

Surrogacy Fact Sheet



Definitions:

Surrogacy - An adult or couple who desire to have a child create an agreement with a woman that she will carry a baby during pregnancy on their behalf and, upon birth, surrender the infant to them for them to raise as their own child.

Commissioning/Intended Parents - Also referred to as Social Parents. These are the adults who desire to have a child and draw up a contract asking a woman to gestate a child for them. These adults may or may not: be the genetic parents, be married, be a couple at all but instead an individual, be homosexual, be sex offenders/pedifiles/traffickers/pimps/other types of criminals, be from a different country. There is no regulation or screening to limit who can commission the creation, gestation and birth of a child via IVF and Surrogacy or how many children they can obtain.

Altruistic Surrogacy - The adult(s) desiring a child approach someone they know or are related to with the prospect of carrying the child for them during pregnancy. This gestational/"surrogate" mother is not paid for the service itself, but may receive funds to cover costs such as doctor's visits, pregnancy supplies and inconveniences. Some countries allow only this kind of surrogacy.

Traditional Surrogacy - Uses the gestational/"surrogate" mother's egg and so relies on Intrauterine Insemination for fertilization. This method is not legal in contractual surrogacy in the United States.

In Vitro Fertilization (IVF)- The process of conceiving children via intracytoplasmic injection of a sperm into an egg in a laboratory setting and introducing the babies to their mother's uterus for implantation 3 to 5 days after conception or after a period of cryopreservation.

General Practice:

Commercial surrogacy in the United States begins with IVF (In Vitro Fertilization). Altruistic surrogacy can be "traditional surrogacy" where intrauterine insemination (IUI) is used and the baby conceived is the "surrogate" mother's biological child. Traditional surrogacy is less often used because of the legal trouble caused by "surrogates" being a genetic parent of the child and therefore having claim to parental rights at birth. The case of Baby M (Melissa Stern) in 1986.¹

Surrogacy typically costs between \$50,000 to \$220,000² depending on where you are, how many rounds of IVF you do, and who the commissioning parents choose as egg "donor", sperm "donor" and "surrogate".³

Surrogacy is heavily restricted in only a handful of states in the United States: Indiana, Louisiana, Alabama, Mississippi, Arizona and Nebraska.^{4 5 6}

¹ <https://cbc-network.org/2016/01/baby-ms-legacy/>

² <https://www.acrcglobal.com/post/surrogacy-statistics-2026-success-rates-costs-key-data>

³ <https://my.clevelandclinic.org/health/articles/23186-gestational-surrogacy>

⁴ <https://www.worldwidesurrogacy.org/blog/the-history-of-surrogacy-a-legal-timeline>

⁵ <https://surrogatebaby.com/surrogacy-laws-by-country>

⁶ <https://www.acrcglobal.com/post/us-surrogacy-laws-by-state-the-complete-2026-legal-guide-for-intended-parents>

Statistics:

Surrogate Employment: Employed full-time: 60% Part-time or freelance: 25% Stay-at-home parent: 15%
Repeat Surrogacy Trends: First-time surrogates: 65% Second journey: 25% Third or more journeys: 10%

Regional Market Distribution: USA: 40% of global market share, Europe: 28% of global market share, Asia Pacific: 22% of global market share (fastest growing), Rest of World: 10% of global market share

32% of surrogacy contracts in the US are “tourist” contracts.⁷

85% of gay couples looking to build their families do so through surrogacy.⁸

Approximately 40% of contracts are by people who have medical conditions preventing them for pursuing natural pregnancies.

Approximately 10% are for severe medical cases.

Approximately 50% are for intended parents who are LGBTQIA+

Approximately 2% of births annually are IVF and about 5% of those are surrogacy births which amounts to about 4,000 per year in the US.⁹

Genetic Screening of Embryos - The In Vitro Fertilization industry in the US is proud of its progress in the area of genetic screening of embryos before attempting implantation.¹⁰ Embryos are graded on a scale of A-F following screening. Parents can rank their embryos based on predicted features and implant those with the most desired characteristics in the first round. Typically, embryos ranked lower are discarded as medical waste, left frozen or “donated” to research labs.

Use of Egg and Sperm “Donors” in IVF and Surrogacy - The IVF industry is very transparent in this regard. On their websites and in their brochures, the IVF clinics encourage parents to choose carefully who they use as egg and sperm “donors”. They have lists of characteristics to consider including education and disposition as well as the usually thought of appearances. Some “donor” catalogues also supply videos of the men and women so that prospective parents can get a better sense of what personality traits might come through in their commissioned baby. Men and women who are young, attractive, athletic, educated and musical are paid more by the IVF industry for their gametes than “donors” who are not.

