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Gestational surrogacy: Psychosocial aspects

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ABSTRACT

Innovation in assisted reproductive technologies together with increased infertility and new family structures are increasing the use of gestational surrogacy as a means to have children. Before, during and after the process, it is necessary to study the psychosocial characteristics of triad members: the gestational surrogate, intended parents, and offspring. Research has indicated positive adaptation to the process and benefits for all members of the triad. Altruism is the main motivation of surrogates. Notably, psychological well-being has been found to be higher in individuals who have become parents through surrogacy than in those who have used egg donation or have followed a natural process of conception. Moreover, no differences in psychosocial characteristics have been observed in the offspring, compared with children born through natural conception or egg donation. Results highlight the positive aspects of surrogacy. Future research should investigate psychosocial factors that modulate the process, acting as risk and protective factors for well-being of the triad members, and identify the optimal profiles of surrogates for the process to be a success.

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Gestación subrogada: aspectos psicosociales

Palabras clave:
Subrogación
Padres de intención
Descendencia
Altruismo
Empatía
Autoeficacia

RESUMEN

La innovación en las tecnologías de reproducción asistida, junto al aumento de la infertilidad y las nuevas estructuras familiares, están aumentando el uso de la gestación subrogada como un medio para tener hijos. Antes, durante y después del proceso, es necesario estudiar las características psicosociales de los miembros de la tríada: la gestante, los padres de intención, y la descendencia. La investigación científica ha mostrado una adaptación positiva al proceso, además de beneficios para todos los miembros de la tríada. El altruismo es la principal motivación de las gestantes para llevar a cabo el proceso. Por otro lado, los resultados demuestran mayor bienestar psicológico en las personas que se han convertido en padres a través de la gestación subrogada en comparación con aquellos que han utilizado la donación de óvulos o han seguido un proceso natural de concepción. Por otra parte, no hay diferencias en las características psicosociales entre niños/as nacidos/as a través de la gestación subrogada y niños/as nacidos/as mediante concepción natural o donación de óvulos. Los resultados ponen de manifiesto los aspectos positivos de la gestación subrogada. En este contexto se hace necesaria la realización de estudios adicionales, con el fin de analizar los factores psicosociales de riesgo y de protección para el bienestar de los miembros de la tríada, además de identificar los perfiles óptimos de gestantes para que el proceso sea un éxito.

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The term gestational or host surrogacy refers to the process in which a woman carries and gives birth to the baby for another person or couple, who are called the intended parents (Brinsden, 2003). However, the concept and its definition have caused controversy, and it continues to be difficult to conceptualize.

Essentially, there are two types of surrogate arrangements: traditional and gestational surrogacy. Traditional surrogacy, also known as genetic surrogacy, refers to the process in which an embryo is created from the sperm of the intended father and egg of the gestational surrogate, the process usually being carried out

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through artificial insemination (Bhatia, Martindale, Rustamov, & Nysenbaum, 2009). In contrast, gestational surrogacy involves the creation of an embryo from the egg and sperm of the intended parents, a donated egg and sperm of the intended father, or donated sperm and eggs, and subsequent implantation of this embryo into a gestational surrogate, also called gestational carrier. Depending on the country, there is specific legislation for each type of surrogacy arrangement, just one or both types of arrangement being legal in some cases (Nakash & Herdiman, 2007).

Despite the fact that the process of gestational surrogacy involves interaction between the intended parents, the gestational surrogate and the child, in which psychological and psychosocial aspects become very important, there has been relatively little scientific research in this field to date. Analysis of the psychological and psychosocial characteristics of the intended parents and the surrogate is essential to identify and establish strategies that allow the process to be carried out successfully and maximize the positive outcomes for everybody directly involved. The objective of this review was to analyze the psychosocial factors that characterize each member of the triad and the relationships between them.

Gestational surrogacy

Although there have still been relatively few studies on this topic, research is starting to yield important data on the psychological characteristics of gestational surrogate (Klock & Covington, 2015). Studies on surrogates have mainly focused on the assessment and identification of factors motivating women to take on the role and be involved in the process of pregnancy (Jadva, Murray, Lycett, MacCallum, & Golombok, 2003).

