside Dr. Nisha's office and the payment is not similar for all surrogate mothers. She is sure that they don't give the amount the commissioning parents give the clinic for paying the surrogate mother. She is not given a copy of the contract. "Once we give the child(ren), our story is over".

On leaving home

I stayed away from my home for nine months, away from my children, adjusted with whatever they told us. When she went for surrogacy, her son was only 3 years old. She cried a lot when she was at the surrogate home. There was nobody to take care of her son, her husband or her house. Her husband came once in 8 days to meet her. She would cry every time they came to meet her. They didn't allow her to keep the child at the surrogate home. "My house was in the same city as the surrogate home, it was heart wrenching that I couldn't return home for longer time.

There was no psychological support for them inside the clinic. We would give solace to ourselves. She was staying there with a heavy heart. "*Humne dil pe pathar rakh kar* surrogate home *mein samay guzaara*". (meaning "I endured the time inside the surrogate home patiently".)

"Once the pregnancy report is positive, they (the clinic) would leave the burden on our shoulders to complete the nine months". In case of any problem, the surrogate mother would be blamed. Every 15 days she was taken to the clinic for a check-up. Other than that she was least bothered about what she ate, drank, how she spent her time in the surrogate home. it was none of her business. "Nobody paid any attention to us in the surrogate home".

She was living in a rented house and the monthly income (Rs 2000) that they provided from the clinic during her surrogacy, was not even sufficient to pay the home rent at that time.

The food that they cooked there was very bad, she used to ask some of her relatives to bring some food for her. Food was sometimes uncooked. She was at the surrogate home in Ganesh Chaukadi.

Her Commissioning Parents were from Bangladesh and they would call up once in a while and send some money to the clinic to buy some food for her. Here at the clinic, she says, no one was bothered about her.

When she returned home for one month to take care of her sick husband, Dr Usha called up the commissioning parents and complained to them that Yasifa has gone home. They called her up and scolded her, "why have you gone home?". She explained to them her situation that her in-laws stay away and her husband was sick, moreover no one to look after her son and hence she had to return home. In a month, Dr. Nisha called her and asked her to return to the surrogate home. Again she was very depressed and sad to return and stay at the surrogate home.

Pregnancy

All the injections were very painful. She can feel the hardness at the place they gave her injections throughout the pregnancy.

Everyday she was given injections on her hips, her hands, on her stomach. Lepron was one of them. Three injections were heavy. She was given all three together, she doesn't know the name of the injections, she was never given any receipt of what medication was given to her. During the seventh month, she was given seven injections. She explained the needles was thick but she doesn't know the name.

Relationship with the Children

She felt attached to the child just like her own child. She also looked after her health very well when she was pregnant.

Four years after her surrogacy, she once got to know from her sources that her commissioning parents had come to Anand again for another transfer. They wanted a boy child.

She was not directly informed by the concerned doctor. She also gathered information about the hotel they were staying. She went directly to that hotel in Anand to meet them and told the commissioning mother's name at the counter. The receptionist called up their room and told them that Yasifa has come to meet them. 'Rina Shahadat', the commissioning mother couldn't meet her as she was sleeping after the egg retrieval procedure. The commissioning father brought the little girl to the lobby.

She met her daughter and said *"hello, how are you?"* but she looked at her astonished. The commissioning father told her *"say hello to aunty"*. The baby girl daughter kept looking kept looking at her and then slowly extended her hand towards her.

"I thought I should at least go to see how my daughter looks. I saw my daughter and was very happy, she was 4 years old at that time and looked very cute, she had beautiful eyes. She held my hand and wouldn't leave it." The commissioning father enquired her well-being and told her that his wife is sleeping after egg extraction. She was there with them for a while and then left.

Neither the commissioning parents nor Dr. Nisha informed her that they were in Anand.

If she could see her (the baby girl), once in a awhile it would be so nice and she would be satisfied. Otherwise her mind keeps imagining how she looks and what she would be doing? "*Now she would be 6-7 years old*".

Delivery

Initially she was ignored and pains continued for several hours. She pleaded the nurse to call the doctor but it only after several hours that the doctor arrived and when she arrived she was taken for a caesarean immediately. She cried a lot. She had never imagined being operated upon, but in surrogacy she had to face an operation. When she entered the elevator, she was unable to see anything, she had blood pressure problem during the pregnancy.

After the delivery, they took the baby and went away. Her husband ran after them to take one photo of the baby to show it to Yasifa later. They shooed him away saying "the child will catch infection if you come close". But he adamantly insisted and took a photo from a distance even without their consent. He was keen to show the photo of the baby girl to Yasifa later. He said the lady who carried the baby for nine months should at least have the right to see the baby. Yasifa says, "when I had the baby in my womb for nine months, the child didn't get any infection, but now just by my touch the baby would catch infection." They took the baby straight to the hotel. Later her husband showed her the photo saying, "they have already left, you see this photo and be happy".

But they came to collect milk at the surrogate home. Yasifa fell sick both emotionally and physically because of the bad treatment. They stopped pumping milk from her because she was sick. Every evening she would get fever in the surrogate home after the delivery. After 2 weeks, they allowed her to visit the hotel to see the child.

Relationship with the Clinic

The commissioning parents paid her Rs 1 lakh extra, hiding form the clinic. If the clinic gets to know that the commissioning parent has made any direct payment to the surrogate mother, Dr Nisha calls for the surrogate mother to scold for taking money directly from them. She says "why do you do like this, why do you take money from the commissioning parents." But according to Yasifa, "we sacrificed our life for this, if we don't even get a decent payment in return, what is the purpose of doing this." She says she doesn't have a house, nothing. The bike is the only item she bought with the money. She says they bought a bike for him to reach the vegetable market every day. The rent in the area around the vegetable is very high and they cannot afford it.

"The clinic paid her Rs 2000 per month for monthly expenditure, which was not even enough for food, one can forget about paying rent."

The commissioning parents make a monthly payment to the clinic for providing food to the surrogate mothers. The clinic is supposed to pay this money to the surrogate mother if she returns home for more than a month. Yasifa had returned home for one month in between to take care of her husband when he fell very sick. Dr. Usha (a close accomplice of Dr. Nisha) didn't pay her money for that month.

The commissioning parents had given extra money to the matron of the surrogate home to give her cashews and almonds, but she pocketed most of the money. She would give her 250 grams of dry fruits per month, although she got to know that they charged the commissioning parents money to buy a kilogram of cashew.

They strictly told her not to share the dry fruits with her child when he came to visit her once in a week. "How can I eat without sharing it with my child? My child was just 3 years old. I was helpless that is why I went for this wretched contract".

They stop Yasifa from coming to the clinic (for the body market) anymore, because her eggs were not of good quality and because of her RH negative factor.

She goes to the clinic only to take the bags given free of charge once in a year from the clinic. Even for that, she has to stand in the line, tell the commissioning parent's name, produce the child's results. Only if the child has passed the yearly exams do they give the bag. *"They will cross-check our names in the surrogacy register. Don't they know my face? It is because of me and other surrogate mothers that she has raised this glass palace. If Dr. Nasha takes the trouble of meeting us even once in a while, she will know the bad situation of the surrogate mothers"*. They don't give the bag and books for women who have had miscarriage during the surrogacy. According to her, this bag is distributed by external donors, not from any surrogacy fund as Dr Nisha has been saying in many news channels.

Yasifa tells me to go and visit the new hospital, to see with my own eyes how much money the clinic has earned through surrogacy and the surrogate mothers continue to remain in poverty surviving hand-to-mouth.

Her daughter was born in a government hospital. "If we go to this clinic for our own pregnancy or treatment, they will chase us away from the gate itself".

"The bag and the book together may cost not more than Rs 300/-. This is what they give in return for our wasted body. No medical insurance, no life insurance, if anything happens to us, who cares?" Her sister-in-law had a miscarriage during her surrogacy pregnancy and was sent home. After 15 days she began to bleed heavily and she approached the clinic but she was refused treatment. It was only when her health deteriorated very badly that she was taken in the clinic for treatment. She had to request one of the nurses to convince Dr. Nisha to treat her in the clinic. The nurse convince Dr. Nisha to treat the surrogate mother, before something serious happens and she dies, it is only then that Dr. Nisha took her case.

It is only after going there that she got to know that all this happens. She justifies that she went there only because she was helpless.

"The clinic has become so rich with the surrogacy money. It is the surrogate mothers who stay away from their families, put their health and life at risk. The remuneration that is given to the surrogate mothers is very unfair."

Relationship with the Commissioning parents

Her commissioning parents had made three attempts at surrogacy before they tried with her and it was successful at the first attempt with Yasifa. They tried IVF trial with two surrogate mothers simultaneously at the same time. Nobody believed that Yasifa would become pregnant but her report came positive.

They didn't keep any relationship with her because she didn't agree to become a surrogate mother for the second time. They wanted Yasifa to be her surrogate mother again. Her blood group is RH negative, she had problems with her first surrogacy. Even Dr. Nisha advised her not to repeat surrogacy because of this problem. They called her several times and enquired about her wellbeing but when she refused to repeat surrogacy for them, they cut off all contact. They repeated surrogacy in the clinic.

At the time of surrogacy she had only one boy child and she wanted to try another child of her own. Hence, she refused for another surrogacy. Her relatives too told her not to go again, as it could be problematic for her to have further children of her own.

Financial Impact

Financially she is exactly where she was even after surrogacy. She continues to be hand to mouth. She incurred a lot of expenditure when she was recovering after her caesarean.

Those who go for second time for surrogacy are only those who have benefitted from surrogacy.

They (the clinic) has given away more than 1000 surrogate babies. This data has been proudly printed on every bag gifted to the surrogate mother's children every year as a promotional advertisement for the clinic. So that everyone who sees the bag, will get information about the clinic. '

30 Saadia

Saadia lives in a shanty in a very bad condition near a railway track (Photo 24). Initially she gave me a very rosy picture about her financial condition post-surrogacy. She told me that they bought a house but are staying in this shanty house to care for the goats. I couldn't believe what she told me but I continued asking her questions and in return she kept on asking me if I had come from the clinic and if I would tell the doctor all that she tells me.

After a while, her father-in-law intervened and shouted at her "*why are you lying? why can't you tell her the truth?*" It is only then that she started revealing the facts about her surrogacy experience and her present life situation.

Saadia is 25 years old. She is a non-literate, has three children; two boys and one girl, The elder two boys are 6 and 5 years old and her daughter is 4 months old (Photo 25). She and her husband were labourers and she did surrogacy for buying a house. They did not own any land or house at that time.

She did surrogacy for buying/building a house. She was a surrogate mother in 2015 and received Rs 7 lakhs (€9000).

They built a house for 7.5 lakhs, meaning they took an additional loan of 50 thousand Rupees for this purpose. Unable to pay the loan and another sickness in the family which cost them Rs 30,000 added up to several losses and debts. Now they have sold the house and lost a lot of money in the process.

Now she has bought some goats to run the household. Her father-in-law and mother are living with them. This is clear case of a very poor family who wanted to become rich in the surrogacy money and the money management went completely awry.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2015	Anand	Asha	1g 1b	7	America

Contract

She has no idea about what was written in the agreement, she cannot read.

Financial Impact

She bought a house with the surrogacy money. Her health condition was bad after surrogacy and she spent 3 lakhs and 30 thousand rupees on her treatment. They finally had to sell the house due to debt and they are now on the roads again.

Pregnancy

Her second boy was one year old when she went for surrogacy. Firstly her breastmilk was dried out through medication.

She tied to retrieve contact with the commissioning parents but she couldn't get the contact. She bought a house for 7 lakh 50 thousand rupees. She spent a lot of time not telling me the reality and I had to leave soon as it was getting dark and it was not a very safe place to be in.

Her commissioning parents were very nice, according to her. She showed me the photographs of the commissioning parents and the children (Photo: 25). She was frantically trying to get in contact

with them. She wanted to tell them that they are in a very bad situation of poverty. She has gone much deeper in abject poverty than what she was before her surrogacy.

Commissioning parents

The commissioning mother was a very nice and affectionate lady. She didn't show any kind of class differences when interacting with her.

She breastfed the children using a pump. She was located in the children's hospital to provide breastmilk to the children. After 15 days, the commissioning parents shifted the children into a hotel along with them (Photo 26). The commissioning parents stayed back in Anand until the received the passports for the children.