Abortion - Surrogacy contracts deal with abortion in detail in two categories - the first is termination. In this case, the pregnancy is aborted entirely. The second is selective reduction, which is done in the case of a “multiples” pregnancy (twins, triplets, quadruplets) in order to leave the “surrogate” mom carrying only one or two children. Commissioning parents and “surrogates” must agree on what conditions for baby and mom would trigger a termination of the pregnancy and what number of fetuses she is willing to carry and they are willing to parent. Some surrogacy agencies pair “surrogates” and commissioning parents based on their view of abortion since the issue has caused significant legal controversy over the years.¹¹

Surrogacy & Eugenics - The intersection between surrogacy and eugenics is less direct than in other areas of reproductive technology and more interesting for it. Often, the arguments in favor of surrogacy contain stories of people who are suffering from a physical ailment that makes it impossible to carry a child themselves.

⁷ <https://pmc.ncbi.nlm.nih.gov/articles/PMC10978240/>

⁸ <https://www.acrcglobal.com/post/surrogacy-statistics-2026-success-rates-costs-key-data>

⁹ <https://www.cato.org/briefing-paper/defending-gestational-surrogacy-addressing-misconceptions-criticisms>

¹⁰ <https://mynucleus.com/embryo/press>

¹¹ <https://surrogate.com/surrogates/surrogacy-contracts/surrogacy-contracts-termination-pregnancy/>

What we see, in reality, is those situations plus heavy usage by people who simply do not want to carry a child in their own body. It is not eugenics in the aspect of who will live and who will not (though that appears in the beginning of surrogacy during IVF, noted above) but in who will do the “menial” or risky work of carrying a child. The vast majority of “surrogates” are under significant financial stress and are “surrogates” because it pays the bills. In the United States, the largest group represented in “surrogate” mothers are military wives whose husbands are low on the pay scale. The industry screens “surrogates” to make sure they have “stable” living conditions but this does not necessarily reflect income or economic stability.

Surrogacy on the World Stage:

Commercial Surrogacy is legal in the following countries:

Albania, Argentina, Armenia, Belarus, Colombia, Cyprus (North), Georgia, Guatemala, Iran, Kazakhstan, Kyrgyzstan, Mexico, Ukraine, United States

Altruistic Surrogacy is legal in the following countries:

Australia, Belgium, Brazil, Canada, Cuba, Cyprus (South), Czech Republic, Denmark, Greece, Ireland, Israel, Laos, Netherlands, New Zealand, Portugal, South Africa, United Kingdom, Vietnam¹²

Core Moral Concerns:

Children born from surrogacy are separated from their mothers at birth intentionally - as laid out in the contract which was drawn up before they were conceived. In adoption situations, we recognize that it is hugely traumatic for a child to be permanently (or even temporarily, as in foster situations) separated from their parents. They experience it as a kind of death of part of themselves¹³. And yet, surrogacy contracts drawn up by adults who claim to love this child, intentionally create this trauma. Separation from mother is at the very core of surrogacy. Surrogacy cannot exist without it. It is because of this that surrogacy must be abolished.

Children born in surrogacy often have 5 parents: the egg “donor”, sperm “donor”, gestational/“surrogate” mother, social mother, social father. It is a well understood natural right that human beings have a right to be raised by their biological parents. In the case of 3, 4 or 5 parent-embryos (read: children) this natural right is being ignored. The fallout from violating this right has been seen in a widespread sense in both the realms of IVF, where the additional parents are intentional, and in adoption, where the additional parents are an attempt to restore to the child what has been lost.

Conversely, there also stands the natural right of parents to raise their biological children. You cannot send parents home with just any child from the hospital nursery. For the gestational/“surrogate” mother, this right is being denied in a situation that she should never have been asked to put herself in in the first place. Advocates for surrogacy here will jump at the opportunity to say, but the child isn’t genetically hers! And they are right in the primary sense. A wider view of biology, though, takes into account the physiological and neurological developments and bonding between mother and child during the course of a pregnancy. Despite lawyers and technology’s best efforts to separate them, a commissioned baby is truly the “surrogate’s” child.

Pregnancy includes mechanisms that bond child and mother together tightly with the intent of assuring the child’s survival - the end goal being that mother cannot bear the thought, let alone enact in reality, the abandonment of her child. The umbilical cord, severed minutes after birth, continues on in other ways. For the sake of brevity, one example to consider is that within five minutes of birth, a neonate can recognize her

¹² <https://surrogatebaby.com/surrogacy-laws-by-country>

¹³ The Primal Wound. Verier, Nancy. 1993

mother's face from a gallery of photos. In the case of surrogacy, if the commissioning parents have their way, she will never see this face again, though it is burned into her tiny, and extremely complex, mind by design.

The desire to have a child does not create the right to a child by any means technology avails us.

Surrogacy often involves other unethical practices such as abortion and eugenics as noted above. For more on these topics, please visit ichooselife.org/topics

When viewed from the perspective of children's rights, surrogacy has no standing. Studies have been done, however, to disprove any of the concerns about negative effects on the child. These state that after 10 years, children born via surrogacy do not show any significant differences from children born naturally and mostly view the conditions of their conception and birth in a positive light. This sort of study over-looks things such as children's tendency to be people pleasers or the trauma we see in other situations where infants are separated from their mothers such as in adoption.