Research to date has indicated that the main motivation for becoming involved in surrogacy is altruism (Ragoné, 1994; van den Akker, 2007). In fact, this is the main type of motivation reported by gestational surrogates not only in countries in which altruistic surrogacy is legal, such as the United Kingdom (Jadva et al., 2003; van den Akker, 2003), but also in countries that allow compensation to the surrogate, such as the USA (Hohman & Hagan, 2001). Fundamentally, the majority of gestational surrogates report feeling a sense of self-worth and achievement after the process, which in turn generates a sense of self-efficacy and leads to a notable increase in their self-esteem (Edelmann, 2004). Very few gestational surrogates cite financial gain as their main motivation for being involved in the process, and some even suggest that it should not be a factor in any surrogacy process (Blyth, 1994).

Analyzing the psychological well-being of gestational surrogates, before and during the process, it has been observed that most have to face opposition both from their families and society in general, and this may represent a significant source of stress (Poote & van den Akker, 2009). Despite this, surrogates generally declare that they enjoy their pregnancy and childbirth, and that the pregnancy generated positive feelings in their lives such as increases in self-efficacy and self-confidence (van den Akker, 2007). The birth of the child may be a significant stress-inducing factor, both for the intended parents and for the gestational surrogate. Nevertheless, various studies have demonstrated positive as well as negative aspects of this event. Specifically, the birth tends to be a happy moment for the surrogate, who reports a sense of relief about the success of the pregnancy and completion of the process; as well as sadness about it coming to an end, and the belief that they may lose contact with the intended parents and the child (Baslington, 2002; van den Akker, 2007).

Research has shown that, in the long term, gestational surrogate have good emotional stability and psychosocial adjustment, their scores for self-esteem and depressive symptomatology falling in the normal range, as well as good marital and family relationships (Jadva, Imrie, & Golombok, 2014). Further, the relationship between the intended parents and the children is very positive, with no reports of feelings of rejection on either side.

With respect to the formal evaluation of the psychological state of gestational surrogates, studies carried out so far have used the Minnesota Multiphasic Personality Inventory (MMPI) in its first (Franks, 1981; Hanafin, 1987) and second (Klock & Covington, 2015) versions. This questionnaire is intended to assess psychopathology and personality disorders and has been widely used and validated for this purpose, both in clinical and general populations (Butcher, 1989; Greene & Clopton, 2004). No studies have found significant differences between scores of surrogates and those of the general population, confirming the conclusion based on gestational surrogates' self- reports, that they are well adjusted, emotionally and psychologically.

Intended parents

Gestational surrogacy is increasingly widely used as a method to have children. The main motivations of intended parents for becoming involved in this complex process is to create a family and be able to enjoy the interaction with their child/children, as well as being able to give and receive love (Langdridge, Connolly, & Sheeran, 2000). In the specific case of gestational surrogacy, the motivation of the intended parents in using this method, as opposed to other options such as adoption, is mainly based on the desire to have a genetic link with their children (Langdridge et al., 2000), as well as having a relationship with the baby from birth and being able to follow the entire process of the development of the child, through the pregnancy and beyond. In the case of male same-sex couples, there may also be barriers and difficulties in the process of adoption, and hence surrogacy may be their only option for becoming parents.

The process may be stressful for the intended parents. Together with infertility or biological inability to have children, significant primary stressors, there are other factors associated with the process of gestational surrogacy that represent secondary stressors for intended parents (Edelmann, 2004; MacCallum, Lycett, Murray, Jadva, & Golombok, 2003). These factors include the initial search for a surrogate, relations between them and the surrogate throughout the process, and the attitudes of their family and society in general towards gestational surrogacy.

During the initial search for a gestational surrogate, at the start of the surrogacy process, compatibility is one of the main concerns for most people. The first contact with potential surrogates represents a primary stressor, due to the potential emotional burnout associated with the search process and negotiations with the candidates (Edelmann, 2004; van den Akker, 2000). In the event that they do not have common interests or no satisfactory agreement is reached between the parties, this tends not have a major impact on the intended parents at this early stage. As the process continues, however, disagreements at more advanced and key stages, such as during embryo implantation or during pregnancy, the psychological impact is much greater (Edelmann, 2004). Other common concerns of intended parents that may be secondary stressors and hence affect their well-being are: the possibility of the gestational surrogate being exploited financially; medicalization during pregnancy; a fear of not receiving the baby after the birth; emotional, legal and social stigma; the genetic link, in cases when only one member of the couple has been a donor; and various concerns about the well-being of the baby during the pregnancy and after the birth (Edelmann, 2004). All these concerns must be identified and taken into account in a timely manner, to avoid future problems for the intended parents themselves and in their relationship with the surrogate.

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