Conclusion

Yasifa gave me the email address of the commissioning parents. (She was scared to share their email address with me as the clinic might chastise her for if they come to know about it. She wanted me to write to them but she didn't want the clinic to know about it. Now this is weighing on conscience whether I should keep silent or should I contact them? There is no easy answer to this.)

Unfortunately, she is one of my worst cases. She has gone back into abject poverty. She is living in a shanty, near a railway line in Anand. I think she didn't get support on how to spend the money she received effectively. One health problem in her household and she has slipped into worse poverty than her household situation before doing surrogacy.

31. Mariam

(A week after my interview with her, I heard that her husband passed away. He was also an alcoholic.)

She is 42 years of age. He elder daughter is 18 years old and second daughter is 13 years old. She has a son who is 11 years old.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2010	Anand	Asha	1g	5	USA
						(Elizabeth)

Mariam has been working in a hospital in Anand. She was earning Rs 5000 per month in 2009 which has now increased to Rs 6000 per month

Mariam was working in a hospital where Dr Nisha's sister-in-law, Dr.Sejal also worked. Nisha has told her sister-in-law Sejal to help her to find poor women for surrogacy.

Dr. Nisha had told Dr. Sejal to watch out for poor in her clinic for enrolling into surrogacy ar Asha clinic.

Dr. Sejal approached Mariam and asked her if she would like to do surrogacy. "She started coercing me", initially Mariam refused, because she felt this activity is like selling one's own child. Then Dr Sejal explained to her that it is not a sale of child but a renting of her womb. She assured her that *"there are no men around when the embryo is transferred, it's all done medically so she doesn't need to fear."* Her husband already knew about surrogacy. Dr. Sejal also mentioned all this to her husband, one day. Her husband is an alcoholic, although he was earning, it was insufficient for the household. On knowing about this option from Dr. Sejal, he also urged and pressured her into surrogacy and she couldn't refuse him. Finally, Dr Sejal in the hospital explained to her husband and her together that this is the right thing for her to do, and hence she became a surrogate mother.

She agreed to go, just for earning money to build a house and save some money for her children.

Selection (religion)

The commissioning parents selected her, she did not have the right to choose them.

Dr. Nisha introduced her to the commissioning parents. The only question they asked her was that if she was a Christian and Mariam replied "yes, I'm a Christian", then they were satisfied. The commissioning parents were Christians.

Christmas was nearing so she said she would go later for surrogacy, but Dr Nisha assured her that she would send her home for Christmas if the results turn out positive, so she obliged. She became pregnant at the first IVF trial, but exactly on the day her report came positive, her husband met with a bike accident. He was working on the road as a labourer and a bike hit him.

Both his hand and legs had been badly affected. He had to be kept in a hospital for three years. Dr Nisha was forced to leave her for a few months to care for her husband but with strict instructions. After four months she was asked to return to the clinic and stay there for another 5 months. It was only 15 days after her caesarean that she was left free to return to care for her husband.

Dr Nisha called her again for surrogacy so that she can pay for her husband`s hospital expenses and his treatment, but she refused.

She says, "this is a bad money, this will never remain in our hands". Her mother-in-law and everyone around her (her relatives & friends) all say this (surrogacy) money is sinful. There is a saying in India that *be-imaani ka paisa tikta nahin* – money earned through dishonest doesn't last for long.

Her husband stills limps but is presently working as a tile roofing labourer. For three years, he walked with a walker.

If it was Rs 2 lakh she would still have done it. If there was no money she would not have done it.

On leaving home

Her son was one and a half years when she went to the surrogate home. She had already weaned her son from breastfeeding when she went for surrogacy. Her eldest daughter was in a Christian missionary hostel, but the other daughter was 4 years old.

She was very sad leaving her home and children behind. She left her children with her mother. The children were told that their mother has gone for a job to a faraway place. She didn't want her children to see what she was involved in; so she had to lie to them.

Contract

She was not given a copy of the contract. Sarala and Mariam discuss that she never hands over a copy of the contract to anyone. Dr. Nisha keeps it with herself. The contract is in English, so she couldn't read it. She was told that *"your signature here means you have not been coerced into surrogacy and you are doing it out of your wish"*.

"In case of death, the clinic is not responsible, in case the uterus needs to be removed, it will be removed, was written on the contract", was what Dr. Nisha told Mariam. Mariam could not read the contract herself.

She thinks she should have got and even now she should get a copy of the contract from the clinic.

Pregnancy

She had no problems with the medications and injections. She says, her troubles outside the clinic was so huge that she felt, she should get out of her as soon as possible.

Delivery

The day after her caesarean. she was shown the baby girl. The following day the commissioning parents came and took the baby away forever. They didn't give the baby in her hands

She had labor pain, but after waiting for some time, she was operated upon. Caesarean was very painful. She says, with her three children there was no pain after delivery, but the caesarean still pains sometimes. The baby girl was born on 15th August so she always remembers her on India's independence day.

Relationship with the Commissioning Parents

They don't keep any contact with her, they haven't called. She had not given breastmilk to the children as the commissioning parents went away within two days.

She asks Dr. Nisha for their contact number, but she says that they (the commissioning parents) have never called her again, so she doesn't have their contact details either.

She met them only once. She would have been happy if they had kept in touch. She feels she made a huge sacrifice by leaving her husband in such a condition and doing surrogacy for them.

Relationship with the Child

She keeps thinking about the baby girl, how old will be she be now? How would she have grown? How would she be looking now?

It would have been good if it would have been possible to keep relationship with the child, but now there is no such relationship, "*what can we do?*".

On repeating surrogacy

She never did it again because she feels the money earned through surrogacy is dishonest money.

As an agent

She had taken one lady to the clinic for surrogacy as an agent. She met her when she was involved in clinical drug trials.

She would never allow her children to do surrogacy.

Physical Impact

Whenever the caesarean operation area pains, she remembers the baby girl.

Financial Impact

She spent all the money she received from surrogacy on her husband's treatment. She has no money remaining in her hands. She was unable to buy a house with the money she received from the surrogacy.

Psychological

She was helpless and had to do surrogacy so she feels sad thinking about what happened to her husband.

Conclusion

- She was coerced first by Dr. Sejal, then her husband and she was made to sign that she was not coerced. Holding her in surrogate home when her husband was in the hospital and needed her support and she had small children was inhuman.
- Again coercing her to return into surrogacy because her financial condition had worsened during the surrogacy. This is blatant example of how these women's bodies are seen as nothing but a money making machine for the clinic.

32. Kalpika

Kalpika came to the car to participate in the interview, we went to the place of her work (Photo 27). She lives in Ravdapura.

She is 35 years old. She has two children Her daughter is 19 years old, her boy is 16 years old She has studied upto 9th. She got married and hence she couldn't study further.

She now works in cleaning the floor in a hospital in Anand.

Her husband joins her and asks what the interview is about as he also works close by.

No.	Year	Place	Clinic	Child(ren)	In	IPs
				born	lakhs	
1	2008	Anand	Asha	1g	2.5	USA, NRI.
2	2010	Anand	Asha	1g 1b	3.5	Nigeria (wife black & husband white)
				_		Daisy James

She was working in a hospital earlier. She got to know about surrogacy from there. She was scared when she first heard about surrogacy. Then she was convinced by the surrogate agent. The agent also showed her around inside the surrogate home and the clinic.

She has also donated egg five times and was paid Rupees 5000 every time. Two times before surrogacy. Her household financial condition was bad. She didn't have a gas connection in her house, so she went for egg donation.

On leaving home

Her mother-in-law and sister-in-law (husband`s sister) looked after her children when she went to the surrogate home. "*I felt very sad leaving home*". The first time she felt sad, the second time she didn't feel anything because her intent was strong that she had to do it once again for the sake of the children. Her husband and mother-in-law are all very nice to her, so she has no tension regarding leaving home.

Embryo transfer

"Both times, I got positive results in one trial itself". She didn't feel anything because she has seen everything, working in a hospital. The injections was very painful and even now she continues to feel pain at the place of injections.

Decision Making

Her husband didn't want her to go and explained to her for almost one year. But she insisted on going. She thought only about her children. She was not worried about social stigma, but he was worried about it.

If there was no money, she would not have done it. If the money was lesser than this also, she would not have done it because this remuneration that she received itself was very less.

Selection criteria

The commissioning parents chose her. They saw her report, they saw her. They met her children and it was only after that, that they finalised her as their surrogate mother.

As an agent

She took four other women for surrogacy and all of them built a house.

Remuneration

Her husband complaints that the got only 3.5 lakhs.

They cut her monthly payment and the 3 monthly instalment from her final payment. Some commissioning parents do not deduct this amount from the final remuneration. *"Just look at it"*, her husband says, *"she carried two babies and got 3.5 lakhs"*.

"Nine months she carried the babies, but the Madam earns all the money", he continued. "How much trouble she had to bear? But they (the clinic) get 30 lakhs for 3 children, 10 lakh per child."

With the money she earned from the first surrogacy she built a house of three rooms and the second surrogacy she spent on the operation of her elder daughter who suffers from brain disorder. She has yet another operation pending to be done on her.

"The money the clinic gave her was too less and unfair". Now she feels sad that the clinic has increased their remuneration and gives so much money to others. The clinic has made millions out of surrogacy and the surrogate mothers are continuing to suffer, she says. According to her, they were exploited because they were in need of money.

Delivery

She was very scared of caesarean, there was severe pain thereafter. She thought she would die. But she felt she had to do this for her children, Come what may she would do it.

After the delivery they showed the children to her. She gave direct breast feeding to her. For the second time, she was in the hotel with then children, but for the first time she was at the clinic surrogate home itself.

Relationship with the children

She had the photos of the children but her son was playing with her phone and everything got destroyed. She felt attachment to the children in her womb. They have never sent the photos to her.

She says, "the children should come to know that I was their surrogate mother."

Relationship with the commissioning parents

Kalpika gave her number to the commissioning parents but they never called her. They called her until they were here in Anand, but they don't call her anymore.

She says the surrogate mothers should have the right to choose to have an open relationship.

Contract Copy

She read it, but she was not given a copy of the contract. The clinic has it. It was written in it that if anything happens to her during the nine months she will not be paid anything. "It was full of threats, plus the clinic would not be held responsible for anything. If your life goes, the clinic is not responsible."

Rules in the Surrogate home

The rules were that, the surrogate mothers should not go out anywhere, they should remain inside. What to eat and what not was decided by them. Timings for food and medicines was fixed.

Relationship with the clinic

The doctor told the surrogate mothers that she will give pension but she has not given anything so far. She told them many years ago. Instead she is giving the low quality bag and books to the children. If she gave money for us to build houses, that would have been different, many surrogate mothers were unable to build houses.

Her husband says Rs 2500 will not be sufficient, they need to get more money as monthly pension.

She visits the clinic only to take bags and books that they give free of charge on producing the results of her son. She has no other relationship with the clinic anymore.

Finance

"The money that we got through surrogacy is all over. The children we have given will reproduce and give birth to further generations. But we will continue in poverty."

She would never ever even think of her children doing surrogacy.

Psychological support

In case of the surrogate mothers feeling sad, they never got any psychological support within the surrogate home or outside.

33. Bhavya

(Bhavya, like Radha-SM28, was justifying everything about the clinic. She herself would critique and her next sentence would be to justify the clinic.)

She has three daughters, one 20 years old studying a nursing course, (she wants to go abroad and is studying for that) One 16 studying 12th class,

and the third 11 years of age studying in 5th class.

Her youngest daughter was 3 years old when she went for surrogacy but her husband and motherin-law looked after the children

She was not scared.

But when she visited the clinic before signing the contract her husband was informed that if anything happens during the pregnancy or caesarean, it will not be the responsibility of the clinic. Even if she dies it's not their responsibility. She justified that, if the surrogate mother dies, the husband can come and fight at the clinic, so they make it clear right at the beginning.

She donated egg in this clinic 8 times. She received Rs 20 thousand for each donation. Her body produced many eggs so she was paid more for egg donation.

She works in a mall, I went to meet her at her workplace and we found a quiet place in the canteen to speak during her break.

She earns Rs 6500 per month.

About leaving him

She had no worries because her mother-in-law, husband were all at home.

The youngest daughter had a cleft lip problem. She was never close to Bhavya as she was working woman and her in-laws looked after her all day. She was operated and now she is fine. Her operation was done free of charge at Brahma Kumari

No.	Year	Place	Clinic	Child(ren)	In	IPs
				born	lakhs	
1	2011	Anand	Asha	1b	3.5	America, NRI, Jyoti Manotra
2	2014	Anand	Asha	1b	3	Rajasthan; Sunita Devkaran from
						Pune, Doctor.

