

Submission from Lexi Ellingsworth, Stop Surrogacy Now UK - April 2025

1. What specific forms of violence are women and girls subjected to in the context of surrogacy?

Surrogacy is a form of violence against women and girls as it exploits women for their reproductive capability, dehumanises them to useful vessels, removes body autonomy, can disrupt future fertility, and reduces them to a 'solution' for infertility. Surrogacy sends a wider social message to men, women and children about what a woman's role in life is. This leads to a sub-class of women whose identity is fixed in their fertility, who find purpose in having children for others, but reject motherhood as they view child they give birth to as belonging to someone else.

Obstetric violence occurs in surrogacy. Last month, [video footage](#) circulated on social media showed a medical professional pushing violently on a surrogate mother's (SM) abdomen as she is in labour. A 2021 BBC documentary "The Surrogates" showed the commissioning mother making medical decisions over her employee's (the surrogate mother) body.

The largest study of surrogate pregnancies published last year studied 863,017 births in Canada between 2012 and 2021, of which 806 were for surrogacy purposes. This confirmed widely known risk to be x3 in surrogacy pregnancy, including sepsis pre-eclampsia and postpartum haemorrhage. Earlier studies name high blood pressure, preeclampsia or eclampsia, gestational diabetes, haemorrhage, infection related to pregnancy, pre-term labor, hyperemesis gravidarum, anemia, ectopic pregnancy, placenta previa, placental abruption, ovarian cysts, miscarriage, postpartum depression, and high blood pressure in the postpartum period amongst the risks. From a [2022 study](#) of 96 SMs "the most complications that one woman faced during her surrogate pregnancy, that she did not experience during her non-surrogate pregnancy or pregnancies, **was seven**."

On Surrogate Mother Morbidity, the Canadian study found 2.3% for unassisted pregnancy, 4.3% for IVF pregnancy, and **7.8% for gestational surrogacy** (a 3.3x increase).

Women are injured or die through surrogacy. Last month we heard via our international colleagues that a 25 year old Mexican woman passed away as a result of a surrogacy pregnancy due to postpartum hemorrhage. Last year a UK court case revealed a SM acquired a brain injury following an allergic reaction to anesthetics used in an emergency c section. Deaths of surrogate mothers are largely unrecorded and despite our request, the [UK's research unit](#) studying maternal morbidity does not gather routine data on surrogacy. Natasha Caltabiano, a UK SM for an older Irish commissioning couple who had 5 children, died aged 29. It was her first surrogacy pregnancy.

Egg harvesting cannot be considered in the vacuum of IVF as it is 'required' for both heterosexual and homosexual couples for the purposes of conceiving in surrogacy. Young women have been 'used' for these purposes. Anecdotally we have heard of young, vulnerable women in countries such as Georgia and Ukraine being targeted and in February this year, three young Thai women were rescued from an '[Egg and Baby Farm](#)' in Georgia. The Scottish government produced an advertising campaign in 2024 actively targeting women aged 18 and over to donate their eggs due to a "shortage". At the time of writing, MSP Ash Regan has called for a debate on both surrogacy and egg donation in the Scottish Parliament.