Further human rights violations occur during surrogacy which can be seen from the perspective of the gestational/"surrogate" mother. You may notice in the data that exists on surrogacy contracts that it is never a rich woman carrying a child for a poor woman. It is never a rich woman carrying a child for another rich woman. Women depend on surrogacy as a kind of work, to earn a wage. And feminists draw the correct conclusion that this sort of work is the same as any other sort of sex work. She is renting/selling her body. Some argue that this is her right and acceptable as long as it is voluntary/consensual. But it is impossible to claim that it truly is voluntary/consensual when women are pressured by family members to carry children for other family members and when monetary pressures are present. In the United States, the single largest group of women serving as "surrogate" mothers are military wives whose husbands are low on the pay grade.¹⁴

When not in financial trouble, few women choose to be "surrogates". Those who do may be doing so out of familial pressures or because of trauma from earlier surrogate gestations. They crave the bonding they felt with babies in prior pregnancies and mourn deeply the loss of the child with whom they bonded and so they seek out the experience again in an attempt to relive the bonding experience.¹⁵

Alternatives:

- Recognize the suffering that comes from being thwarted in the desire to have a child.
- Learn how to walk through that suffering with grace.
- Note: We need to be conscious of our own speaking in this realm that we do not propose adoption as a solution to this form of infertility. Adoption does not exist to quench the desires of adults. Adoption exists for the good of the child and must be approached from that angle. That's not to say that adoptive parents cannot also desire a child; in most cases those two pieces together make for a great situation. But the desire that comes with infertility can quickly warp into an idol and children do not exist or come into existence, to fulfill adults' desires (read: make adults happy). Especially where homosexual relationships are part of the equation, adoption is not an ethical alternative to surrogacy because of the above dynamic.

¹⁴ Surrogacy: A Human Rights Violation. Klein, Renate. Spinifex Shorts, 2017

¹⁵ Surrogacy: A Human Rights Violation. Klein, Renate. Spinifex Shorts, 2017

Discerning Questions:

- **Are we working with and inside of God's Design for human life and dignity or asserting ourselves over and against it? Are we displaying God's created order?**
- **Are we seizing power that is God's alone or are we acting within the sphere of influence He gave us? Has something become an idol (we think we are dependent on it for our wellbeing and/or happiness)?**
- **Are we treating each individual involved with dignity? As an "end" in and of themselves and not as a means to an end?**
- Whose life, if anyone's, am I justified in ending?
- **Is the human body property? If so, who is the owner?**
- Who decides each person's worth?
- What's the limit to the expression of my liberty in regards to infringing on others' protected rights?
- **Who, if anyone, is being put at risk? Are there ways to minimize that risk? Are we acting on that? Has the person at risk consented to the risk?**
- **Who, if anyone, is sacrificing? Is that sacrifice voluntary? Is it necessary?**
- Is what I am considering permanent and/or irreversible for the people affected?
- Would I accept for myself what I am proposing for others?
- If we could save the baby/person, would we? Did we try?
- Do people bear responsibility for their own actions? Actions of others? Well being of others?
- Who is the aggressor? Who is a victim?
- Is there a financial component to the situation? Who gains financially? Who provides financing?
- Is a procedure "medicine" (curing what is broken) or "technology" (neither good nor bad intrinsically but depending on how it is used)?
- **Is this procedure medically necessary?**

Right to Life of Northeast Indiana Official Stance: (coming soon)**General ProLife Position:**

The prolife movement opposes the practice of surrogacy.

Surrogacy exists to serve the desires of adults and passes the high cost off to the children and surrogate mothers. Surrogacy intentionally separates children from their mothers at birth causing deep trauma to the children in the violation of their natural rights. Human beings and their bodies are not to be bought, sold, rented or commissioned. Surrogacy, in doing so, is a human rights violation that must stop immediately.

Suggested Reading:

[Surrogacy: A Human Rights Violation](#) (Spinifex Shorts), by Renate Klein, Nov 1, 2017

[The Primal Wound: Understanding the Adopted Child](#), by Nancy Newton Verrier, March 14, 2003

[Them Before Us: Why We Need a Global Children's Rights Movement](#)
by Katy Faust (Author), Stacy Manning (Author), Robert George (Foreword)

[Surrogacy - Whole Body Donation](#), I Choose Life News and Views with Michael Cook, May 27, 2023

[Can Surrogacy Really Be Altruistic Part 1](#) and [Part 2](#), I Choose Life News and Views with Kallie Fell, May 13 & 20, 2023

[Lutherans for Life Statement on Surrogacy](#)

[United States Conference of Catholic Bishops \(USCCB\) Statement on Surrogacy](#)

[Emotional experiences in surrogate mothers: A qualitative study](#). Iranian Study

“Surrogacy pregnancy should be considered as high-risk emotional experience because many of surrogate mothers may face negative experiences. Therefore, it is recommended that surrogates should receive professional counseling prior to, during and following pregnancy.”