Her mother was told by some acquaintance about surrogacy.

Some acquaintance working in a hospital told her about surrogacy.

Embryo transfer

The first commissioning parents sent their genetic material by post. She came only in the last, but she was talking on the phone.

The second commissioning parents came during embryo transfer. They had tried with several women but the transfer was successful only with Bhavya and hence the hospital nurse told the

commissioning parents to pay her (Bhavya) slightly more than what is in the contract. But they replied that they are in financial trouble too, so they cannot pay more.

The nurse felt, they were scared of Dr.Nisha and hence they were not paying her extra.

The nurse then told Bhavya "forget them, don't ask anything. Those who want to give, will give even without telling the doctor."

Selection criteria

The commissioning parents choose the surrogate mother.

The first commissioning parent didn't choose at all, they just sent their sample.

For the second surrogacy, only the commissioning father came. Maybe it was an egg donation.

Pregnancy

The first time, she had two children, but one was aborted selectively. The commissioning parents wanted only one boy child so one of the foetus was aborted inside her womb.

Financial impact

With the money from the first surrogacy, she built a house. The money was not sufficient so she borrowed from some money from relatives and completed the house.

From the second surrogacy money, she spent on her children's education.

Fair

Payment was very less to buy a house. She built a house of 2 floors for Rs 10 lakhs. Her mother stays downstairs and her family stays upstairs. Her mother-in-law stays with her husband`s younger brother.

She would have gone for lesser money. When she went first, she didn't have knowledge about bargaining. The main understanding was that they will get a child and we will get some money. I never thought about fairness at that time.

"I endured a lot of pain, but what can I say, I can't say anything to anybody".

After her first surrogacy, she went to Nisha Madam for help because the money was not sufficient for her purpose. She refused to help and then she felt, *"whatever I got, I should be happy"*. Bhavya blames the commissioning parents that they don't bother to look back and watch out for us (surrogate mothers). They should find out if the surrogate mother needs any extra help.

If she had her own house, she would never have done this. I have three daughters.

Now she thinks, what she did was good, because now it's very difficult to buy a house. In have daughters and if we have to keep changing houses, its bad, so now it's good that we have our own house.

Now she is already 40 years old so she doesn't go for egg donation or clinical trials. "I did all that when I was younger, now I'm not going anywhere, I'm happy with my job."

Relationship with the Commissioning Parents

Jyoti was from Pune, she was a doctor herself. She was in good contact with Bhavya on phone during the pregnancy.

But now she has not kept any contact.

Sunita came to take the babies just during delivery, she did not contact Bhavya throughout the pregnancy. She didn't come for her caesarean so Bhavya didn't have any relationship with her.

Even if the clinic tells them not to keep in contact with the surrogate mothers, it is their responsibility to do beyond what is in the contract.

When we carry their baby, then they speak very nicely. When their work is done with, then the matter is over. Almost all the commissioning parents are like that. Some are nice one in hundred are good, but the others are all selfish. They don't come and see, they don't even enquire about the surrogate mothers afterwards. It's not only me, with every surrogate mother, it is the same story.

The second commissioning mother was even worse, she didn't even call when Bhavya was carrying her baby. She never enquired about how is your health, do you need anything.

I was very attached to the boys. The first surrogacy they showed her the boy, the second surrogacy they didn't even show her the boy. The first boy was about 4 kilograms, very cute, there was no need for any extra care for the baby boy. He was a big baby.

The second commissioning parents didn't even speak to her.

Delivery

Caesarean. The baby had turned around so there was no chance of normal delivery.

The first baby, they stayed for a little while, they didn't need milk because the baby was health, they gave him powder milk.

The second one, she had to provide breastmilk for two months, but they didn't show the baby to her. "She didn't even come to meet me, forget about showing the baby". They were in the hotel.

Contact with the children

She has two daughters, she wants to know about the boys and how they look, how they are growing, they should keep in contact.

She felt like her own children.

It would have been great if her daughters would have seen the children.

When ever there is talk on the child, she remembers and talks about the child. Her daughter had seen the first child, she also remembers.

She says, "he looked so nice."

"What to do thinking, whatever has happened has happened, now it's also been a long time ago. I have to concentrate on my children."

"Both these boys are born from my womb and my daughters are also from my womb. They are siblings and they should know each other."

On giving away the child

" I felt very sad for some days, then I reassured myself and moved on with my life. The second time I dint see the child. I cried a lot."

Rules

The only rule they were told that if anything happens, it's not their responsibility. You cannot decide to keep the child after the child is born. No rights over the child. 9 months not to go home. Family members would come to meet.

Ganesh Chowkdi was nice. Maasi was good.

She didn't face any psychological or physical problems.

As an agent

"I took one woman to the clinic. She took a few others, but they change the name in the clinic so I didn't go."

Daughter into surrogacy

I did it, but I will never allow my daughter to go into this. When I did it so reluctantly, how will I even put my children into this. She wants her daughter to study abroad.

Contract

"They don't give any copy of the contract to us. They never give us anything. They only give us some instructions, that's it. At the time of the signing, they take us to the lawyer, that's it. My husband had read it. The same things were written. It's not our responsibility if anything happens."

Nobody asked for a copy, nobody knew anything at that time. Some were not even taken to a lawyer.

Pension

When she became a surrogate mother the second time, there was a talk among sisters that government will give Rs 5 to 6 thousand rupees as monthly pension.

They give scholarship only for children who have 80 to 90%, nothing less.

34. Pragati

She is 45 years old. She has one boy 19 years old.

She's working as a tailor earlier, she used to teach tailoring. Now she has put up a tailoring machine in her house and she runs her own small business.

She used to be a tailoring teacher, now she has bought a machine at her house. She teaches and also stitches clothes for customers. She earns about Rs 3000 per month. She was born and brought up in Nadiad.

She has studied up to 11th class in Commerce. She failed in Hindi in 12th class. Then she didn't repeat. She lost confidence after she failed.

Her husband teaches driving. He gets a salary of Rs 10,000 per month. He works in Ahmedabad. He shuttles every day to and from Ahmedabad.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2011	Anand	Asha	1boy, 1 girl	3.8	Nagpur

There was a girl who told her about surrogacy, her aunty, Sujata, used to work as a nurse in the clinic. That aunt then went to Israel to work as a housemaid.

Initially she said no and her husband also refused for surrogacy. First he didn't believe that any such thing was possible. Moreover her son was small, he was studying in the 6th class. He was 11 years old. There was nobody there to look after him.

Her in-laws live far away in the village and her parents are no more. Her father died when she was very young. Her mother worked in a tobacco workshop as a labourer. They are three sisters. She is the youngest. One of her sister lives nearby but she will not take care of Pragati's child.

After Sarala became a surrogate mother, others in this area got to know. Sarala is the agent who took her to the clinic.

Motivation

She did surrogacy for buying a house. She is now living in her mother's house and they don't pay any rent but her middle sister is demanding the entire property. Otherwise her household was going on fine, there was absolutely no need for her to go for surrogacy. But she thought, it would help to buy a house. But when she returned from surrogacy the house prices had gone up so much that she couldn't even think of buying a house.

She spent some money on her son's education and saved about Rs 1 lakh in the bank.

She became pregnant on the second trial.

Initially she was told 3.0 lakhs, but even if it was lesser than that, she would have gone for surrogacy. She wouldn't go if there was no money. (she laughs) Her husband would never have allowed her to go, if there was no money involved.

Selection Criteria

They only asked her school leaving certificate. If only they need documents for a life insurance they require more documents.

Nowadays, they ask for everything forefront.

Selection

At the clinic, it is first come first service. The surrogate mothers are given to the commissioning parents according to whoever is in the line, ready for embryo transfer at that point of time. *"Whoever Madam (Dr. Nisha) shows us, we accept it"*.

One surrogate mother refused a commissioning parent, but Dr. Nisha scolded her, she had to accept whoever she offered.

Pragati said, she didn't get into any such trouble and quietly accepted whatever the doctor told her.

On leaving home

If she goes again, her son's career will get spoilt. Last time, her elder sister took him with her. His studies didn't get spoilt but he got spoilt. He will not get the same kind of attention that he gets from me.

"He had lost interest in studies and his mind was getting diverted to other things. If I had gone another time, he would have lost his mind on studies." She was worried that if she had gone for surrogacy, he would not have got good marks in 10th or 12 exams. Many women go for surrogacy within one of two years after the first time to earn some more money. But she didn't want to do and preferred to concentrate on her son's studies.

Now he is studying third year Engineering.

There was one lady who even took her to Mumbai for her second surrogacy. She went for check up and they told her that she would have to stay away from home for 5 days. But Pragati refused. *"Who will cook for my son for 5 days?"*

When she was in Nadiad house, that surrogate home closed down, so they were all shifted to Anand. 3-4 months after living here, they moved to Anand. At that time 40 surrogate mothers were staying in Nadiad surrogate home.

She didn't like the food inside the surrogate home. "I didn't eat well for almost 5 months. I couldn't tolerate the smell of that food. At home if I don't like something, they will bring whatever I want to eat. But here, who will bring a different food for me every other day. I suffered about the food. Her husband used to get ice-cream for her whenever he visited her from outside. He would also bring some food such as; Manchurian for her from outside."

"They should have had a special day every week for making special food, give ice-cream to the surrogate mothers, but they never did anything different, it was the same monotonous food for nine months."

Rules

"We were not allowed to go out. We strictly made to remain inside and to eat only what they give us."

"They didn't give us coffee or tea in the morning, only milk. Sometimes she would ask someone to it from outside and mix it into the milk before drinking it."

"Tea would be served only at 4pm after lunch. We used to bring coffee for us inside. They didn't want to give coffee in the morning. If the surrogate mothers want it for themselves they used to get it and drink. According to them, drinking coffee is unhealthy and not good for the child."

Commissioning parents

They were good but miserly. She has seen the girl child.

They have also given her the photo of the children.

They call her up and have told her that she can come and meet them in Nagpur and she also has told them that if they come to Nadiad, they should come and meet her.

They even called up for a second round of surrogacy but she refused, "who will look after my son? his career will get spoilt because of my surrogacy."

They invite her to their house even today. But who will look after her son. They are calling her to look after the twins.

They were very happy that one child was a boy. Many surrogate mothers who were pregnant along with her had given only girls and Pragati had given one boy too so they were very happy.

They are good, they have kept contact with her, they call her to their house. But she doesn't want to put any pressure on them lest they start feeling any kind of aversion towards her.

They have never come to Nadiad, although she called them several times, hence she is a bit apprehensive.

They call up at least once per year.

Some commission parents continue to keep good relations and keep sending money and provide them with their basic needs. Snehalata's commissioning parents made a house for them.

"My commissioning parents gave me money directly if they want to give something during the surrogacy". She gave me 1500 or 2000 directly when she was in the surrogate home.

The commissioning parents from abroad usually give more.

Medical Intervention

At that time she didn't feel anything, but now she feels the pain. She knows it's a big injection that they regularly gave on her hips, but doesn't know the name. Even if by chance she touches that place, it pains. It's not just pain, it's an unexplainable pain, its excruciating. It was like one of my biggest stitching needles. Every alternative day, the injection is given to the surrogate mothers.

She says, she has become fat. Her body has swollen up since surrogacy.

She even has problems sitting and standing up easily. She cannot work like before. Her body has become week after the surrogacy. Mostly weakness is in the legs. It is because of the over-

medicalisation. One doesn't feel it soon after the surrogacy, it takes about a few years, at least 3-5 years for the adverse impact of surrogacy to become obvious.

Delivery

It was a Caesarean and they gave injections and medication so that she didn't feel any pain even after the operation. One doesn't even know. Not so much pain. She electively wanted a caesarean as her son's admission days were nearing.

She provided them with breastmilk for 15 days using a pump, and they wanted her to stay further but she became very worried about her son and so she returned. It was the month of March and she had to bring her son back from her sister`s house to get admission for him. So she refused and returned home. They brought food, fruits for her when she was at the clinic providing breastmilk using a breast pump.

Children

The children were shown to her and were taken straight from the operation theatre to the hotel.

She remembers them often. Once in a year she fasts for them. Jeevantika vrata for all there children, her son and the twins.

She has the same extent of attachment that she had for her child. She left Anand even before the children left. She returned to Nadiad on the 10th day after delivery.