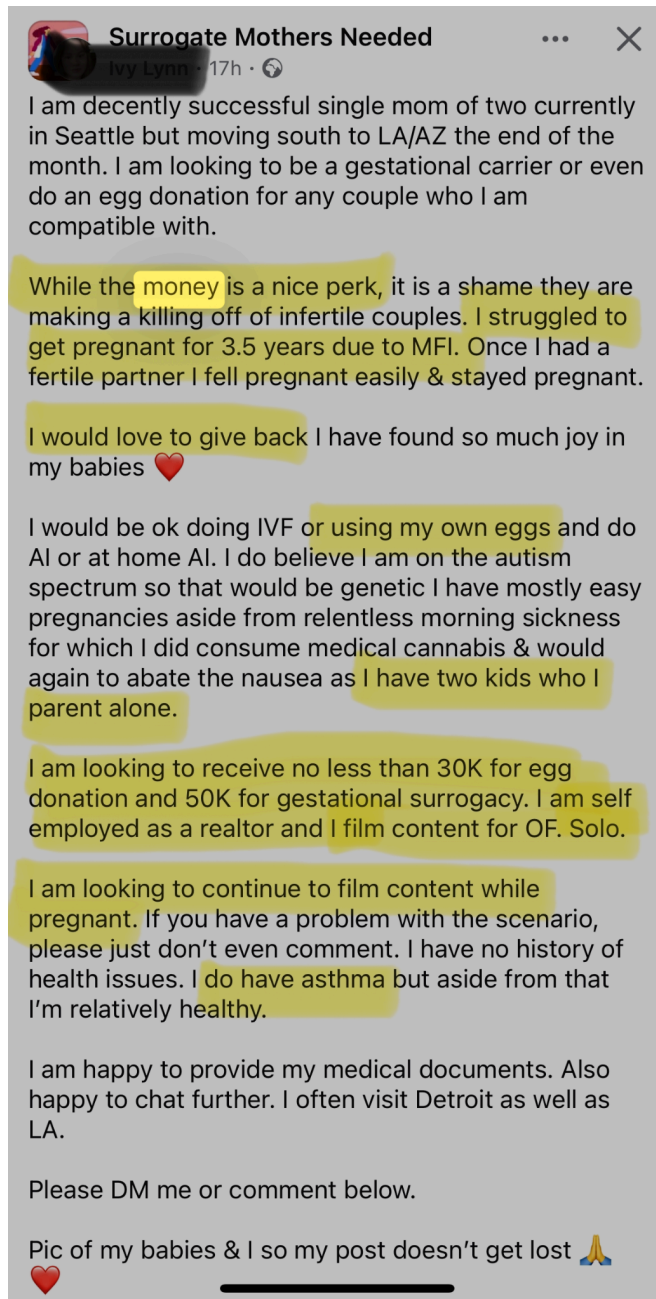
On 1st October 2024 the flat rate of 'expenses' increased to £985. A significant sum for students or women on a low income especially as the limit allows you to 'donate' up to 10 families.

A 2007 case recently resurfaced, exposing the case of a 16 year old having twins for a much older single man in China. The youngest girl who has been a surrogate mother in the UK was 16 when she was coerced by her adoptive mother in [2013](#). We believe that the second eldest was a single mother aged 19 when she decided to be a SM and was aged 21 when she had triplets for a couple, arranged through a US agency.

Women who have babies for others include breastmilk as part of the arrangement. In a 2016 Guardian Article, Julie Bindel: "Some of the women sell their breast milk, extracted by a pump at the clinic and delivered to the commissioning parents."

This is a recent UK example, Kim Eldridge, The Travelling Surrogate: "Expressing milk for the surrogate baby has been a much bigger commitment than I ever imagined. I never thought I'd be pumping every 3 hours during the day, and getting up at 3am every night. Recently I have wanted to cut my boobs off and throw them in the bin. From sore nipples, to nipple thrush, to full blown mastitis; it has not been an easy ride."

For women themselves, and for wider society, we see the view that the female body is a sum of useful parts that can be used by others for sexual pleasure or family planning, as extremely harmful. The extent of this is helpfully encapsulated in this Facebook Ad (OF = Only Fans, for adult content).



2. How prevalent is the exploitation of women and girls in the practice of surrogacy?

Surrogacy in the UK is widely considered best practice but it also exploits women. UK law reform seeks to popularise surrogacy and make it more accessible and UK commissioning parents will still be able to exploit women overseas. No central records are kept on the import of children and we observe an increase in human trafficking scandals since our conception in 2019. We counted 4 news reports in November alone last year in Argentina, Philippines/Cambodia, China and India. There are no restrictions on countries for British commissioning parents in surrogacy, though there are restrictions on [international adoptions](#).

3. To what extent does surrogacy intersect with human trafficking, including for the purposes of exploitation, sale of children, or forced reproductive labour?

It is inherent. The movement of children from one place to another, even within the country meets the definition of trafficking from the UK Crown Prosecution says:

“Trafficking in persons” shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control of another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or removal of organs.”

Surrogacy is always reproductive labour, sexual exploitation, akin to slavery which includes the sale of children as even in ‘altruistic’ surrogacy, money changes hands. For us, pregnancy is the service and the baby - or ‘end product’ - is central to the undertaking of surrogacy but recognition of the child as a human being with their own rights is absent.

4. What accountability mechanisms exist to provide redress and protection for women and children who are victims or at risk of violence, coercion, or abuse in the context of surrogacy?

UK courts will rubber stamp overseas surrogacy cases “in the best interests of the child” as the child is already born. Even in cases where a child has no genetic connection with the parents in order for a Parental Order (PO) to be granted, an adoption order is granted.

