

Infertility, surrogacy in India

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Infertility is a growing problem worldwide. A World Health Organization report estimates that 60-to-80 million couples worldwide currently suffer from infertility.

In India, the WHO reports that infertility afflicts 3.9 percent to 16.9 percent of the population. Another study by the International Institute of Population Sciences in India says 15 million to 20 million couples in India suffer from infertility.

Holly Donahue Singh is a postdoctoral fellow at the Population Studies Center at the University of Michigan Institute for Social Research. For the last decade, she has studied the phenomenon in Lucknow, the capital city of the largest state in India. Her commentary, *The World's Back Womb? Commercial Surrogacy and Infertility Inequalities in India*, appears in in this month's *American Anthropologist*.

Singh sat down to discuss her research.

Q: What gets you excited about your research?

Singh: It really gets us examining and maybe thinking differently about fundamental issues of who we are and how we organize human life and how we think about human life. There's a very prominent medical anthropologist named Paul Farmer, who I'm drawn back to again and again. He says, "The idea that some lives matter less is the root of all that is wrong with the world." I think that's one of the key things when thinking about reproductive rights, reproductive justice because it's not

only about the people who are alive, but it's also about a vision about what future generations are going to be like. And we bring all of our biases, all of our preconceptions into that, and that's as true in the United States as it is in India, as it is in Europe, as it is in Africa.

Q: As somebody who works with infertility in India, what struck you about the news in November about the 13 Indian women who died after undergoing sterilization surgeries in a free government-run program?

Singh: It's shocking but not surprising because these kinds of camps have been going on for a long time. People in India are familiar with the '70s and the suspension of democracy and forced sterilizations that were carried out in that period. But because of that period, vasectomies got a lot of stigma attached to them, a lot of suspicion toward the government, and the slippery slope between what's [birth control](#) and what's population control. It's also very tricky. There are various levels of coercion that can be involved, and some people talk about even payment for sterilization as becoming a coercive force.

Q: During your research, what kinds of options did you see for couples with infertility?

Singh: In India, there are a lot of potential sources. A few government or public hospitals have started to offer some services, and there are various clinics in the private sector. This is something I heard in the field that [family planning](#) is not only about controlling and reducing fertility, but family planning is also about trying to plan a family, and that could take the form of assisted reproductive technologies.

One interesting example is when the tsunami hit in 2004, the state government of Tamil Nadu offered parents who had lost their children in the tsunami, and who had already been sterilized, to have that operation reversed so they could try for more children. Tamil Nadu is often used as a model for maternal, infant health, mortality, birth control, all of that.

Across India, total fertility rates, infant mortality and maternal mortality looks quite different from one state to another. Some southern states have fertility levels comparable to Europe where women have on average fewer than two children. But if you go north to states like Chhattisgarh, Orissa, Uttar Pradesh, it's more like three to 3.5 average births per women. There's a vast difference from one part of the country to another.

Q: Where does surrogacy fit in with infertility?

Singh: Clinics that could be offering [infertility](#) services could also be involved in surrogacy dealings because people who are infertile and looking for a surrogate could come to those clinics. Surrogacy is suddenly in the news in India because of a couple Bollywood stars who had surrogate children.

It is a complex issue. Compensation is one. It really quickly becomes about "Are you commodifying life?" Is this baby selling and baby buying? It all gets very complex in moral terms.

Also, who has rights to a baby that is born and who has obligations? They're real questions that people are attempting to deal with and that judges end up having to deal with when some of kind of dispute arises, when a child is abandoned, when a marriage breaks up in the middle of a surrogate pregnancy, as has happened, in the Baby Manjii case. A Japanese couple divorced in the middle of having a surrogate child in

India.

Q: What really surprised you from your research?

Singh: One thing that really surprised me was the resilience of so many women that I talked to. I had come into this research with a lot of ideas about how women are victimized. Women are given such a hard time. Women are already starting out with a bad deal.

What really surprised me is just how many people I talked to who were really dealing with very difficult situations, which could be stigma, family problems, financial problems, pressure from lots of people. But they were still optimistic, not only about getting a child but also optimistic about continuing their lives and dealing with it.

Provided by University of Michigan

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