She wants to ask for the recent photo of the children, but she is scared to ask them as they might get worried and break all contact with her. She doesn't want to put any kind of pressure on them.

She asks them about the well being of the children, what they are doing? How are they?

Overall whenever she thinks about them she feels "Wherever they are they should be happy".

She didn't cry, but felt sad for some time.

Psychological help:

She hasn't heard about counselling.

She didn't feel any psychological impact.

Pregnancy

Yes she felt the attachment but what to do when one has to give the child away. "We cannot keep the children so what can we do".

She had told them right from the beginning that she wants a photo of the child(ren), hence they gave her a copy.

As an agent

She took one lady just once.

Sending daughter

"I wish they never face any worst case scenario that the children ever would have to do something like this. That's why I am concentrating on educating my child so that the coming generation will not need to do this."

Contract

"They don't even show the contract to us. They don't read the contract to us. They just show us the places to sign and we have to sign. We are not supposed to ask any questions."

"They tell us certain things, this will happen, that will happen, what we should do. It will be in my file in the clinic, but I don't have a copy. They don't give any copy to the surrogate mothers." She asks if has Sarala got a copy of the contract, Sarala said "no".

The only proof she has about the surrogacy was a last payment they made to her by cheque. She took a photo copy of that cheque before depositing it in the bank.

"It all happens through trust. We don't know how much the commissioning parents pay to the clinic for the surrogacy."

Payment Fair

"The payment given is unfair. It was twins and only 3 lakh on paper is too less."

When she was in the clinic, she and some other surrogate mothers suggested that Dr. Nisha give them a built house each instead of money. Whoever needs a house, can be given a house, because most of the surrogate mothers are coming here for a house.

"A meeting of surrogate mothers took place when they were inside the surrogate home. She could start a factory, garment or any other factory where surrogate mothers can get employment."

"Because many surrogate mothers who return are not in a condition to do any hard work anymore. After all the medications, all the surrogate mothers are facing weakness with the treatment."

"She is giving useless two writing pads and a school bag to each of the surrogate mothers children. My son does not need any bag anymore, he is finishing studies."

"She could start an old clothes re-use bank in Anand for the surrogate mother's family and their families."

35 Sneha

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2011	Anand	Asha	1g	4	USA

She is 34 years old. She was in Surat before marriage. She has completed 9th class. Her mother died and her father told her not to study further. He told her she can study after marriage, if she wants to. She has four sisters and one brother. He was a diamond worker. He was not earning very well.

Her son is 14 years old and daughter is 15 years of age, both are studying in school (Photo 3). Her husband earns 12 to 13 thousand rupees per month. She has always been a house manager. She has never worked anywhere. Her children are studying in a private school. Their income is insufficient for the fees and household income but they are running the household. Their school fees is Rs 800 each per month. Their school is in Maninagar.

One of her friend went for surrogacy and returned and asked her if she wanted to become a surrogate mother. Then she told her husband and he said if she wishes to, she may go. Her parents-in-law also know about it.

Even if it was 1 lakh rupees she would have gone. She had a lure for the money. She was also helpless due to her household economic situation.

When she began the medication, the fear set into her. She started thinking about how she would go through the entire process, what if she dies. She shared her fear with her husband and he told her "*I didn't force you, you went there by yourself. Now you have to go through it.*" She then thought, Whatever happens she will leave it in the hands of God. she had to go through it for the sake of the family to build/buy a house.

On leaving home

Her son was six years old when she left home. She struggled on leaving home. Her husband would come regularly, But children rarely came to meet her at the surrogate home. Unnecessarily they would become upset and she too would be crying so he left them at home most of the time. Instead her husband visited her twice a week. She was in a surrogate home in Anand. She became pregnant in the first trial.

Selection

The commissioning parents select the surrogate mothers. They choose the surrogate mother based on her appearance.

Relationship with the Commissioning Parents

They came to meet her at the time of the embryo transfer. Before that they had selected her depending on whatever information was given in her file. They were good natured. They didn't have any pride.

The man was from USA and his wife was from Goa. After their marriage they settled in the USA.

She had tension but the commissioning mother was tensed too. The commissioning mother asked Sneha if she was having pains and looking at Sneha struggling, she began crying too. She told her

husband that, "if anything happens to the babies, it's OK but nothing should happen to Sneha. If something happens to the baby, we could do another surrogacy but Sneha should be safe".

They didn't keep any contact with her after surrogacy. They only sent her the photo of the child when they came to the clinic to hand over her payment.

They were there for 9 days after the delivery and they left. They leave suddenly and left her behind to adjust to this shock.

They left after nine days and before leaving they handed over a copy of the baby's photo to the nurse to be given to her. This is the same photo that was given to be put up on the notice board in the clinic. They didn't leave their address or phone number with her.

They didn't want anything to do with her after the surrogacy".

"I don't want money from them, but I value relationship and this is such a close relationship I developed with the child and through the child with the commissioning parents. Its humanity that they keep a relationship." She doesn't have a photo of the commissioning parents.

Delivery

Both her children were normal deliveries but this surrogacy was a caesarean. The surrogacy baby was larger than her children.

"I had left everything in the hands of God", she says, so she didn't take any tension.

Health impact

She is absolutely fine, she had no physical problems during the pregnancy, the birth or post surrogacy.

Relationship with the Child

The baby was with the commissioning parents and not with her. The baby was fine and healthy so they gave her the milk powder they had brought from America.

They first person they handed over the baby to her. The commissioning mother said, *"here Sneha, your baby"*. She burst into tears, saying so she cries again just thinking about that moment and the baby (Photo 28).

(I had to stop my interview with her because she started weeping and couldn't stop. She is obviously missing the baby girl and her sadness is profound. I paused and allowed her to take as much time as she needed to gather herself again. Meanwhile her children were around and I started asking about their school.)

She then turned to her son and asks him to bring her mobile to her so that she can show me the photo of the baby. She shows me the photo of her baby girl. She is craving to have been in contact with the child (Photo 29).

She had left the clinic 10 days after delivery. She requested to leave as she had not seen her children for a very long time and Christmas was nearing so she wanted to return home. Both her children were watching her crying.

She says, "the baby was in my body for nine months, how will I not be attached to the baby".

She received absolutely no psychological help or counselling. She thinks about the baby often but hardly talks about her surrogacy experience to anyone. Sometimes she shares with her husband but then mostly she tries to avoid talking because she gets emotional about the baby.

"When they handed over the baby to me first, saying see your baby, I felt very nice. My husband also started weeping".

Contract Copy

She was not given a copy of the contract, so she doesn't even know the full name of the commissioning parents.

Relationship with the Clinic

She goes yearly once only to get the bag and two books that the clinic gives free of cost to all exsurrogate mothers.

On repeating surrogacy

She would want to repeat thinking of some extra money for the children, but her children and husband refuse to let her go again. They say, *"you are not able to take the emotional burden and physical pain of surrogacy, you should not go again"*.

As an agent

She doesn't want to go as an agent because she wouldn't want to put another human being in the same kind of physical and emotional trouble that she has gone through. Moreover if something serious happens to any surrogate mother, she will never be able to forgive herself.

Remuneration

She thinks the remuneration is unfair. For the extent of physical and psychological harm and risk, if they were well paid they wouldn't think of doing surrogacy again. But the clinic wants them to return so that they can earn some more money out of them.

Health

The weakness in her body has increased after the surrogacy.

Financial impact

She has built a house. The household is running with her husband's salary. He doesn't allow her to work outside, she has never worked before so he tells her to be at home and look after the house and the children. She used to make jewellery before (Mangalsutra¹⁹) and sell but he told her to stop that work and sit quietly at home.

¹⁹ Jewellery worn by married women in India.

36 Sarita

Sarita is Sneha's friend. After Sneha's interview she took us to Savita's house (Photo 30). Both of them were in the surrogate home for a short while together. Now they have been friends for 8 years.

She's a very cheerful person, laughing through the entire interview, very much in contrast to Sneha. She is also financially more stable. Her husband earns well now and will soon leave for Dubai on a work contract.

The only time she became serious was when she spoke about leaving her children behind at home and when she spoke about the commissioning parents and their inhuman behaviour.

She is 34 years old. She has studied upto 9th class. Both of them have a good laugh "both have the same extent of (lower) education that's why both of us had to do surrogacy". In the village, if parents don't have enough money, they drag the girls out of school. She doesn't have any siblings. She didn't repeat the 10th class exams after that. Then she went into Bible study in Nadiad. It was a hostel, she stayed there for two and a half years and studied the Bible. Then they got her married off in 2002 at the age of 17-18 years of age. After marriage she moved into her husband's house in Ahmedabad. Her husband is employed in a Planet Honda automobile showroom and earns Rs 20000 per month (€3000 per year). Savita is a homemaker. She has two children, the boy is 11 yreas old, studying in 7th class and the girl 14 years of age, studying in 9th class.

Her household situation was not bad, but they wanted to buy a house. But she couldn't buy a house with the remuneration she received. It costs minimum 20 to 25 lakhs to buy a house in Ahmedabad. Now she will buy a house. She will pay cash and buy because her husband has a good earning now and he will be going to Dubai.

At present, she's living in a rented house of Rs 5500. (The house is very nice for that amount.)

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2012	Anand	Asha	1g 1b	5	Belgaum, (Akka Mahadevi)

She first got to know about surrogacy from her father-in-law's sister who is working in Asha hospital in Anand. She informed Savita about surrogacy. She also donated her egg once before doing surrogacy.

Initially she was apprehensive about surrogacy, her husband and all of her relatives advised her against going. But she wanted to go. If she had known that it is so painful and distressing, she would not have gone. At that time their situation was a little worse than what it is today but if she had known the difficulties in surrogacy she would not have gone.

Contract

The agreement was for Rs 3.75 lakh. The remuneration increased in the clinic from 2.5 lakhs to 3.75 lakhs in 2012. She would do it even if it was 1 lakh.

But she knew that the money would increase in 2012, that's the reason she waited and went in that year.

She would never do it if there was no money. She says, it is so painful, full of pain and pokes all over my body. Her body has been destroyed with surrogacy, "*why would I ever do all that without money*?" She also says that her body has swollen since surrogacy. (she laughs) Sarala says that it is because of the medication.

If it was for myself we could do it for free. To hand over the baby to someone else, it is such a emotional and physically draining exercise, no one would do it for free. (she laughs)

It's so far (distance), one has leave the family and stay there. She explains that she did it for a house and children.

She never read the contract, she just signed. She doesn't have a copy of the contract. Before signing she was only told that the child has to be handed over on birth in return for money and she will not have any rights over the child. The lawyer and Dr. Nisha are witness while signing the contract.

Selection

She says there is no such thing as selection. Whoever Dr. Nisha says, they go with it. She thinks both the commissioning parents and the surrogate mother don't get to choose.

On leaving home

She was very sad when she had to leave her children behind at home to go and stay at the surrogate home. Although it was a homely atmosphere inside the surrogate home. She says she made a friend, Sneha and was living well there but the sorrow of not staying with her children lingered on throughout her stay.

Whenever her children came to meet her, they cried asking her to return home. They would cry and cry when they had to leave her behind and return home. It was tearing her apart seeing them cry every time they came to visit her. Her son was 4 years old and her daughter was 7 years of age when she lived at the surrogate home. They kept on pleading her *"mummy come home, why are you staying here"*. Her husband was also very upset.

Surrogate home

It was like a hostel but the doctor took full care of all the surrogate mothers. They used to cook something different and eat too. She was happy that she got to meet many women from different parts of Gujarat. "Madam looked after the surrogate mothers well".

It was strict but it was like a hostel. Whatever they wanted to cook they could cook and eat.

Pregnancy

She never felt any problem. For the sake of the child, one has to take all the trouble.

Relationship with the Chid

She bonded with the children during pregnancy (Photo 31). She even went to see the children to the hotel but couldn't see them, she kept in touch with them until 2012. She has never seen the babies or held them in her arms.

After her caesarean, she was not shown the children. Three days after the birth, she went to the hotel to see the children but she was told they were not in their room. She waited at the hospital for eight days. During those eight days she provided with breastmilk to them using a pump. After the 8th day they left for Belgaum and she too left for her home in Ahmedabad.

She says in a bitter tone that she doesn't remember the children anymore. If the commissioning parents were nice, it would have been so nice to keep in touch but they were not good so what's the point remembering them and hurting oneself.