There is no regulation for surrogacy agencies in the UK, there is for fertility clinics but there are no mechanisms that restrict surrogacy. (2020-2022 data from the Human Fertilisation and Embryology Authority shows that 61% of IVF-for-surrogacy in 2022 was likely for "male same sex couples".)

In 2007 a UK judge named surrogacy agency Childlessness Overcome Through Surrogacy (COTS): “The traffic in young babies for adoption between one country and another is rightly now the subject of very strict control and is only authorised after proper and detailed scrutiny by the social services and other authorities. It is therefore a matter of significant concern that COTS has, albeit naively, been involved in the **activities that I have described which are, and have long been, outside the law.**”

However, there were no sanctions, restrictions or penalties applied to the longest running UK agency at the time of this ruling.

5. What are the consequences of surrogacy for all parties involved? What are the gendered risks for surrogacy-born children particularly girls?

For all surrogate-born children there is a risk they will be raised by someone who meets background checks but abuses, or plans to abuse, a child. See this case of private music tutor [Cameron Shaw](#), the well-reported cases of [Mark Newton and Peter Truong](#) and [David Farnell](#) and lesser-known cases from [Australia](#) and [America](#).

For girls there is a particular message that their bodies are useful for others and to be considered to be compassionate and kind, they should help those in need.

6. What link exists between surrogacy and stereotypes against women? How can surrogacy influence the image of women in society?

Surrogacy perpetuates sex-based stereotypes for women and girls, by ensuring their identity is fixed in their fertility and reproductive capability and women are encouraged to be kind and help others through 'choice feminism'. This is solidified by body autonomy arguments. Women may undertake surrogacy to 'pay it forward' (as a same sex couple) or wish to 'prove' they are a good person. Others mention loneliness as a motivating factor or say it is addictive. Many say the child isn't theirs and they are simply a 'oven' for someone else's 'bun'. We are concerned for what this messaging and dissociation in pregnancy result in long term.

We found [this 1994 study](#) of particular interest when discussing and exploring the motivations women have for becoming surrogate mothers.

7. What are the main factors driving the demand for surrogacy?

Normalisation and availability are the key drivers. Some would argue that same sex marriage created an expectation to have children which involves a third party. We argue that whilst same sex male couples make up roughly 50-60% of UK PO applications, it is a global increase in infertility and relaxed laws that brought on the sharp increase. There are no UK centrally kept numbers on a likely decrease in adoptions.

We have concerns of two new cohorts seeking surrogacy in the next decade; people who have 'transitioned' and are infertile and detransitioners who have, through no fault of their own, been left infertile or with decreased fertility.

8. What is the demographic and socioeconomic profile of women who become surrogate mothers in your country? Please provide disaggregated data where possible.

There is a general perception that SMs in the UK are of low income, but there are also women of middle income. We see trends of women with careers and interests surrounding pregnancy, birth and children/childcare such as teachers, midwives, nurses, doulas and childcare providers.

A small 2022 [study](#) asked 47 surrogate mothers about their employment.

"Regarding occupation, 12 surrogates identified as being in nursing, midwifery, or health care, seven were in teaching or childcare professions, and 11 in business administration, management, or accounts. Three were solicitors. Other roles included civil servant, police staff, a registrar, a hotelier, a retail role, two students, and two 'stay-at-home moms'."

And:

"Most responses (85%) indicated household incomes below £70,000. Four surrogates said their household incomes were above £80,000." But it's worth noting that 25% of the 44 who answered said they were on a joint income of less than £29k and another 30% said they were

on a joint income of between £29k-40k. So that's over half (55%) who are on significantly less than £70,000.

Footnote 31 suggests this was badly worded: "Given the different professions identified, it is unclear if all respondents gave an answer reflecting *personal* or *household* incomes, suggesting that both should have been asked for in the survey. Because of this, it is unclear what weight can be given to these answers."

9. What are the legal, policy or regulatory frameworks governing surrogacy in your country?

The Surrogacy Arrangements Act 1985 states that a PO cannot be applied for before 6 weeks after birth and must be applied for before the child/children reach 6 months old, but this has been overruled by the courts when exceeded. Reform proposals will copy the commercial model with pre birth orders and birth certificates will name the commissioning parent/s. Currently the mother is named and a new birth certificate is issued after the PO is granted.

Expenses must be 'reasonable' but this is not defined and it is not a requirement as PO's are granted when payments exceed 'reasonable expenses'.

10. How is the requirement to consider the child's best interests reflected and implemented in relevant laws, policies and regulations concerning surrogacy?