She didn't feel the same kind of feeling that she felt for her own children. She says, it is the right of the child though to know their origin. They should know that she was their surrogate mother and she gave birth to them. It should not be like the surrogate mothers give the children and the commissioning parents forget about them. What about the children? When the child calls the commissioning parents "mummy", they don't know that the mother who gave birth to them is another woman.

Relationship with the Clinic

She formed a bond with the doctor. It was the doctor who brought the children's photo to her to show her.

She says in case of complications, the doctor would save the surrogate mother first, even if the child dies it is fine with her, she prioritises the surrogate mother's life and well-being over the child. She doesn't go to the clinic for anything thereafter, even to take the bags and books given by them.

Relationship with the Commissioning Parents

The commissioning mother was in contact with her, spoke to her very nicely as long as she was pregnant with the children. She would tell her to look after the children inside the womb. Take care of your health. After that, she started behaving as though she doesn't know her. (she laughs)

She didn't keep much in contact. She took the number of the commissioning parents and called them once in a while.

The commissioning parent didn't want to talk to her, she blocked her number.

Then because of the rude behaviour of the commissioning mother, she started withdrawing and didn't want to interfere with their life anymore.

Savita used to speak to the commissioning mother after she left for Belgaum, this continued until 2014. One day looking at the twins on the display picture on WhatsApp, she sent the commission mother a message appreciating the child "nice babies". From then onwards the commissioning mother blocked Savita from her phone and WhatsApp.

She tried but she couldn't reach that number thereafter. Perhaps she changed her number. She couldn't even save the photo of the children, as soon as she sent the message, the commissioning mother removed the display picture and blocked her.

She was very upset that she reacted so strongly to a simple comment. "If she thinks I am going to grab her children, she is mistaken, I have children too. I took money from her. It is just a kind of joy and satisfaction to see the twins grow up well. That is certainly an additional happiness." She thinks what the commissioning mother did its inhuman. She would have asked their well-being, they could have asked her wellbeing. She is not demanding anything from them. "In this situation if she removes my contact what can I do".

She justifies that she kept in touch to find out the well-being of the children and be happy about it. She didn't go behind her asking for anything else. In Christianity we have been taught to have

affection for babies, children and other human beings. So when the commissioning parents completely cut her off, she felt very bad and hurt.

"It is because of us that they could have children, at least behave like a human being with us".

As an agent

She took only one lady five years ago.

Physical, Psychological Impact

She has no physical impact

Financial

She has kept the money in fixed deposit.

Impact on her children

They know because they visited her at the hospital. They also saw her taking some injections. Her son was small so he thought she became pregnant through injections and gave the babies. She has never shown the photos of the surrogacy children to her children.

37 Bairavi

Bairavi is 42 years old, she has studied up to 6th class. She's a house wife. Her husband is a labourer. She has a daughter who is 22 years old and a son who is 20 years old. She did surrogacy in 2014. Her daughter has completed her bachelor's degree in Arts and her son is studying in a commerce college.

They didn't own a land or property. She went for surrogacy to build a house, but she couldn't build a house with the money she earned.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2014	Anand	Asha	1b	5	Hyderabad

She comes from a poor family. Her husband is an auto-rickshaw driver who earns about Rs 8,000 rupees a month. She was working in a hospital as a sweeper earning. Rs 6,000 rupees per month.

She did surrogacy mainly thinking about her daughter's marriage. Plus they had taken a loan for the auto rickshaw that they are unable to repay because the interest was very high with a local money lender.

One day, she got to know about surrogacy from an agent of a surrogacy clinic. She told me that she could earn Rs 300,000 rupees being a surrogate mother.

She also heard of two other women in her neighbourhood who had been surrogate mothers but she was not in favour of it initially. But then when she met this agent and she convinced her, she agreed to do it.

She met the commissioning parents only once before the embryo transfer. They were from Hyderabad

They arrived during the delivery. She was still under sedation after the caesarean when they removed the baby. *"I never set my eyes on the baby"*.

When she gained consciousness, her first words to my husband were, 'Did you see the baby boy? He said, no, he had arrived a little late after working and by the time they had taken the baby away.

"I asked the nurse, and she answered You are a surrogate mother, you have done your job, why do you worry about the child.'

"But I want to know about the baby. I want to know how he looks". For three months after giving birth, she spent sleepless nights, She said, she would get severe headaches thinking about the baby and had to take painkiller medicines to calm down".

Every year, on 10th November, the day the baby was born, she remembers the baby and she prays to God just as she does for my other children.

She also visits the temple to pray for the baby's well-being and long life.

She has always wondered if the baby is like any of her other children. She really does miss the baby and would give anything to see it once.

"It was very difficult, I had felt the baby move in my belly, I had become attached to it, and I couldn't see it. It just vanished from my life."

She knows *"it's not my baby after all"*, but she know that if she had seen the baby, she wouldn't have given it away. She doesn't know which is more painful, having not seen the baby or would it have more painful to see the baby and give it away.

"I hope the baby is happy and fine wherever he is".

She cannot speak much about the commissioning parents, as she has hardly met them. They didn't wait to enquire on her after the caesarean, nor did they bother to keep in contact with her. The work is done the contract is over, they have mothing to do with me anymore.

With the money she earned, they managed to pay off the debts and have saved some money. They have not been able to build a house with that money, it is unimaginable.

She wouldn't take anyone else for surrogacy as an agent. She feels the pangs of the separation, she doesn't want anyone else to suffer like her. She will never do it herself again

38. Neelam

She stays in Ahmedabad. One girl was 21 years old and another boy 23 years (1996) and one girl. "Everyone around here goes for egg donation", it was there that she heard about surrogacy. She agreed, but on going there she didn't like it and was praying that her IVF trial comes out negative. She even had packed her bags to leave the surrogate home, but unfortunately her results came out positive and she had to stay back there.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2010	Anand	Asha	1b	3.21	Hyderabad

She wanted to buy a house.

Selection

She doesn't know anything about the selection. She was showed a person and told this is your commissioning parent.

Remuneration

They gave 21 thousand rupees extra. This is because her delivery was normal and they could save that money. She would never go for surrogacy if it was lesser than this. Even for this amount, 3 lakhs, she didn't want to go, she was unhappy going for this. But the family needed a house.

This payment is utterly unfair. The doctor told her the commissioning parents will give extra money to her because it is after several (7-8) trials that the embryo transfer that the trial with Nandini was successful, so Dr. Nisha assumed that they would pay her a good amount over and above the amount mentioned in the contract.

But despite a positive result with her they didn't pay her much over and above the designated amount.

Relationship with the Commissioning Parents

They don't even call her after the surrogacy. The showed her the baby boy, the baby was kept with her for two days. She breastfed the baby boy directly without using a pump. On the third day, they took the baby and left.

In the surrogate home

She wanted to go home, but they told she would be allowed after one month but they didn't allow her to go home after one month. Then the third month passed and yet they didn't allow her to go home, she became very agitated. Then after a lot of request to attend a marriage, they let her go after 3 months for some days.

She missed her family a lot. Her daughter was 11 years old and her son was 14 years old when she was there. She cried a lot inside the surrogate home requesting them to allow her to go home but they didn't allow her. They then put in a fear in her that if she returns home the baby will get aborted and its better if she stays here at the surrogate home.

She didn't like the food served at the surrogate home, so she didn't eat much. She didn't like the medicines that was given at the clinic. She didn't eat the medicines because she had several side effects with those medicines.

Medicalisation

She only took the main medicines. She avoided taking any extra medicines that was given to her. The injections was so bad that she couldn't sleep properly for several months with the intense pain. The injections was given for 15 days every alternate days after the embryo transfer. When the transfer resulted in successful pregnancy, they were again given injections every alternate days 21 times.

She said she had lumps formed in the place of injections. If touched, that place feels hot. It's like when a person with fever is touched. Now she has no pain but at that time she had severe pains and it continued until six months before I met her.

39 Madeeha 40. Saara and 41 Rabeena

As I interviewed all the three together, I have written their case together

Madeeha is 33 years old. Sarala met Madeeha at a clinical trial and became friends (Photo 32).

Madeeha has one son 7 years of age and her husband is a drunkard, he doesn't work.

Madeeha, Saara and Rabeena have all been donating oocyte many times and continue to do so whenever they need some money. It was one egg donor friend of Madeeha who introduced her to a surrogate agent taking women to Kerala. He was an agent for a clinic (Gift Gyno IVF Centre) in Cochin, Kerala.

After she returned she introduced, Saara and Rabeena to surrogacy in Kerala, but Rabeena went through another agent and Madeeha's agent had cheated. But it so happened, that the other agent also turned out to be a cheat.

Saara says Muslims go to other places because they are not preferred for surrogacy in Gujarat. They are called for egg donation but not for surrogacy. In Ahmedabad Muslim women are not taken for surrogacy at all. Sarala (SM 3) said, at least some Muslim women are recruited in Anand, but nobody in Ahmedabad.

Madeeha was taken in a luxury bus until Mumbai and from there she was taken to Kerala in train via Goa. The surrogate mothers are kept enclosed in a house in Aluva and not allowed to come out of that place. Moreover women got o Kerala because they paid 4 lakhs for surrogacy in Kerala, while here in Gujarat surrogate mothers are paid only maximum 3 lakhs. All the three were kept in a surrogate home in Athani, near Aluva station, Aluva is 33 kms from Kochi, the clinic itself was located in Kochi.

(At least in Gujarat, the surrogate mothers were housed closed to their home, in case of any emergency their family members were located nearby. But here women were taken 2000 kilometres away from their home to a place where they don't speak the local language.)

Madeeha

]	No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
	1	2017	Aluva	Gift Clinic Kerala	2boys	4.3	Middle-East

Saara is 35 years old. She is a non-literate.

Her husband works as a labourer, he rides autorickshaw, he takes the fruit stall. Whatever work he gets his hands on, he does.

Saaraa

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2017	Aluva	Gift Clinic Kerala	1g	4	Middle-East

Rabeena

Rabeena has one daughter, 5 years old. She's a housewife and her husband works as a labourer.

12018AluvaGift Clinic Kerala1b4Middle-Ea	t

Contract

All three don't have a copy of the contract

Madeeha cried and lamented and they allowed her to return home for a short while on the pretext of attending a marriage but the other women were not allowed to return home.

The first time she heard about surrogacy she felt scared this was something morally wrong. Her husband assured her that there is nothing wrong and nothing would happen to her. She wanted to build a house, her husband is a drunkard, he doesn't do any work.

Contract

They was told while signing the contract that they would have no rights on the children after birth. They will have nothing to do with them.

Counselling

There is not even any informal form of counselling during the surrogacy.

Like other clinics tell the surrogate mothers to detach themselves from the baby growing inside their womb. In this clinic, there were not even told that the children are not theirs and they should not keep any attachment towards the child. It was much more business-like.

Embryo transfer

Their husbands were not allowed to accompany them during the embryo transfer.

So initially Madeeha was very afraid that she would be molested. It was only during the delivery that her husband was allowed to be with her.

After the transfer, they were supposed to remain on the bed for two months. The sleeping position was also specific; crossed legged and raised. They are not allowed to talk loudly, they can walk but very slowly only to use the toilet and nowhere else. They are not allowed to urinate forcefully. Its only then the report comes positive. They should not take any tension and do whatever they do very peacefully. They are told that the child is kept artificially so it is likely will miscarry easily and hence they have to take utmost care.

10 days later they do a urine check to find out if the pregnancy is positive.

Pregnancy

It was painful because Madeeha's cervix was stitched. Her cervix was opening pre-term and hence cervical cerclage was done on her. They told her it's a normal procedure for twins.

Sonography, ultrasound was done once in a week. Medication and injections was given on time, and food had to be eaten on time. The surrogate mothers living in that home were all from Gujarat. They would cook food by themselves in the kitchen as they didn't like to eat the food that the locals ate in that region. They would buy all the grocery needed for the cooking.

At the surrogate home

Madeeha was not allowed to move much inside the surrogate home throughout the pregnancy because she had stitches. Food would come to her bed. She was allowed to do anything. The surrogate mothers together were expected to cook their own food and eat. They were also expected to wash their own clothes.

Delivery

They admitted Madeeha in the hospital 15-20 days before the expected date of delivery. She was informed about the day of her caesarean. She was not allowed to go out of the hospital until the delivery. The operation was very clean, she didn't experience much pain. The fourth day after the operation she was roaming around. One week after the operation she was sent back home to Ahmedabad.

After the delivery, she could hear the crying sound of the baby. So she requested the nurse to take a photo of the child and give her. She told the nurse that her husband is sitting outside and she could ask him to take a photo from his mobile. They nodded their head, and silently injected her with a sleeping medication. After that she doesn't know what happened. The children were never shown to her, the commissioning parents never came to meet her after that. She feels very bad that she was used like a machine but she had to do it for her household.

Relationship with the Commissioning Parents

All the three commissioning parents were Muslims, from the Middle East. they say they were not Indians, from the Middle East but they doesn't know exactly from where. They are not told their names.

When they came to meet Madeeha, there was a sister who stood there to translate anything. She met them only once when they came to meet her when she was 6 months pregnant.

They spoke Hindi but because the sister was present there, Madeeha couldn't even inform them anything about the clinic even if she wanted to. She also couldn't tell them what she was experiencing, even if they were interested. So they just asked her "how are you?" and that's it. The sister had threatened her beforehand that she should not talk much to the commissioning parents. That she should only tell them that's she s doing good. She also warned her not to give her contact number to them. Once they came on a video conferencing and at that the she spoke to them on the doctor's phone. She was never allowed to speak them directly.

They never came to meet her thereafter, they only came to take the child, they also told her that they would help her, but she says they didn't even buy fruits for her during the pregnancy.

They justified to her that *"we tried many other techniques but we couldn't have a child. So we had adopt surrogacy as our last option. Don't get angry with us, we will make you happy after we get the child."* She feels they may have paid her extra money but she thinks the agent, the doctor all ate up the money they may have paid for her.

It would have been nice if they had kept in touch with them, at least once in a awhile they would have come to meet the surrogate mothers. At least they could have seen children's photo.

On the other hand Madeeha says, in a way, it's good they are not in contact with her, otherwise she would have felt like taking the children. It will be a continued heartburn for both the commissioning parties and herself. Its better the children are with them. She's happy that she gave them children and she will be blessed by them. The last message she conveyed to the commissioning parents was that they should keep the children well.

She is angry that they never met her after the delivery. How could they walk away from her when she gave them two children.

At least they should wait until the surrogate mother wakes up after surrogacy.

Relationship with the Clinic

She had to fight with the clinic for the extra 30 thousand rupees for the second child. But Saara and Rabeena didn't fight with the clinic, they just quietly followed their orders.

Madeeha wants to meet the commissioning parents just once more without any interference because she thinks she was cheated by the clinic.

After a few months into the pregnancy her agent told her that there are two children, you should abort one child. She refused to abort one child. Then the agent said that she will not get any money from the clinic if she refuses to abort one foetus. She shouted and screamed and demanded they allow her to speak to the commissioning parents directly. They didn't allow her to talk to them, but she didn't allow the abortion and gave birth to twins.

Rabeena was not so lucky; she was carrying twins and selective abortion was performed on her. She felt the commissioning parents are also to be blamed for allowing this.

She also asked them to allow her to speak to the commissioning parents directly. They didn't allow her to talk to them.

Sarala said, for the second child the clinic gives 85 thousand extra.

Madina said, she fought for this Rs 30 thousand extra. The told her she would not get any extra money regardless of whether it is one child or three foetuses in her womb.

During the delivery they didn't allow her husband to sit outside the operation theatre. They drove him away to another floor. Soon after the delivery, they gave the babies to the commissioning parents and moved them out of the clinic quickly. The doctor paid no heed to whatever she said.

She blames the commissioning parents, that they didn't wait to find out her health and well being after the delivery. They all treated her like a machine to produce the child and moved to be discarded later.

Relationship with the children

They felt attached to the babies growing within them. All the three women think about them; and feel the heartache of not having seen them. They feel it would have been good if they had shown them the babies. Saara says, she would be happy to have that sight in her mind. Never having seen them is a sorrow she carries in her heart.

Saara says, whatever the child is theirs, they are actually mine because they grew inside me. Rabia feels she should have been given the right to see the children and she still demands for that right if possible and asked me if I could help her in that.

Social Stigma

People talk in their community, they talk ill about the women who have done surrogacy. But egg donation is more common, even young girls go for donating eggs from the community.

Financial Impact

Madeeha and Rabeena have bought a house. This is a small apartment, one room in a huge building. The surroundings of the building and within the building is very unkempt with garbage strewn around. they bought two small apartments of Rs 50 thousand each and they get rent from the houses, Rs 10 thousand per month. The house runs on that money. Additionally Madeeha does some tailoring work. Their husbands still don't work.

Saara has bought an autorickshaw on monthly instalment for her husband to drive and they get a stable income with that. She has also bought a flat. The flat in this locality is comparatively very cheap than other areas in Ahmedabad.

On repeating surrogacy

No never, Madeeha said without thinking even for a second. "I will never have the courage to do it again", she said.

As an agent

Madeeha recommended Saara to the clinic and she received a commission of Rs 25 thousand after her surrogacy.

Contract

They were not given any proof of the surrogacy. The file was kept there. They were made to sign and all the documents remained at the clinic. They don't give anything. They don't even allow the surrogate mothers to take a photo of the clinic.

Fair

The money given is unfair but they were helpless. Madeeha's and Rabeena's husband were alcoholic too. Madeeha's husband would drink and be violent with her. Her daughter died because she couldn't pay attention to her health. Then she had this boy child, he too was very sick all the time.

The commissioning parents pay anything between 12 to 25 lakhs to the clinic.

The agent

Raju Bhai the agent who took these women from Ahmedabad to Kerala, left her at Cochin station and ran never. He changed his number and has never shown his face after that.

42 Deepa

Both Deepa and her husband are working as agricultural labourers. They earn Rs 60 per day each. This was a very short interview, she continued complaining about the money she feels the clinic has pocketed.

She was worried about a Rs 20 thousand that the commissioning parents said they had given to the clinic to pay her, but the clinic say they never received such an amount. Most of her interview she repeatedly referred to this lost money. There has been a fraud of Rs 20 thousand rupees. The commissioning parents ask her where is the Rs 20 thousand, where did it go?.

She is 40 years old, boy is 21y years old

She has studied only upto 5th class, her parents didn't have the money to educate her . Her daughter studies in Baruch. She is educating her with the money she has kept in fixed deposit.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1 2	2009 2012	Anand Anand	Asha Asha	1g 1g	3	Canada, NRI.Mary Jacob America, NRI, Bindu.

Some acquaintance informed her about surrogacy, She was apprehensive and scared at first. "But they were helpless, we have no money. Whatever happens, I left in the hands of God and went."

Financial impact

She spent 50 thousand rupees of her first surrogacy here and there. Then spent the rest on building a house. But it was insufficient and hence she repeated surrogacy again.

Relationship with the Commissioning Parents

Both the commissioning parents came 10/15 days after the delivery of the child. The children were born of 3 kilograms but since the commissioning parents had not arrived, they kept the child in a children's hospital with a nanny. She was also in the same hospital but she was not allowed to interact with the children.

Health Impact

She is unable to work like before after three caesareans. She has a lot of weakness since the two surrogacies. They have built a house. They are now doing agricultural labourer work but she can't work like before. She's worried about her daughter who is studying in Baruch and her marriage...

Remuneration

It is unfair.

Monetary Impact

Although they are both agricultural labourers, they were able to build a house with the surrogacy money.

43. Deepa

This was a very short interview too, she was dodging most of the questions. It was only after Deepa joined at her house, that she started opening up more about her true experience.

Both she and her husband are working as agricultural labourers. They have money to survive and a house that they have constructed with the surrogacy money. She has saved Rs 50 thousand and she has saved that money for her children's education.

Her son is studying in 12th but he left his studies and is now looking for work.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2012	Anand	Asha	1b, 1g	4	NRI
2	2014	Anand	Asha	1g	3	NRI

Overmedicalisation

She says there was too much medicines in her pregnancy. She was very uncomfortable with the intrusive medical procedure. But she went again because the money she received for the first surrogacy for insufficient for building a house. She has built a big house in the village. They already had a land.

Health impact

Clinic doesn't encourage when surrogate mothers return to complain about any health impact Since she has had caesarean, she often has severe headaches. She also has severe pain in her abdomen, She cannot do much work. She has painful hardened lumps in the place where she regularly received injections on her back.

Clinic

Surrogate mothers are now allowed to meet the doctor anymore. Her need for their body is over, she doesn't speak to any surrogate mothers anymore. When she was in the clinic the clinic was good, but the commissioning parents gave them some money

Pension

According to her, in 2012, Madam promised them that she will give the surrogate mothers a minimum pension. At least Rs 2000 they should get as a pension. She approached the doctor twice to request her to give a pension to the surrogate mothers. She keeps on postponing, "I'll give you later and that later never arrives".

As an agent

She doesn't take anyone. She says suffered so much of sorrow in the procedure, why would she take another woman for this. Her conscious does not allow it.

She doesn't have a daughter, but she would never allow her next generation to go for this. She suffered for the sake of their well-being.

Relationship with the children

She provided them with breastmilk using a pump. It was painful to use the pump immediately after a caesarean. The commissioning parents insisted that she should provide her milk. She provided the milk for 15 days. She was lodged at the children's hospital for the benefit of the children, to

be close to them so that the breastmilk does not need to be transported. But she was not allowed to go near the children both times.

Relationship with the commissioning parents

She gave their number to the commissioning parents but they never called up after they left with the children.

They gave her a number but they tried calling on that number but it is invalid.

Financial impact

She made a house, on the top floor they have one room with a huge open area. They prefer to stay upstairs because there is open space.

Contract

She was not given a copy of the contract. Even if she asks them, she will not give it the surrogate mothers. She requests me to go and talk to Dr. Nisha to give pension to the surrogate mothers.

44. Megha

Interview in Umreth village.

She is 33 years old, she has studied up to 10 class, she passed. Beyond that her parents wanted her to study but the high school was far away at Dakor so she discontinued, "*I didn't study, then I began working in agricultural field, then I got married*". (she laughs)

She has one son 10 years old studying in 4th class and one girl child 7 years of age studying in 2nd.

Siblings

3 sister one brother. Youngest was Megha.

The brother is the third child. Brother has studied until 9th and 2nd sister only until 7th. When the second sister was born her sisters dropped out to look after her. The others are non-literate. In the village if the second or third child is born the elder children are retained at home to look after the younger children. Her elder sister was pulled out of school for this purpose.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2016	Anand	Asha	2 boys	7	Singapore

People started talking about surrogacy and some women also went to the surrogate home, so she got to know from them.

Social Stigma

Here in this village some women had gone for surrogacy, and that's how she got to know about surrogacy. People used to talk about it. And she heard about surrogacy.

People who talk bad about surrogacy they keep talking. For her, her husband understands that's the most important.

At the surrogate home

She was staying at a make shift apartment with 12 other women and then they were moved to the new hospital during her pregnancy. The clinic facilities was good, but she didn't feel happy staying there. Everything was closed in the basement, no fresh air. They keep calling her all the time requesting her to become a surrogate mother again, but she refuses. She hated it in the new clinic, it's more like a cage.

Both the women again discuss that Trupti from the clinic was calling all surrogate mothers that surrogacy is going to close down so whoever wants to come please come to the clinic. So if they can start medication, it would be great. All the ongoing agreement will remain, otherwise new cases cannot be easily taken after the surrogacy Bill is passed at the Rajya Sabha.

But Megha didn't go because she didn't like it there. She has had enough of surrogacy in one time.

Relationship with commissioning parents

"They may surely have our contact, they take it from the clinic, but they never give their contact number to us. That's the rule of the clinic. The clinic will never give the contact of the commissioning parents to us. They can avail to our contact during the surrogacy. They are given our phone number to enquire about us and talk to us."

She feels bad that they don't keep in touch. We cut open our stomach only for their children, for our children we have normal deliveries. They rented our womb, used us like a material, paid some

money and left, as though we mean nothing more to them. No humanity in them, at least once in a year wouldn't they remember us and call us up, if they have any humanity left in them.

Both Manjula and Megha start discussing about how inhuman the commissioning parents behave. In the last three years, no phone call, says Megha.

Manjula says, they think they have given us money, Megha says at least if they send us the children's photo ponce a year, it would be so good.

"They should **understand** by themselves, regardless of what the clinic instructs them. At least once in a year they should remember us. They behave with us so well when we are carrying their baby in our womb, then after they leave from here, they don't even send a message."