We do not believe it is, as in every surrogacy a child taken from mother at birth we don't believe this meets the best interests of the child. We understand in cases of [abandonment](#) the child/children are moved to foster care, as in any other case. We view surrogacy as child abuse as the newborn baby is taken away from their mother at birth, such as in this case where the child was removed after just [3 minutes with their mother](#).

At best, the maternal-baby bond is detached forever and early development is disrupted, at worst, surrogacy sees children trafficked across borders never to know their mother. At this point, we highlight media coverage that demonstrates how society's sympathy is directed towards the commissioning parents, away from the baby's loss.

This is from 2011, 11 years before Russia invaded Ukraine:

<https://www.theguardian.com/world/2011/mar/24/family-smuggle-surrogate-babies-ukraine>

This is after Russia invaded:

<https://www.latimes.com/california/story/2022-02-28/costa-mesa-couple-barely-escape-ukraine-with-days-old-newborn>

(Though there is general encouragement to tell a child of their genetic origins this cannot be forced by law.)

11. How is the child's right, wherever possible, to know and be cared for by his or her parents (Article 7.1 of the UN Convention on the Rights of the Child) taken into account in relevant laws, policies and regulations regarding surrogacy?

We see surrogacy to be in direct contravention of the UNCRC. A child's right to know and be cared for by their mother is ignored in the planning prior to conception and their right is removed at birth.

12. In countries where surrogacy is permitted or otherwise tolerated, what safeguards exist to prevent violence against surrogate mothers and children born through surrogacy?

A criminal records check of commissioning parents is required after birth and will be required prior to conception under proposed reform, however this will be conducted by Regulatory Surrogacy Organisations, not police or social workers and it is currently not clear if any training will be provided under reform proposals.

13. How effective have legislative, policy and regulatory frameworks been in preventing and responding to violence against women and children in the context of surrogacy?

The Law Commission of England and Wales and the Scottish Law Commission say: "...permitting only domestic surrogacies on the new pathway reflects our aim of incentivising UK parents to enter into agreements domestically, given the risk of exploitation of women in overseas jurisdictions."

However, whilst recognising the exploitative nature of international, commercial surrogacy alongside the new pathway, the 'old' pathway remains under reform proposals, as POs can be applied for and granted as normal.

14. What legal precedents, rulings, or judicial interpretations have influenced States' approach to surrogacy and its impact on women's and children's rights?

The 1984 Warnock report established the 1985 Surrogacy Arrangements Act. Subsequently the Brazier report recommended new legislation to tighten the rules on payments, and regulation of surrogacy agencies by the Department of Health but none of the recommendations were enacted.

In 2008 non-profit making agencies were made legal and in 2019 the law was amended to allow for single men and women to become the legal parent. (The foundation for the change in law in 2019 was a mother had a child for her son in his 20s who was single and prior to this there had to be two legal parents.)

15. What steps should States, regional bodies, and international institutions take to address violence and other human rights violations and abuses linked to surrogacy?

A global ban should be implemented as there can be no justification for this unethical, risky, socially damaging and controversial 'pathway to parenthood'.

16. How can international cooperation be improved to prevent, investigate, and hold perpetrators to account for violence and other human rights violations and abuses in connection with surrogacy?

Interpol can work with governments to investigate and prosecute child traffickers under local laws.

17. How can existing international human rights instruments be leveraged to address the human rights concerns related to surrogacy?

The UNCRC and CEDAW should be applied where ratified and enacted. The UK ratified CEDAW in 1986, therefore agreeing to take measures to ensure women's full enjoyment of human rights on an equal basis with men, including eradicating stereotyped roles for women, ensuring women's equal participation in public life and "the role of women in procreation should not be a basis for discrimination". We consider Articles 4, 5 and 12 under CEDAW to be applicable.

Articles 7, 10, 11, 18, 20 and 21 of the UNCRC are relevant to surrogacy. The UNCRC was ratified by the UK in 1991.

18. Should the possibility of developing a dedicated international instrument governing surrogacy be explored, and if so, what form should it take?

This has been attempted by the Hague Convention over the last decade and has so far failed, at great cost. The Casablanca Declaration met with The Hague on Private International Law earlier this month to stress that "no legal framework can make acceptable the premeditated separation of a child from their mother, the deprivation of their parentage, and their commodification through surrogacy, which turns them into the object of a contract."

19. Should a specific international instrument focus on banning or regulating surrogacy?

We support a global ban.