Contract

"They never give us a copy of the contract. They don't show us how much money is written on the contract. They always pay the surrogate mother lesser than what is written on the contract and lesser than what the commissioning parents pay for us. They take a lot more from the commissioning parents."

The clinic had charged the commissioning parents a huge amount, a total of Rs 33 lakhs (\notin 42000) for the entire hospital expenses. She had seen this bills just by chance.

Relationship with the children

She saw the children, she was in the clinic for 15 days after the surrogacy waiting for the payment. She didn't get much milk, so she was not asked to provide breastmilk.

She asks me about the law, has surrogacy closed down. I told them that it will depend on the forthcoming elections.

Relationship with the clinic

She talks about one surrogate mother, Gita who went once for surrogacy and the on the repeated request of the clinic she went again. For the second surrogacy, the doctor attempted IVF trial on her 6 times. After her caesarean, she experienced severe stomach pain and her urination stopped. When she was checked thoroughly, they found that both her kidneys had failed. The doctor prayed to God, there was a talk that her husband gave his kidney for her.

She became pregnant but in the process Gita experienced kidney failure. Although the clinic helped her with the treatment, Gita's life is badly affected.

Megha says, the clinic doesn't give the details of the illness and diseases the commissioning parents may carry, but all the information of the surrogate mother is taken in detail and informed to the commissioning parents. *"It's ok is we get thyroid or any other disease, who cares."* The doctor told Megha that the commissioning parents had thyroid and she also contracted this disease and she was taking medication for a long time. Now she doesn't have the disease but some diseases stick on to many surrogate mothers. She feels the clinic should warn the surrogate mothers about the possibility of contracting these diseases.

She says, her (Dr. Nisha`s) hospital ran so well because of surrogacy and because of the surrogate mothers. She doesn't care about the surrogate mothers anymore.

Health impact

She has continued abdomen and back pain because of the injections. When the weather becomes cold, she has back aches, the caesarean operation area aches. Especially when she does a little extra work, she gets all these pains. She says, she cannot pick up as much weight as she used to before.

Financial impact

She kept Rs 5 lakhs in a fixed deposit. She educated both her children in English medium school.

As an agent

"Never, if something happens to somebody. There was a newspaper article that a woman named Seema died in Ahmedabad during egg donation. For 20 thousand rupees a woman lost her life, this is sad. The lady who took her to the clinic has been convicted for three years of imprisonment.

I sacrificed my health and risked my life, but I will never put another woman through this risk just to earn an extra Rs 10 thousand rupees". If I die or if I am jailed, my children will come on the streets, I would never even think or talk about taking anyone for surrogacy."

She would never allow her children to do this.

45 Raksha

She was married off when she was 16 years old- She`s married since 28 years. She is now 44 years old. she is a non-literate.

She has 3 children, one is married and two are studying; 2 girls and one boy is 22 years old.

No.	Year	Place	Clinic	Child(ren) born	In lakhs	IPs
1	2009	Anand	Asha	1g	3	Indians, Keshav

Kalpika (SM 32) told her about surrogacy and took her to the clinic. Kalpika also told her husband about surrogacy. Then she had to go because they had nothing, no house basically. At that time, she was working in a hospital as a person cleaning and moping the floor. Kalpika was working in the same hospital. Her husband was working in the press, if there is work he goes, otherwise he`s at home.

Now after a paralytic attack her husband is bedridden at home and she is at home too. She is falling sick very often and she can't work much anymore after the surrogacy. So now her son is working as a labourer and he's the bread earner of the family. There's nobody else to work at home right now.

At the surrogate home

She was at a surrogate home a few kilometres away from the clinic. After her cervix was stitched (cervical cerclage), she was moved to the surrogate home inside the hospital. She was very upset and she didn't like it there at the hospital, but she needed money to rebuild the house so she had to go. Her entire time in the surrogate home was painful.

Delivery

She developed complications, she started bleeding with haemorrhage and her uterus had to be removed.

Remuneration

They gave her Rs 40 thousand extra.

Pregnancy

Soon after the embryo transfer she started bleeding and she was told by the doctor that she will have to be bedridden throughout the pregnancy and that she cannot move around at all.

Her cervix was stitched throughout her pregnancy and she was bedridden throughout. She experienced a very painful pregnancy time and eventually the haemorrhage and the removal of her uterus.

There was only one fetus in her womb so there was no selective abortions that was performed on her.

Financial Situation

Because they have a house, they don't have to pay rent. But her household runs on her suns agricultural labour earning. She cannot work anymore because of health problems and her husband is paralysed.

Health

She has severe abdomen pain. She gets fever often and has tremendous weakness. She used to work as a cleaner but nobody gives her work anymore since she's not doing well health wise.

Relationship with the children

They showed her the child but the baby was never given in her hands. She remembers the baby often. The baby would be 10 years old now. She never asked them to be allowed to hold the babies. She felt she had no right to ask anything. She doesn't have the photo of the baby girl. She would have loved to have it as a memory at least.

Relationship with the commissioning parents

They didn't give any phone number to her. The clinic personnel just showed her the baby once and after that they have never contacted her ever again. She doesn't have their contact. They called up when she was in the surrogate home.

As an agent

She went for surrogacy after that she has never gone to the clinic again.

Conclusion

She built a house with the surrogacy money, but she has gone back into abject poverty because her health suffered badly and her husband`s paralysis. Her health problems continue without much support from either the clinic or the commissioning parents.

APPENDIX 2 Tables

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Context of Surrogate Mothers

8		Percentage
Earnings in	Number of	of
Euros per year	households	households
less than 1000	23	51
1000 to 2000	10	22
2000 and above	8	18
Not known	4	9
Total	45	100

Table 1: Income group of Surrogate Mother's (SMs) Households

Motivation

Table 2: Ability to make money in a short time

	Surrogacy as an opportunity		
	to make money in a short	Number	% of
	time	of SMs	SMs
1	Yes	45	100.0
2	No	0	0.0
	Total	45	100.0

Table 3: Willingness to do surrogacy if the money was lesser

	Will do surrogacy for	Number	
	lesser money	of SMs	% of SMs
1	Yes	41	91.1
2	No	4	8.9
	Total	45	100.0

Table 4: Willingness to do Surrogacy if there was no money

	Will do surrogacy for no money	Number of SMs	% of SMs
1	Yes	0	0.0
2	No	45	100.0
	Total	45	100.0

Decision-making

Table 5: Concerns regarding surrogacy

	Had Concerns	Number of SMs	% of SMs
1	Yes	43	95.6
2	No	2	4.4
	Total	45	100.0

		Number	
	Kind of Concerns	of SMs	% of SMs
1	Convince one's spouse	3	6.7
	Relationship with		
2	relatives	16	35.6
3	Medical Protocol	37	82.2
4	Family Organisation	24	53.3
5	Other	2	4.4
	Total	82	182.2

Table 6: Kind of Concerns

Table 7: The person who cleared the SM's concerns

	The person who	Number	
	cleared their concerns	of SMs	% of SMs
1	Medical Practitioners	11	24.4
2	Husband	19	42.2
3	Relatives	5	11.1
4	By themselves	5	11.1
5	Surrogacy agent	22	48.9
6	Other	1	2.2
	Total	63	140.0

Selection Procedure

Table 8: Selection Criteria of the Clinic

	Existence of a Selection Criteria	Number of SMs	% of SMs
1	Yes	38	84.4
2	No	6	13.3
3	Don't know	1	2.2
	Total	45	100.0

Table 9: Surrogate Mothers having a Dissatisfaction with Selection Criteria

	Dissatisfied with	Number	
	Selection Criteria	of SMs	% of SMs
1	Yes	12	26.7
2	No	33	73.3
	Total	45	100.0

Table 10: Surrogate Mothers allowed to Choose Commissioning Parents (CPs)

	SMs allowed to choose	Number	
	CPs	of SMs	% of SMs
1	Yes	0	0.0
2	No	45	100.0
	Total	45	100.0

Surrogate Home

Table 11: Surrogate Mothers were Forced to Leave Family

	SMs forced to leave their family	Number of SMs	% of SMs
1	Yes	42	93.3
2	No	3	6.7
	Total	45	100.0

Table 12: Surrogate Mothers were Free to Eat Anything

	SMs free to eat anything	Number of SMs	% of SMs
1	Yes	6	13.3
2	No	39	86.7
	Total	45	100.0

Attachment with the Baby

Table 13: Attachment to the Surrogacy Child same as the SM's Own Child

	Attachment to the Surrogacy Child same as the SM's own Child	Number of SMs	% of SMs
1	Yes	44	97.8
2	No	1	2.2
	Total	45	100.0

Table 14: For those who didn't feel the level of attachment was same to one's own child; the level of attachment felt.

	The level of attachment, if the attachment was lesser	Number of SMs	% of SMs
1	Stronger link with own child		
2	Lesser link	1	2.2
3	Weak link		
	Total	1	2.2

Table 15: Surrogate Mother thinks about the Child(ren)

	SM thinks about the Child(ren)	Number of SMs	% of SMs
1	Yes	44	97.8
2	No	1	2.2
	Total	45	100.0

	SM thinks wants to keep in Contact with the Child(ren)	Number of SMs	% of SMs
	Yes, wishes to keep in		
1	contact	44	97.8
2	No	1	2.2
	Total	45	100.0

Table 16: Surrogate Mother`s Desire to keep in Contact with the Child(ren)

Table 17: Surrogate Mother`s opinion about Surrogacy being an acceptable way of Childbearing

	SMs acceptability regarding surrogacy	Number of SMs	% of SMs
1	Yes, it is acceptable	21	46.7
2	No, it is not acceptable	24	53.3
	Total	45	100.0

Psychological Consequence

 Table 18: Surrogate Mother`s feeling of sadness, nervousness or depressed postsurrogacy

	SM feels sadness, nervousness or depressed post- surrogacy	Number of SMs	% of SMs
1	Never	0	0.0
2	Rarely	1	2.2
3	Occasionally	16	35.6
4	Often	20	44.4
5	Very Often	8	17.8
	Total	45	100.0

Table 19: Requirement for Psychological Support felt by Surrogate Mothers

	SM feels requirement of	Number	
	Psychological Support	of SMs	% of SMs
1	Yes	26	57.8
2	No	1	2.2
3	Don't know about Counselling	17	37.8
4	No Answer	1	2.2
	Total	45	100.0

Financial Aspects

Table 20: Surrogate Mother`s Opinion regarding Fairness of the Surrogacy Payment

	SM feels the Surrogacy payment was fair	Number of SMs	% of SMs
1	Fair	12	26.7
2	Unfair	33	73.3
	Total	45	100.0

Table 21: Surrogate Mother's Willingness to Repeat Surrogacy

	SM`s Willingness to Repeat Surrogacy	Number of SMs	% of SMs
1	Will Repeat	6	13.3
2	Will not Repeat	39	86.7
	Total	45	100.0

Table 22: Surrogate Mother`s Willingness to Refer a Friend into Surrogacy

	SM's Willingness to Refer a Friend into Surrogacy	Number of SMs	% of SMs
1	Yes	8	17.8
2	No	37	82.2
	Total	45	100.0

Table 23: Surrogate Mother`s Willingness to Send her Daughter into Surrogacy

	SM`s Willingness to Send her Daughter into Surrogacy	Number of SMs	% of SMs
1	Yes	44	97.8
2	No	0	0.0
3	No Answer	1	2.2
	Total	45	100.0

 Table 24: Surrogate Mother`s Willingness to Refer Someone into Surrogacy as an Agent

 in return for a Payment

	SM's Willingness to be an Agent for remuneration	Number of SMs	% of SMs
1	Yes	12	26.7
2	No	33	73.3
	Total	45	100.0

Judicial Aspects

Table 25: Surrogate Mother`s Perception that the Surrogacy Contract Protected the Pregnancy

	SM felt the Surrogacy Contract Protected the Pregnancy	Number of SMs	% of SMs
1	Yes	3	6.7
2	No	42	93.3
	Total	45	100.0

Table 26: Surrogate Mothers in Possession of their Surrogacy Contract

	SM has a copy of the surrogacy contract	Number of SMs	% of SMs
1	Yes	0	0.0
2	No	45	100.0
	Total	45	100.0

Table 27: Surrogate Mother`s Trust on the Medical Practitioners during the Surrogacy

	SM Trusts the Medicos during the surrogacy	Number of SMs	% of SMs
1	Trust	5	11.1
2	Don`t Trust	40	88.9
	Total	45	100.0

Relationship with the Commissioning Parents

Table 28: Surrogate Mothers in Contact with the Commissioning Parents

	SM in Contact with the Commissioning Parents	Number of SMs	% of SMs
1	Yes	3	6.7
2	No	42	93.3
	Total	45	100.0

Fundamental Rights

 Table 29: Freedom allowed to Move freely during surrogacy (as a Fundamental Right)

	SM allowed to move freely during surrogacy	Number of SMs	% of SMs
1	Yes	4	8.9
2	No	41	91.1
	Total	45	100.0

	SM allowed to eat freely during surrogacy	Number of SMs	% of SMs
1	Yes	7	15.6
2	No	38	84.4
	Total	45	100.0

Table 30: Freedom to Eat Whatever they Desire (as a Fundamental Right)

Table 31: Freedom to have sex with husband (as a Fundamental Right) Image: Comparison of the second sec

	SM allowed to have sex with husband during surrogacy	Number of SMs	% of SMs
1	Yes	0	0.0
2	No	45	100.0
	Total	45	100.0

Table 32: Their Level of Poverty as perceived by the Surrogate Mothers

	The level of poverty as perceived by SM	Number of SMs	% of SMs
1	Great Poverty	11	24.4
2	Poverty	21	46.7
	Above Subsistence		
3	Level	13	28.9
	Total	45	100.0

Table 33: The Surrogate Mother`s Perceived State of Vulnerability when Surrogacy was Proposed to them.

	The level of vulnerability as perceived by SM	Number of SMs	% of SMs
1	Vulnerable	37	82.2
2	Not Vulnerable	8	17.8
	Total	45	100.0

	Physical space and Respect was damaged/disrespected	Number of SMs	% of SMs
1	Yes	39	86.7
2	No	6	13.3
	Total	45	100.0

 Table 35: Experienced some form of Sexual Exploitation due to Provision of Reproductive/Sexual Organs

	Experienced some form of Sexual Exploitation	Number of SMs	% of SMs
1	Yes	30	66.7
2	No	15	33.3
	Total	45	100.0

Table 36: Surrogate Mothers felt that the period of pregnancy was a form of Slavery

	SM felt the surrogacy pregnancy was like Slavery	Number of SMs	% of SMs
1	Yes	42	93.3
2	No	3	6.7
	Total	45	100.0

APPENDIX 3 Questionnaire in English

SURVEY OF INDIAN SURROGATE MOTHERS

DATE OF SURVEY :

NAME :

Place of residence:

I. CONTEXT

1.1. Age:

1.2. Family situation :

- □ In relationship, married, with a partner
- \Box Single
- □ Divorced
- \Box Widow

1.3. Education:

1.4. Reasons for dropout.

1.5. What professional activity did you have before being a surrogate mother ?

1.6. Husband`s occupation?

- **1.7.** Annual housheold income (about) : Rs 36000 per year (€462 per year).
- **1.8. Do you have children?** □ YES□ NO
- 1.9. If "Yes", number of children:

1.10. How many times have you been a surrogate mother |

II. MOTIVATION

2.1. From where/whom did you get the idea of becoming a surrogate mother?

- □ through relations (friend, family, acquaintance)
- \Box surrogacy agent
- □ Media, newspapers, books, internet
- □ Publicity
- \Box Direct advertisement of a clinic
- □ Other:

2.2. What was your main motivation (only one choice)

- □ Ability to make money in a short time. For what purpose?
- \Box Allow a sterile couple to have a child
- □ Other:

2.3. If the surrogacy brought you less money would you have chosen to carry the child to another?

 \Box YES \Box NO

2.4. If there was no money involved would you have chosen to do surrogacy ?

 \Box YES \Box NO

III. DECISIONS

3.1. When you learned about surrogacy opportunity were you immediately receptive to the idea or did you have concerns and fears about it?

- □ Immediately responded positively
- \Box Concerns and fears

3.2. What were the main difficulties in making the decision to become a surrogate mother?

- \Box Convince one's spouse
- \Box Relationship with relatives
- □ Medical protocol
- □ Family organization
- □ Other

3.3. If you had concerns and fears about the idea of surrogacy, who finally convinced you ?

- □ Medical professional
- □ Husband
- \Box Relatives
- \Box Alone because of the need of money
- □ Surrogate Agent
- \Box Other

IV. SELECTION PROCEDURE

4.1. Did the clinic have any criteria for selecting surrogate mothers ?

 \Box YES \Box NO

please specify

4.2. Did you feel any kind of discomfort or dissatisfaction with this procedure ?

 \Box YES \Box NO

4.3. Were you allowed to choose the intended parents? □ YES □ NO

V. MEDICAL ASPECTS

5.1. Can you specify by three words the memories that you have of medical examinations and medical procedures that is necessary for implantation of the embryo?

□ □ □

5.2. Have you been forced to leave your family home during all or part of the pregnancy?

 \Box YES \Box NO

5.3. Have you been forced to eat at the medical care center or were you free to eat whatever you wanted during the pregnancy ?

□ FREE □ MEALS COMPULSORY AT THE MEDICAL CARE CENTER

5.4. Can you describe the progress of your pregnancy in three words?

•	•	 •	•	•	•	•		 •		•	•	•	•	•	•	•	•	•	•	•	 	•	•	•	•	•	•	•	•	•	•	•	•	•	•••	
•	•		•	•	•	•	• •	 •	•	•	•	•	•	•	•	•	•	•	•	•	 		•	•	•	•	•	•	•	•	•	•	•	•	•••	
•	•		•	•	•	•		 •		•	•	•	•	•	•	•	•	•	•	•	 		•	•	•	•	•	•	•	•	•	•	•	•		

5.5. Can you describe the course of your delivery in three words?

•	•	•	 •	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
	•	•	 •	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
•	•	•	 •	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	

5.6. What were the other rules (at the surrogate home/ or for remaining at home) Please describe

VI. LINKS WITH THE BABY

6.1. During the surrogacy pregnancy, do you think you have created the same relationship with the child you were carrying as if it had been your biological child?

- □ Yes
- □ No

6.2. If no, what difference in the link did you feel:

- □ Stronger link than with a biological child
- \Box Link less strong than with a biological child
- \Box Weak link with the child worn
- \Box No special relationship with the baby
- □ Other :

6.3. During pregnancy, how did you feel about the child you were carrying? (quote 3)

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6.4. After giving birth, how did you feel when giving the child to your "sponsor" parents?

 \Box She was also in the same hospital but she was not allowed to interact with the children. They were taken care of, by a nanny.

6.5. Do you ever think of this child today?

- □ Yes
- □ No

6.6. Would you like to keep in touch with this child in the future?

- \Box Yes
- □ No

6.7. How do you feel today when you think about this child that you gave birth to?

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6.8. Do you think surrogacy is a acceptable opportunity for a child to be conceived?

- \Box Yes
- 🗆 No
- Why?

It gave her an opportunity to earn money.

VII. PSYCHOLOGICAL CONSEQUENCES OF SURROGACY

7.1. Since the birth of the child, do you happen to feel sad, nervous or depressed:

- \Box Never \Box Rarely \Box Occasionally
- \Box Often \Box Very often

7.2. Do you think the surrogate mother should get psychological support during pregnancy and after delivery?

- □ Yes
- □ No
- □ don't know what psychological counselling means If "Yes", why ?

.....

VIII. FINANCIAL ASPECTS OF SURROGACY

8.1. Do you think you were fairly paid as a surrogate mother ?

☐ Yes □ No Please explain

8.2. Would you be/were you willing to be a surrogate mother again?

Yes
No`
In both cases, why?
Her purpose is served by going twice.

8.3. What will you/did you do with the money you earned ?

She bought a small land an built a house on it.

8.4. Would you advice to one of your friend or relative to become a surrogate mother ?

□ Yes

□ No

8.5. Would you advice your own daughter to become a surrogate mother?

□ Yes

□ No

why?

8.6. If you were receiving a financial compensation would you participate/ in extending the surrogacy market; or example by convincing new surrogate mothers ?

□ Yes

□ No

why?

8.7. What will be/has been your next professional activity after surrogacy? She is an agricultural labourer.

IX. JUDICIAL ASPECTS OF SURROGACY

9.1. Do you think that your surrogacy contract fairly protected you from the risks of pregnancy?

□ Yes □ No

□ No why?

9.2. Were you/are in possession of your surrogacy contract?

 \Box Yes

□ No

9.3. Do you/did you entirely trust the medical practitioners with whom you were in contact with, during the process of surrogacy?

 \Box Yes

 \Box No

X. RELATIONS WITH THE INTENDED PARENTS

10.1. Are you still in contact with the intended parents of this particular surrogacy ?

 \Box YES \Box NO If no, why ?.....

10.2. How would you describe the intended parents in three words ?

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10,3. How would you describe the relation you had with the intended parents in three words ?

 \Box Both the commissioning parents came from abroad 10/15 days after the delivery of the child.

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XI. FUNDAMENTAL RIGHTS

11.1. According to your surrogacy contract, did you have the freedom : To move wherever you wanted during the pregnancy :

 \Box Yes

□ No

11.2. To eat whatever you wanted during the pregnancy

 \Box Yes

□ No

11.3. To have sex intimates with your husband during the pregnancy

□ Yes

□ No

11.4. In general, were you in a situation of poverty when surrogacy was proposed to you?

 \Box great poverty

□ Poverty

 \Box above subsistence level

11.5. Were you in a state of vulnerability when surrogacy was proposed to you?

- \Box Yes
- \Box No

11.6. Do you feel that unforeseen constraints were exerted on you and you felt your physical space and respect was damaged or disrespected;

 \Box Yes

□ No

11.7. Do you feel that you have experienced some form of sexual exploitation because of the provision of your reproductive and sexual organs?

□ Yes

 \Box No

11.8. Do you feel that the period of pregnancy has been a period of servitude, in the sense of reduction to some form of slavery?

 \Box Yes

 \Box No

XII. COMMERCIAL SURROGACY VS/ ETHICAL SURROGACY

12.1. For those who have experienced the passage of the commercial surrogacy to the "ethical" (altruistic) surrogacy, has the amount of your financial remuneration decreased?

 \Box Yes

 \Box No

 \Box No passage

12.2. For those who have experienced the passage of the commercial surrogacy to the "ethical (altruistic) surrogacy", has the content of your surrogacy contract changed ?

□ No

 \Box No passage

12.3. For those who have experienced the passage of the commercial surrogacy to the "ethical (altruistic) surrogacy", has the experience your surrogacy changed in any way?

 \Box Yes

 \Box No

please explain

13. OTHER

Thenks for your organors

Thanks for your answers.

APPENDIX 4 Photos



Photo 6: Madhuri (SM1) Preparing Tea in her Kitchen

Photo 7: Madhuri's (SM1) Surrogacy Children





Photo 8: Dr Sheela and Gracy (SM2)

Photo 9: Sarala (SM3) in Parul`s House





Photo 10: Mercy's (SM8) Surrogacy Baby

Photo 11: Ujwala (SM9), Dr. Sheela and Deepti (SM10)





Photo 12: Charu (SM11) and her husband in front of their Collapsed house.

Photo 13: Dr Sheela speaking to Charu (SM11) and Vedha in Charu`s newly built house



Photo 14: Vedha (SM19), Dr Sheela, Kaavya (SM12) and Sarala (SM3) at Kaavya`s House



Photo 15: Kaavya's (SM12) Surrogacy Child





Photo 16: Kaavya (SM12) and Vedha's (SM19) reconstructed House

Photo 17: Gayatri (SM 13) and her daughters





Photo 18: Dimpy (SM15) and her husband

Photo 19: Dimpy's Surrogacy Baby Amita





Photo 20: Padma (SM18), Sarala (SM3) and Ujwala (SM9)

Photo 21: Kamala (SM22) and her Mother





Photo 22: Dr Sheela with Manjula (SM23)

Photo23:Radha (SM28)





Photo 24: Saadia (SM30) Living in a Shanty

Photo 25: Saadia (SM30), her household children and Dr. Sheela





Photo 26: Saadia's (SM35) Surrogacy Babies

Photo 27: Kalpika (SM32)





Photo 28: Sneha's (SM35) Surrogacy Baby

Photo 29: Sneha (SM35) and Dr. Sheela





Photo 30: Sneha (SM35), Sarita Dr. Sheela and Sarala at Sarita`s House

Photo 31: Sarita`s (SM36)Surrogacy Baby





Photo 32: Sarala (SM 3) and Madeeha (SM39)